Approach to Adult Patient Unable to Maintain Nutrition

*Numbers refer to Flow Chart Reference Sheet on page 4

1* Adult Patient Unable to Maintain Nutrition

2 Perform global assessment and attempt corrective action.

3 Discussion with patient, Public Health Law Surrogate and § 1750-b Surrogate, family, health care agent about advance care directives, diagnosis, relevant risks, benefits of placing a PEG vs. not. Make recommendation.

Improvement?

- No
  - 3
  - Discussion with patient, Public Health Law Surrogate and § 1750-b Surrogate, family, health care agent about advance care directives, diagnosis, relevant risks, benefits of placing a PEG vs. not. Make recommendation.
  - 4
  - Discuss components of PEG and time-limited trial with specific goals.
  - 5
  - Complete Tube Feeding Guide on page 6. Consider incorporating in the medical record and for transmission to alternate sites of care.

- Yes
  - 6, 7
  - Careful attention to comfort care, consider hospice referral, complete MOLST (eMOLST).
  - Continue treatment as needed.

4 Discuss components of PEG and time-limited trial with specific goals.

5 Complete Tube Feeding Guide on page 6. Consider incorporating in the medical record and for transmission to alternate sites of care.

Guidelines are intended to be flexible. They serve as reference points or recommendations, not rigid criteria. Guidelines should be followed in most cases, but there is an understanding that, depending on the patient, the setting, the circumstances, or other factors, care can and should be tailored to fit individual needs.