

# Food and fluid protocol



Nursing  
Home

# Assessment and monitoring of the intake of food and fluid

## Step 1



### Screening

should take place within 24 hours of admission

#### Malnutrition - High Risk

#### Increased Risk of Malnutrition

#### Normal condition - No Risk

## Step 2



### Assessment

- Causes of malnutrition
- Assessment of the nutritional intake, e.g. by Food and fluid protocol

## Step 3



### Nutrition therapy

- Define the nutritional goals
- Define the individual nutritional requirements
- Define the route(s) of nutrition
- Define nutritional support and implement the nutritional therapy plan

#### Therapy of the causes of malnutrition

## Step 4



### Monitoring / Follow-up

- Documentation and control of the effectiveness of the nutrition therapy e.g. by Food and fluid protocol
- Adaptation of the nutrition therapy plan if necessary

#### Re-screening

##### every 1-3 months

(at no risk)

##### once per month

(at increased risk)

## How to complete a Food and fluid protocol?



**Example:** Assessment of the energy intake of a resident with a daily energy requirement of 2000 kcal

Breakfast (kcal)	Lunch (kcal)	Dinner (kcal)	Intake versus requirement	Supplementation	Energy gap	Examples of appropriate supplementation
XX XX 620	XX XX 760	XX XX 620	100 % of requirements	No supplementation necessary	0 %	-
XX XX 620	XX X 570	XX X 465	75 – 100 % of requirements	Energy and protein rich food and consider oral nutritional supplements (ONS)	< 25 % 100 – 400 kcal	Energy/protein rich food and/or 1 x Oral nutritional supplement (► 200 ml à 2 kcal/ml = 400 kcal)
XX X 465	XX X 570	XX X 465	50 – 75 % of requirements	Oral nutritional supplements	25 % 500 kcal	2 x Oral nutritional supplements (► 200 ml à 1.0 kcal/ml + 200 ml à 1.5 kcal/ml = 500 kcal)
XX 310	XX 380	XX 310	25 – 50 % of requirements	If possible: oral nutritional supplements, if not: supplementary or complete tube feeding. Consider parenteral nutrition if enteral nutrition is inadequate or impossible.	50 % 1000 kcal	3 x Oral nutritional supplements and/or tube feeding (► 2 x 200 ml à 2.0 kcal/ml + 200 ml à 10 kcal/ml = 1000 kcal) or Tube feeding (► 1000 ml à 1.0 kcal/ml = 1000 kcal)
X 155	X 190	X 155	< 25 % of requirements	For > 21–28 days: nasogastric tube feeding, for > 21–28 days: tube feeding via PEG. Consider parenteral nutrition if enteral nutrition is inadequate or impossible.	> 75 % 1500 kcal	Tube feeding (► 1000 ml à 1.5 kcal/ml = 1500 kcal)

**Source:** Dutch Malnutrition Steering Group (2011): Guideline Screening and Treatment of Malnutrition. [www.fightmalnutrition.eu](http://www.fightmalnutrition.eu).

Please see examples  
in practical guidance  
on p. 19-20

Name of resident

Energy requirements  
in kcal/d

Energy requirements  
in g/d

## Step 2/4 Food protocol

**Assessment** (3 days)    **Monitoring** (at least once a week)   **Legend:** Normal diet 0⊕ 1/4⊕ 1/2⊕ 3/4⊕ 1/1⊕

Date	kcal	g protein	Normal diet	Description/type	INI	Supplementation: type and quantity (ONS/tube feeding, parenteral)	INI
Breakfast			⊕				
Snack			⊕				
Lunch			⊕				
Snack			⊕				
Dinner			⊕				
Snack			⊕				
<b>Total energy intake via food</b>	kcal	g	INI				

Date	kcal	g protein	Normal diet	Description/type	INI	Supplementation: type and quantity (ONS/tube feeding, parenteral)	INI
Breakfast			⊕				
Snack			⊕				
Lunch			⊕				
Snack			⊕				
Dinner			⊕				
Snack			⊕				
<b>Total energy intake via food</b>	kcal	g	INI				

Date	kcal	g protein	Normal diet	Description/type	INI	Supplementation: type and quantity (ONS/tube feeding, parenteral)	INI
Breakfast			⊕				
Snack			⊕				
Lunch			⊕				
Snack			⊕				
Dinner			⊕				
Snack			⊕				
<b>Total energy intake via food</b>	kcal	g	INI				

Fluid requirements in ml/d

## Step 2/4

### Fluid protocol - daily fluid intake

Date	ml	<input type="checkbox"/> <b>Assessment</b> (3 days review of fluid intake)		<input type="checkbox"/> <b>Monitoring</b> (daily)						
		1	2	3	4	5	6	7	8	
 Cup	ml									
	ml									
	ml									
	ml									
 Glass/ bowl	ml									
	ml									
	ml									
	ml									
	ml									
	ml									
Fluid intake via ONS (ml)										
+ Water content of food (0.33 ml/kcal) (ml)										
+ Water content of ONS and/or tube feed* (ml)										
+ Water content of parenteral/infusion solution* (ml)										
<b>= Total fluid intake (ml)</b>										

\* please find the water content on the product label

**Fluid substitution = Fluid requirement - total fluid intake**

Fluid substitution (ml)										
Initials										

**Comments** \_\_\_\_\_

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