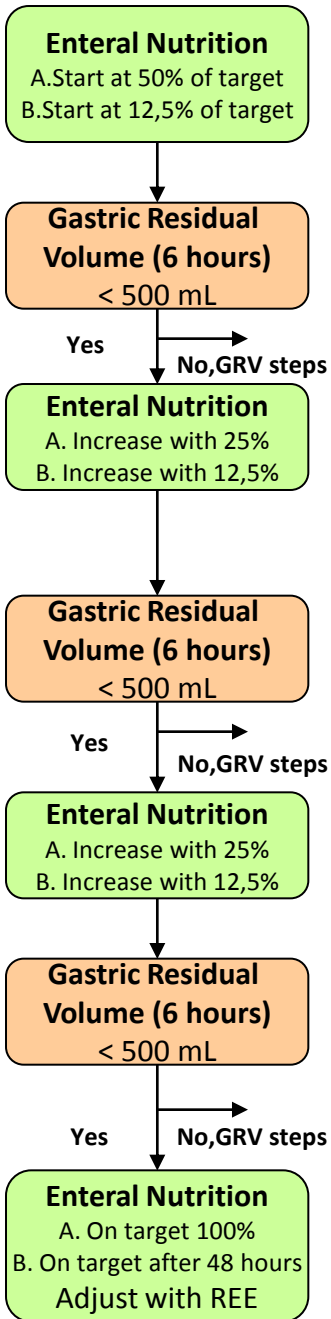
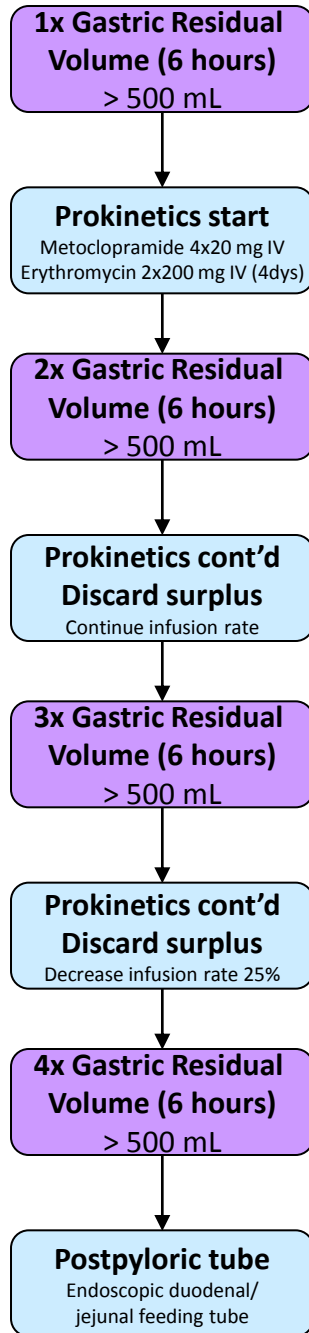


## EN protocol A/B



## GRV steps



## Postpyloric EN protocol

- Per 6 hours increase with 20 ml/hr or 25% of target until 100% independent of GRV (2<sup>nd</sup> tube); No bolus feeding

## Monitoring PP-EN intolerance

- Major Gastric Enteral Feed admixture
- Important abdominal distention
- Intra-abdominal pressure > 20 cm H<sub>2</sub>O
- Severe Diarrhea

## Parenteral Nutrition (TPN+SPN)

- Patients contraindicated for oral or EN intake, >7 days no intake after ICU admission (TPN).
- Patients on oral/EN intake >7 days after ICU admission with enteral intake <60% (SPN)
- Patients with BMI<18.5: start TPN on day 1; start EN; stop PN at EN-intake of 80% of target.
- Patients with >10% weight loss in 3-6 months before ICU admission: start TPN on day 1; start EN; stop PN at EN-intake of 80% of target.

## Monitoring (TPN+SPN)

- Total bilirubine (>20 μmol/l) and/or doubling of bilirubine level or TG-level (> 3,0 mmol/l): stop fat emulsion completely in PN.
- NB: 2x per week (Monday / Thursday) total bilirubine&TG testing.
- In contrast to lab instructions do not interrupt nutritional interventions.

## Cernevit (multivitamin) & Nutritrace (trace elements) supplementation

- No Nutrition: 1 ampoule daily of both.
- Full TPN: 1 ampoule daily of both.
- EN < 750 ml per 24 hours: 1 ampoule daily of both.
- EN 750-1500 ml per 24 hours +/- SPN: every other day 1 ampoule of both
- Full TPN only: 10 mg Konaktion per week. NB: not necessary incase of EN.