# MEDICAL NUTRITION THERAPY DEFAULT PROTOCOL – ADULT ONLY
## PROTEIN CALORIE MALNUTRITION

<table>
<thead>
<tr>
<th>RESTRICTION</th>
<th>Patients 18 years old or older; must not be in an intensive care unit</th>
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### CLINICAL DIETITIAN

1. **Determine nutritional risk and weight. Risks to include:**
   - a) Weight below Ideal Body Weight range
   - And/or
   - b) Serum albumin < 2.5 g/dL,
   - c) Prealbumin < 10 g
   - d) Weight Loss > 10% in 6 months

2. **Determine energy needs for patient (30-35 kcal/kg); consider need for weight gain, wound healing or repletion.**

3. **Determine protein needs for patient (1-2 g/kg); based on disease state and clinical condition; consider need for wound healing or repletion.**

4. **Determine fluid needs for patient.**

5. **Determine if patient is able to consume oral diet.**

6. **Verify that current diet order is appropriate for patient diagnosis. If not, contact physician to discuss alternative diet; document in record as needed.**

7. **Order nutrient modification of diet based on medical treatment and identified patient needs.**

8. **Order Calorie Count as appropriate to verify po intake. If po intake < 60 % of energy requirements and not meeting fluid needs, contact physician for enteral or parenteral feeding.**

9. **Order I/O to assess hydration status.**

10. **Evaluate need for vitamin/mineral supplementation; order multivitamin supplement if indicated.**

11. **Evaluate and initiate oral nutrition supplementation if indicated, including protein.**

12. **Order weight to be obtained every 48 to 72 hours, or as appropriate.**

13. **Order Pre-albumin and glucose (if not already ordered) every 48 to 72 hours, or as appropriate.**

14. **Reassess nutrition status, nutrition plan of care, and patient goals every 48 to 72 hours, or as appropriate.**

15. **Place this document in patient chart.**