

### Nutritional first line advice (PIP)

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The following guidance is taken from the Partners In Paediatrics (PIP)

Nutritional first line advice 2018–20

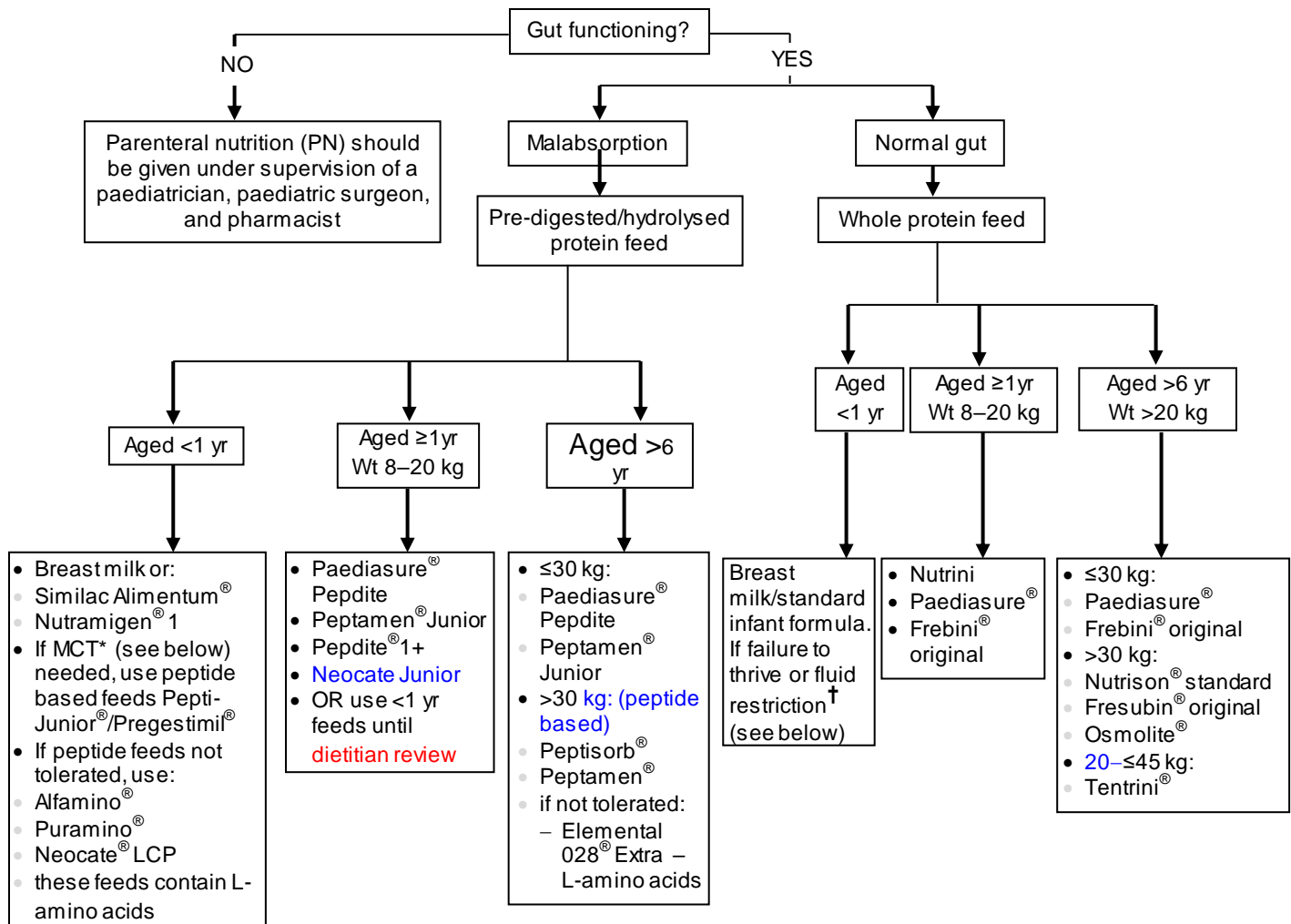
## NUTRITIONAL FIRST LINE ADVICE

Initial guide to feeding when child not able to eat normally and **dietitian not available**

Choose appropriate feed for age

If very underweight for age, use appropriate feed for actual bodyweight

**If patient nil-by-mouth see Intravenous fluid therapy guideline before starting parenteral nutrition (PN)**



\* Indications for medium chain triglycerides (MCT): problems with digestion, absorption or transport of long chain fats e.g. cholestasis, short gut, pancreatic insufficiency

† If failure to thrive or fluid restricted:

- If using breast milk, dietitian to advise on fortification of breast milk
- If using standard infant formula, change to **Similac High Energy or Infatrini**
- Nutritional composition of milks – see **BNFc**

For suspected cow's milk allergy both IgE and non IgE use an extensively hydrolysed formula or amino acid formula i.e. **Similac Alimentum®**, **Nutramigen® 1**, **Pepti-Junior®**, **Pregestimil®**, **Alfamino®**, **Puraminio®**, **Neocate® LCP**, **Neocate Junior** and **Elemental 028®**

- Contact **dietitian** to assess individual requirements and appropriate feed at the first available opportunity **Monday–Friday. Check telephone or bleep number via hospital intranet or switchboard**
- Feeds in **bold** must be prescribed
- **Hospital pharmacy will advise which feed is used locally** (all similar composition for ages but different manufacturers)
- See **Table 1** for daily fluid and nutritional requirements

**Table 1: Fluid and energy requirements**

Age	Fluid* mL/kg/day	Energy † Kcal/kg/day
0–3 months	150	<b>111</b>
4–6 months	130	<b>91</b>
7–9 months	120	<b>82</b>
10–12 months	110	<b>82</b>
1–3 yr	95	81
4–6 yr	90	78
7–10 yr	75	64
11–14 yr	55	55
15–18 yr	50	46

\* Department of Health Report No 41, Dietary Reference Values 1991

† Scientific Advisory Committee on Nutrition (SACN) 2011

#### How to calculate energy requirements for tube feeds

- Choose appropriate feed for age. **If very underweight for age**, use appropriate feed for **actual bodyweight** (see **Initial guide to feeding when child not able to eat normally and dietitian not available**)
- Calculate amount of feed to use in 24 hr based on:
  - kcal/kg in children
- Calculate fluid requirement; if restricted, continue to use feeds above until **reviewed by dietitian**
- if extra fluid required, give water
- Feeding method depends on clinical condition:
  - if risk of refeeding syndrome (e.g. anorexia nervosa, Crohn’s), introduce feed slowly over 3–4 days starting at 25% of kcal intake day 1. Increase daily by 25% until full feeds at day 4. Only increase feeds if bloods are normal
- Bolus feed can be given **at 1, 2, 3, 4 hrly intervals** depending on tolerance
- If on continuous feeds (i.e. over 24 hr), start at **25%** of final hourly requirement. Increase to **50%, 75% and** full feeds every 4–6 hr as tolerated. When full **feeds** tolerated, aim to give full requirement over 20 hr

#### Monitoring

- Check plasma electrolytes daily with particular reference to phosphate, potassium, magnesium, calcium and sodium: correct accordingly. Stop once clinical condition stable
- Refeeding syndrome **can occur up to 2 weeks after refeeding. Monitor electrolytes daily for 2 weeks or until** electrolyte parameters are stable **(this may be less than 2 weeks)**