Nutrition Interventions for Treatment of: Unintended Weight Loss

Nutrition Screening

Significant weight loss?

- ≥ 5% in 30 days or
- ≥ 10% in 180 days

YES

Inadequate Intake?

- Meeting ≤ 50% in 5 days or
- BMI < 18.5

YES

NO

NO

Continue Plan of Care

Notify Physician and Family/POA Of Weight Loss or Poor Intake

Refer to Dietitian for Assessment

- Physical Assessment: Body fat/muscle wasting, declines in ADLs, decline in handgrip strength, skin assessment, edema, dentition, vision, feeding and drinking ability, chewing/swallowing capability.
- Diagnoses, anthropometrics, food, fluid & nutrient needs, adequacy of intake, laboratory values, medications.
- Determine potential reasons for weight loss, including poor intake, edema, diagnoses, illness, infection, recent hospitalization with intravenous fluids or self-imposed weight loss.
- Determine potential reasons for poor intake, including difficulty chewing or swallowing, difficulty feeding self, poor dentition, illness, diagnoses, medications.

Implement Weight Loss Interventions as Recommended/Appropriate and Revise Plan of Care

Weight Loss Interventions

- Assess appetite, feeding ability and adequacy of intake to meet needs.
- Liberalize diet and assess/honor preferences.
- Refer to OT, ST, restorative dining, dentist or psychologist.
- Adjust diet texture as needed.
- Provide feeding assistance and adaptive equipment as needed.
- Add fortified foods & provide palatable high-calorie snacks, such as Thrive Ice Cream.
- Provide dining environment that meets needs, including group dining, restorative dining or 1:1 supervision as indicated.
- Consider appetite stimulant if appetite is poor.
- Monitor intake for 4 weeks

Weight stable, intake adequate?

YES

Continue Plan of Care

NO

NO

- Re-evaluate plan of care and revise as indicated.
- Add high-calorie supplements, such as Thrive Ice Cream.
- Continue to monitor intakes and weights for 2 weeks.
- Assess advance directives, determine family/resident goals and educate family/resident on risk/benefits of alternative nutrition.

Weight stable, intake adequate?

YES

Continue Plan of Care

NO

- Revise Plan of Care
- Initiate enteral feeding if appropriate and in accordance with resident/family wishes.
- Recommend hospice if in accordance with family wishes.

NO

- Continue Plan of Care
- Monitor weights and intakes for 4 weeks.