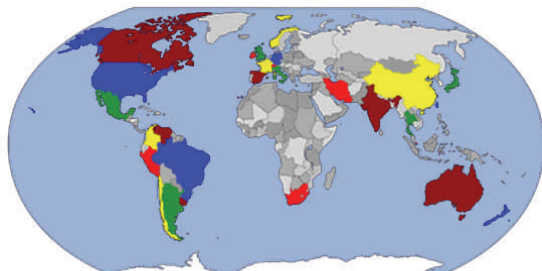




## International Nutrition Survey 2011: Bigger Than Ever Before!



This year we have over 245 hospitals from 28 countries participating in the International Nutrition Survey, meaning this year's survey may turn out to be our biggest ever! Thanks for your support and enthusiasm in improving nutrition practices in the critically ill.

Among the 245 hospitals, we have 19 Canadian hospitals, 33 Australian hospitals, and 48 US hospitals! We are also thrilled to have more than 41 hospitals from Central and South America signed up to participate this year.

We are only a few weeks into the survey, and there are already over 580 patients entered on REDCap and over 100 have been submitted or finalized!

## Pediatric International Nutrition Survey 2011 Starts with a Bang!

This year's Pediatric International Nutrition Survey started at the same time as the adult version of the survey, and like the adult version of the survey, the response has been fantastic. So far 51 sites from 16 countries are participating. Tell your colleagues working in the ICU about this important work and encourage them to become involved. For further information on the pediatric survey please contact Lori Bechard ([Lori.Bechard@childrens.harvard.edu](mailto:Lori.Bechard@childrens.harvard.edu))



## Are you the Best of the Best?

To be eligible for consideration for the "Best of the Best" award you must:



- Have a feeding protocol in place in your ICU
- Finalize at least 20 patients
- Be willing to enable us to verify your data

The top performing site will be awarded up to \$1000 towards attending ASPEN's Clinical Nutrition Week 2012 (or another scientific conference of the recipient's choice). We encourage all ICUs to set their sites high and strive to be the best of the best! If you would like to increase awareness in your ICU, you can visit our website for some poster templates as well as many other helpful quality improvement tools.

### Best of the Best Ranking Criteria

Determinant	Weighting
Overall adequacy of EN plus appropriate PN	10
% Patients receiving EN	5
% Of patients with EN initiated within 48 hours	3
% Of patients with HGRV receiving promotility drugs	1
% Of patients with HGRV receiving small bowel tubes	1
% Of patient glucose measurements greater than 10 mmol/l (excluding day 1; fewest is best)	3

## Are you the Best of the Best... in Latin America? ¿Eres el mejor de los mejores... en América Latina?



We have more Latin American sites participating this year than ever before, and we are therefore pleased to announce that this year there will be a special "Best of the Best in Latin America" award. The same eligibility and ranking criteria apply, and the top performing site in Latin America will receive up to \$1000 towards attending ASPEN's Clinical Nutrition Week 2012 (or another scientific conference of the recipient's choice).

Este año están participando mas hospitales en América Latina que en años anteriores, por lo tanto nos es grato anunciar que habrá un premio especial para la mejor unidad de cuidados intensivos de América Latina. Los criterios para participar son los mismos que el premio anual a la mejor unidad de cuidados intensivos a nivel mundial. La unidad ganadora recibirá mil dólares (\$1000) para asistir a la conferencia anual de la sociedad americana de nutrición enteral y parenteral 2012 (ASPEN's clinical nutrition week) o cualquier otra conferencia que el ganador seleccione.

## Study Timelines

<p><b>WE ARE HERE</b></p> <p><b>2011</b></p>	<ul style="list-style-type: none"> <li>• <b>May 11:</b> Data collection begins, starting with all eligible patients located in ICU on this day</li> <li>• <b>May—September:</b> Data collection and data entry are ongoing</li> <li>• <b>September 14:</b> All patient baseline and daily data should be entered online (but okay if some outcomes data is not yet available)</li> <li>• <b>October 26:</b> All data, including outcomes data, should be entered online by this date</li> <li>• <b>November—December:</b> Preliminary Site Reports will be distributed</li> </ul>
<p><b>2012</b></p>	<ul style="list-style-type: none"> <li>• <b>January:</b> Final Site Reports will be distributed</li> <li>• <b>End of January:</b> Presentation of overall results at ASPEN's Clinical Nutrition Week</li> </ul>

### Contact Us

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## Frequently Asked Questions

Below are just a few of the questions that we have received about the International Nutrition Survey. There is a complete list of FAQs, sorted by topic, available on our website at the following link:

[http://www.criticalcarenutrition.com/index.php?option=com\\_content&view=article&id=183:ins-faqs&catid=4](http://www.criticalcarenutrition.com/index.php?option=com_content&view=article&id=183:ins-faqs&catid=4)

We are constantly adding new questions and answers. If you have any questions, please take a moment to read these frequently asked questions to see if your questions are listed. If not, you may contact us with any additional questions.

**Q: On the screening log it says patients are eligible if mechanically ventilated within 6 hours of ICU admission, but elsewhere it says patients are eligible if mechanically ventilated within 48 hours of ICU admission. Which is it?**

A: Patients are eligible if mechanically ventilated within 48 hours of ICU admission. This typo has been fixed in the most up to date version of the case report forms, so if your screening log says 'within 6 hours of ICU admission', you are not using the most up to date version of the case report forms (dated April 28, 2011). You can download the most up to date version of the file here:

[http://www.criticalcarenutrition.com/index.php?option=com\\_content&view=article&id=147:ins-study-tools&catid=4&itemid=62#CRFs](http://www.criticalcarenutrition.com/index.php?option=com_content&view=article&id=147:ins-study-tools&catid=4&itemid=62#CRFs)



**Q: What units do we record selenium in?**

A: Selenium should be recorded in micrograms ( $1 \times 10^{-6}$  grams). REDCap previously indicated grams, but this has now been corrected.

**Q: For APACHE II and highest/lowest blood glucose in 1st 24 hours, does 'first 24 hours of admission to ICU' refer to study day 1 only?**

A: No, these specific questions on the Patient Information form ask for data from the full 24 hour period following ICU admission. Since study day 1 starts at time of admission and ends at midnight it may not correspond to a full 24 hour period (e.g. 18:00 - 11:59), and therefore 'first 24 hours from admission to the ICU' may also include data from study day 2 (e.g. 00:00 - 17:59). In contrast, all questions on the Daily Nutrition forms for Study Day 1 refer to information from time of admission until midnight (i.e. calendar day) and not the full 24 hour period.

**Q: Does the nutrition assessment have to be from day 1? If it didn't take place until day 4, what do I do?**

A: While the baseline nutrition form is positioned at "day 1" on the "grid" in REDCap, you may enter the nutrition assessment on the baseline nutrition form regardless of when it occurred. You should always enter information about the nutrition assessment (if one occurred in the 1st 12 days of the patient's ICU stay) in preference to selecting "no assessment completed" or calculating a prescription of 25kcal/kg and 1g/kg for protein.

**Q: What if the patients prescribed intake changes during their ICU stay? How do I record this information?**

A: If the requirements change dramatically in the first 12 days calculate a weighted average, and enter that value as the requirements. For example, if a patient's caloric requirements were determined to be 1000kcal for days 1 to 3 and then changed to 1500kcal for days 4 to 10, and the patient was discharged on day 10:

$((1000\text{kcal} \times 3 \text{ days}) + (1500\text{kcal} \times 7 \text{ days})) / 10 \text{ days} = 1350\text{kcal}$

**Q: Is there an end date for this Survey, or do we keep going until we have sufficient patients included?**

A: Please continue screening patients until you have enrolled 20 patients. To be eligible for the Best of the Best competition, daily nutrition data for 20 patients should be entered online by September 14 (but it is okay if some outcomes data is still missing at that stage) and all data including outcomes data should be entered online by October 26. If you work in a small ICU and recruitment is slower than anticipated, a minimum of 8 finalized patients is required to receive a site report. Please contact us if you are concerned about these timelines.

