

**KINGSTON GENERAL HOSPITAL
PHYSICIAN'S ORDERS**

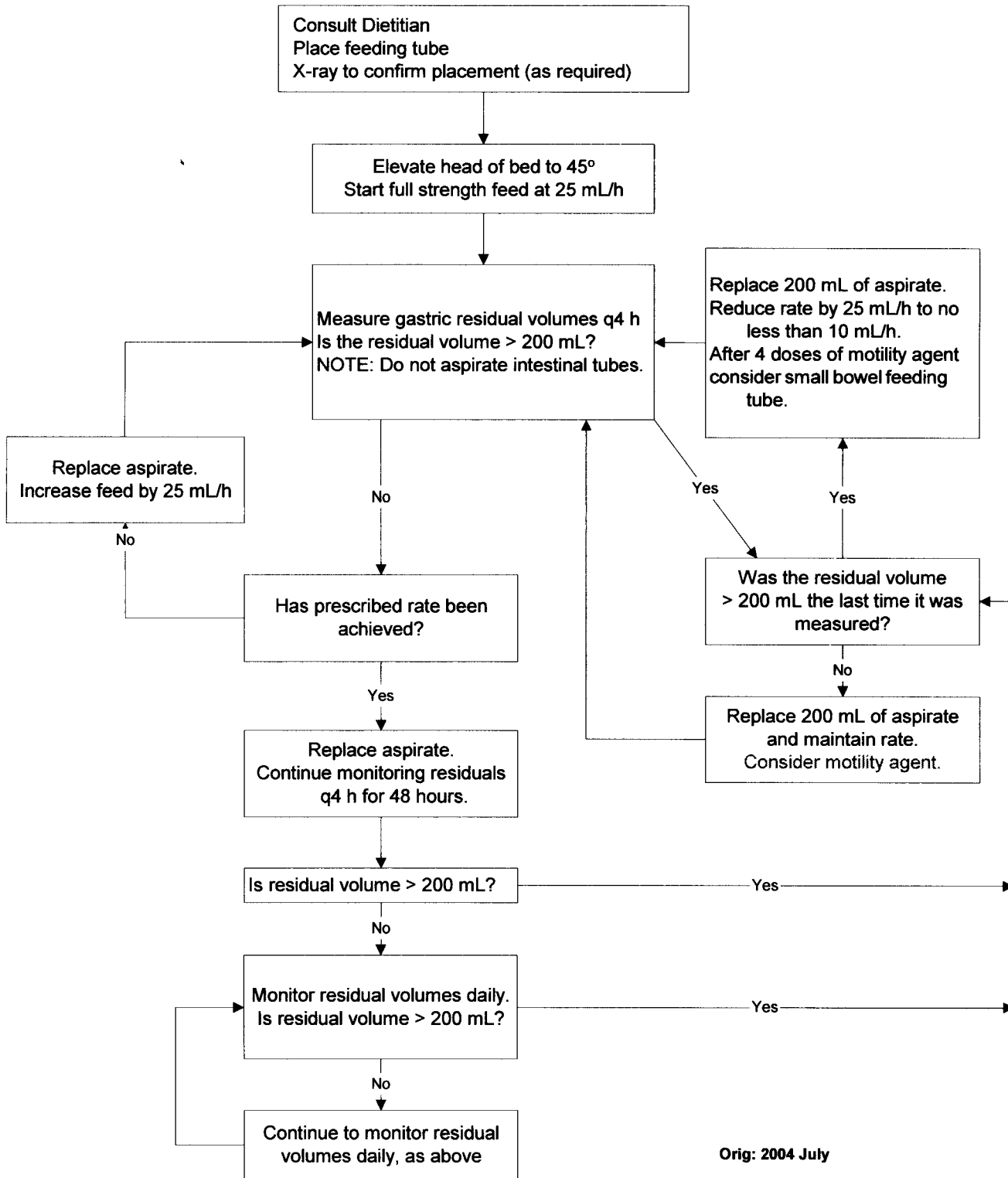
WEIGHT (KG)

DRUG SENSITIVITIES

Please use ballpoint pen and press firmly.

ORDER AND SIGNATURE	TRANSCRIPTION & RN NOTES
ICU GASTRIC AND INTESTINAL FEEDING ORDERS (ADULT)	
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<ol style="list-style-type: none"> 1. <input type="checkbox"/> Consult dietitian re: assessment of nutritional requirements and recommendations for tube feeding. 2. <input type="checkbox"/> <i>Baseline investigations:</i> CBC, INR, PTT, creatinine, urea, electrolytes, serum glucose, albumin, calcium, magnesium, phosphate. 3. <input type="checkbox"/> CXR to confirm initial tube placement. OR <input type="checkbox"/> _____ tube placement confirmed _____ (gastric, intestinal) (e.g. radiographically, endoscopically) 4. Elevate head of bed 45°, unless contraindicated. 5. Begin full strength _____ at 25 mL/h after initial tube placement confirmed. 6. <input type="checkbox"/> Monitor gastric residual volumes as per Adult Gastric Feeding Flow Chart on back of Orders. 7. Increase feeding rate by 25 mL/h q4 h up to _____ mL/h (for gastric feedings follow Adult Gastric Feeding Flow Chart on back of Orders). 8. <input type="checkbox"/> Docusate sodium elixir 100 mg bid via feeding tube (<i>unless otherwise ordered</i>). 9. Weekly weight. 10. Monitor intake and output, and stool output. 11. q Monday and Thursday: Creatinine, urea, electrolytes and prealbumin. q Monday: Albumin, calcium, magnesium, phosphate, 24 hour urine for urea and creatinine clearance (start Sunday, complete Monday). 12. Flush tube with at least 10 mL sterile water q4 h during feedings, at beginning and end of feedings, after aspiration for residuals, and before and after medication administration. 13. If unable to flush, declog tube with pancrelipase 8,000 units mixed with crushed sodium bicarbonate 500 mg in 5 mL warm water prn. 	
Physician Signature:	
Printed Name:	
Date (YYYY/MM/DD) & Time:	

Adult ICU Gastric Feeding Flow Chart



Orig: 2004 July