Mind the Gap: Standardising Charting of Oral Nutritional Supplements

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BACKGROUND

Oral nutritional supplements (ONS) are commercially manufactured food products, legally defined as food for special medical purposes (FSMPs). ONS are used under medical supervision to increase nutritional intake when diet alone is insufficient[1].

Registered dietitians (RDs) recommend ONS based on each patient's assessed nutritional needs. In Naas General Hospital, ONS recommendations are recorded by dietitians in the patient's healthcare record and the Medication Prescription Administration Record, in accordance with PPPG-370: *Guidelines for the charting of Oral Nutritional Supplements by Dietitians in the NGH Prescription Sheet*[2].

AIM

The aim of this project was to determine if current ONS documentation practices of dietitians align with the PPPG-370: *Guidelines for the charting of Oral Nutritional Supplements by Dietitians in the NGH Prescription Sheet*[2].

METHODOLOGY

Study design: A clinical audit was undertaken on 25th July 2025 across all inpatient wards, excluding the ICU, to provide a one-day cross-sectional review of ONS documentation practices within the hospital.

Inclusion criteria: Patients receiving ONS were identified using data from the dietetic clinical handover databases for inpatients.

Exclusion criteria: ONS prescription entries documented by medical or surgical teams.

An audit form was used to systematically collect data on ONS charting practices, ensuring consistent data collection and minimising information bias. Each ONS entry in the Medication Prescription Administration Record was reviewed. See Figure 1.

a) Approved product name
b) Dose
c) Frequency
d) Timing of administration
e) Route
f) Instructions
g) Start date
h) Signature on entry
i) Signature on page 2

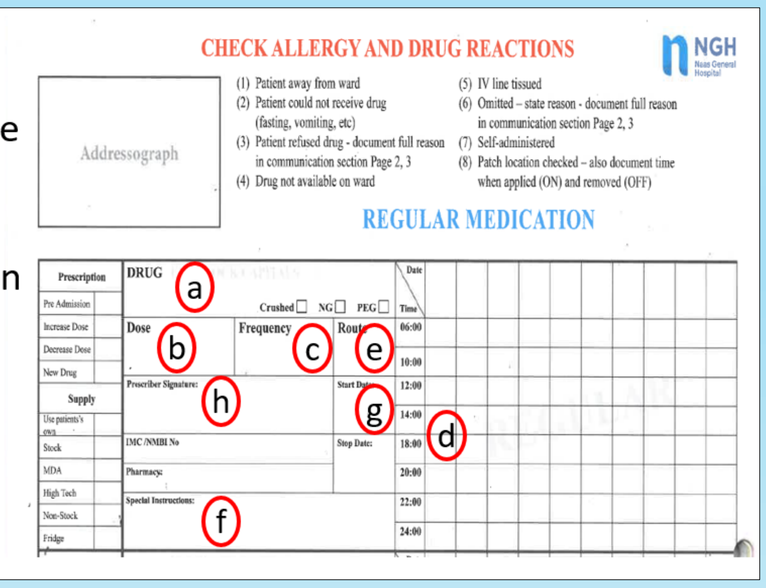


Figure 1. ONS entry in the Medication Prescription Administration Record

RESULTS

Of the 27 ONS entries in the Medication Prescription Administration Record:

- **100% (n=27)** included the approved product name, frequency, route, start date and signature on entry.
- **74% (n=20)** documented the dose of the ONS in millilitres or grams, while the remaining entries used a dose symbol without specifying the volume (Figure 2).
- **44% (n=12)** indicated the timing of administration by circling the relevant section (Figure 3).
- **59% (n=16)** included additional instructions such as suitability for a gluten-free diet, flavour preferences, IDDSI specifications, and preparation guidance (e.g., "store in fridge") (Figure 4).
- **63% (n=17)** included a signature on page 2 of the Medication Prescription Administration Record for identification purposes (Figure 5).

Figure 2.

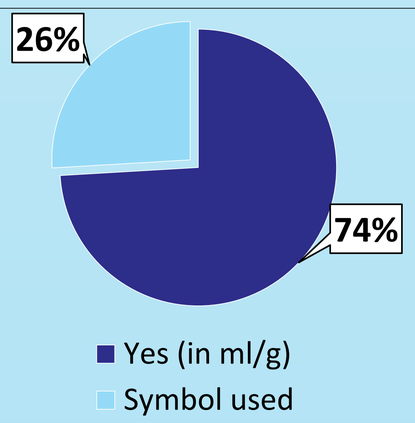


Figure 3.

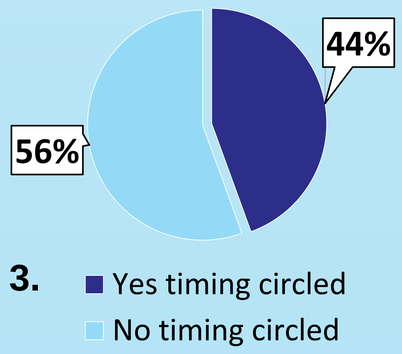


Figure 4.

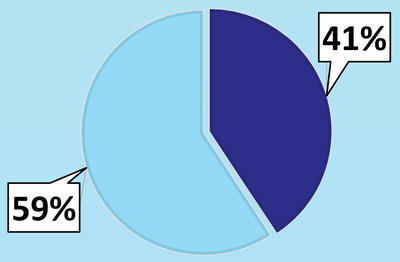
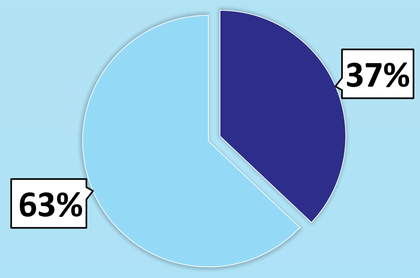


Figure 5.



DISCUSSION

The audit results underscore the importance of evaluating clinical practice against established guidelines to confirm adherence and identify areas for improvement. A key finding was variation in how oral nutritional supplement dosages were documented - some entries recorded exact volumes, while others used symbols. This highlights the need for a standardised approach to documentation to ensure accurate clinical interpretation, in line with hospital and national policies[3,4].

CONCLUSION

The audit demonstrated strong compliance across most areas in line with PPPG-370, reinforcing the importance of standardising practice to improve documentation quality. Insights gained from reviewing ONS entries will inform the upcoming update of PPPG-370, and regular re-auditing will be essential to maintain these standards

ACKNOWLEDGEMENTS

I would like to sincerely thank our team in the Department of Nutrition and Dietetics for their support with completing this audit.

REFERENCES

1. Procedure for Dietitian Recommendation of Foods for Special Medical Purposes (FSMPs) 2023
2. Guidelines for the charting of Oral Nutritional Supplements by Dietitians in the NGH Prescription Sheet (PPPG-370) 2021
3. Medicines Management-Prescribing Policy 2015
4. National Nurse and Midwife Medicinal Product Prescribing Policy 2022