



Oral Nutritional Supplement prescribing practices for older adults admitted to a Level 4 teaching hospital

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Background

- Malnutrition is prevalent among older adults (> 33% of those presenting to Emergency Department) and is associated with increased morbidity, prolonged hospital stay and increased health care costs.
- A significant proportion of community dwelling older adults use oral nutritional supplements (ONS) to treat malnutrition, often initiated and managed in primary care.
- In the acute hospital setting, continuation of appropriate ONS is frequently delayed pending dietetic assessment, contributing to inefficiencies and disruption of nutritional care.

Aim

- To evaluate ONS prescribing practices for older adults admitted to a level 4 teaching hospital and develop a streamlined process enabling safe continuation of community-prescribed ONS without disruption to established nutritional care plans.

Methods

- Over a 5-day period the ED pharmacist collected data from drug kardexes.
- The number of people admitted on ONS not routinely available in MMUH was quantified.
- MMUH formulary ONS were compared against the most frequently prescribed community ONS.
- The nutritional composition information along with the International Dysphagia Diet Standardisation Initiative (IDSSI) information was sourced from nutritional suppliers and used to compare formulations of the hospital formulary products with alternatives available in the community.
- Key stakeholders, illustrated in *Figure 2* were consulted.
- The ONS swap sheet was developed (*Figure 3*) which guides the prescription of MMUH formulary products aligned with patients community ONS.



Figure 1: Development of the swap sheet

Pharmacy	• Consulted on their position in highlighting the resource to Medical Teams to use
Dietetic Managers and Clinical Specialist Dietitians	• Consulted to advise on its use across the hospital and agreement to exclude disease specific ONS
FIT Consultant	• Consulted to inform how this resource would be used among medical teams
SLT	• Feedback sought to ensure use of the swap sheet would not impact on patient swallow safety

Figure 2: Stakeholders consulted

Results

- An estimated 1-2 patients per day (30-60 per month) were admitted on ONS not routinely stocked in MMUH.
- A practical swap sheet was developed to guide prescribing of formulary alternatives aligned with patient's community ONS regimens (*Figure 3*).

Patients admitted on ONS not supplied in MMUH → please prescribe alternative ONS on the Nutrition Kardex

Normal dietetic referral criteria still apply (see link below), this swap sheet does not replace a Dietetic Assessment

Swaps are intended for duration of hospital stay only. Patients baseline community ONS should be included on discharge prescription

If a patient is on any other Oral Nutritional Supplements or on Thickened Fluids → please contact your Dietitian

Community ONS	Switch to	MMUH Formulary ONS
Ensure Compact		Fortisip Compact Protein
Ensure Plus		
Altraplen Compact		
Altrajuce		Fortijuce
Ensure Plus Juice		
Fresubin 2kcal		Fortisip 2kcal
Fresubin 3.2kcal		
Ensure TwoCal		
Ensure Plus Advance		
Procal shot		Calogen
Altrashot		
Fresubin 5kcal Shot		
Ensure Plus Crème		Nutlis level 4 Fruit
Fresubin 2kcal Crème		
Nutricrem		
Ensure Plus Fibre		Fortisip Compact Fibre

Figure 3: MMUH ONS Swap Sheet

Conclusion

- Implementation of this pathway is expected to prevent interruptions to established community care plans and unnecessary dietetic referrals for patients stable on ONS regimens. The intervention is anticipated to improve efficiency of dietetic assessment and reduce delays in patient care.

Next steps

- ONS Swap sheet to be published on MaterNet
- Ongoing signposting and education to medical team and MDT to ensure integration of the ONS swap sheet into prescribing practices

References

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