Malnutrition Monitoring and Evaluation

A. Responsible team member  
   • All relevant Care Team members

B. Definition  
   Identifies the amount of progress made since patient diagnosis and assesses whether outcomes relevant to the malnutrition diagnosis and treatment goals are being met

C. Data sources/tools
   1. Patient self-monitoring data (e.g., food diaries kept prior to admission, fatigue, appetite)  
   2. Anthropometric measures (e.g., height and weight for body mass index calculation, body circumference, etc.)  
   3. Biochemical data and medical tests  
   4. Patient and family caregiver interviews  
   5. SNOMED codes to record implementation and evaluation of malnutrition care plan components in a standardized nomenclature  
   6. Physical exam (e.g., Nutrition Focused Physical Exam) results  
   7. Calorie counts  
   8. Diet tolerance information  
   9. Nutrient intake information  
   10. Intake and output measurements

D. Data to collect and record
   1. Changes in baseline from both biochemical and medical tests, anthropometric data, patient intake, and other relevant data points to malnutrition diagnosis

E. Monitoring and evaluation Steps
   • Establish whether the malnutrition care plan is producing any positive or negative outcomes through a reassessment completed after a recommended time frame  
   • Receive feedback from patient and/or family caregiver as to the effect of the malnutrition care plan  
   • Document findings in the patient medical record  
   • Perform follow-up and re-assessment by dietitian as necessary  
   • Consider impact of any new patient diagnoses, treatments, or other clinical events  
   • Adjust malnutrition care plan as necessary to ensure positive outcomes

F. Decision points for continuation of care
   1. Malnutrition care may continue if patient has not attained all treatment goals. This may include care following hospital discharge and should be coordinated with providers in the post-discharge setting  
   2. Patients who do meet the goals of the malnutrition care plan should be monitored for a change in status

Best Practices

1. Multiple providers on the multi-disciplinary Care Team may be responsible for ongoing malnutrition monitoring and evaluation depending on the care plan  
2. Monitor the care process  
3. Ensure patient/family caregiver understanding and compliance with malnutrition care plan  
4. Identify positive and negative outcomes and whether the intervention is or is not impacting patient malnutrition status  
5. Support findings with evidence and provide reasoning for improvement or lack of progress  
6. Measure outcomes by assessing progress, using outcome indicators relevant to the malnutrition diagnosis, symptoms, and malnutrition care plan goals  
7. Evaluate outcomes: compare current status with status at time of diagnosis and against treatment goals  
   • Monitoring and evaluating results will inform modifications to the malnutrition care plan and implementation process