

Determining the Clinical and Economic Benefits of Parenteral Nutrition: Outcomes with Team Collaboration



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Problem:

Limited use of A.S.P.E.N Indications/Contraindication for Parenteral Nutrition.

Aim:

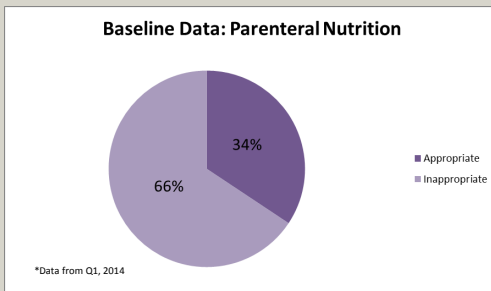
To improve quality of care by increasing the use of A.S.P.E.N Guidelines for Parenteral Nutrition.

Goals/Objectives:

1. To increase awareness of the A.S.P.E.N Guidelines
2. Increase the number of patients receiving appropriate Parenteral Nutrition
3. Decrease cost associated with non-evidence based Parenteral Nutrition

Baseline Data:

Dietitians started collecting data in January, 2014. Reviewed all Parenteral Nutrition orders for the use of A.S.P.E.N Guidelines.



Solution:

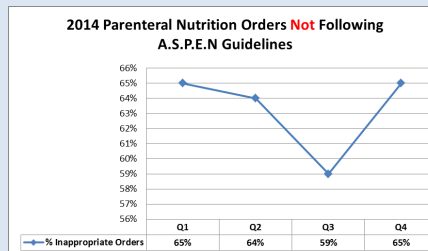
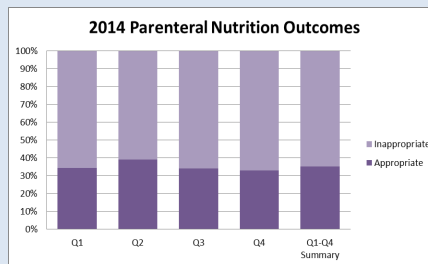
Need for interdisciplinary collaboration to increase A.S.P.E.N Guidelines utilization.

Strategies:

- Communicate findings to CNO/CMO
- Present data during Physician Department Meetings
- Develop A.S.P.E.N Indications/Contraindications pocket guides
- Partner with Division Pharmacy Team

Outcomes:

- Continuous education needed for long term impacts
- Need buy in from hospital leadership to influence change



Potential Annual Cost Savings: \$225,000

2015 Goals:

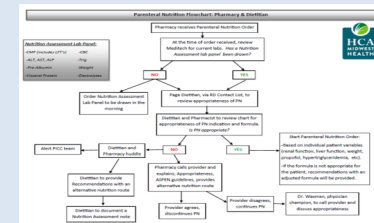
- Develop Parenteral Nutrition Guide
- Discontinue PPN from the HCA Midwest Formulary
- Develop HCA Midwest System Nutrition Committee
- Develop Nutrition Support Team

Collaboration with Pharmacy:

- Go live May, 2015
- Daily huddles with RD/Rx to assess Parenteral Nutrition orders
- Modify Parenteral Nutrition Order Set
 - Indications Checklist
 - RD Recommendations
 - Nutrition Assessment Lab Panel
 - Reassessment/Reorder requirement
- Education provided for: RD, Rx, RN, MD

*Piloted at one facility

RD/Rx Workflow



Parenteral Nutrition Order Set

