

# **NUTRITION CARE ALERTS**

## **Warning Signs and Action Steps for Caregivers in Nursing Facilities**

Proper nutrition care is vital to the health and well being of nursing facility residents. This guide, developed by nutrition and long term care experts, can help caregivers learn more about the warning signs of poor nutrition and the practical steps to maintain and improve residents' nutritional health.

It is designed to be used every day with every resident. This guide addresses four common nutrition-related conditions: unintended weight loss, dehydration, pressure ulcers and complications from tube feeding. Warning signs are on the left. Action steps for nursing assistants are in the center.

Action steps for other care providers like physicians, nurses, dietitians and pharmacists are on the right. Please share this guide with your coworkers, friends, volunteers and your residents' family members. Together, you can help maintain or improve the nutritional health of your residents.

### **UNINTENDED WEIGHT LOSS**



#### **WARNING SIGNS**

The following are some signs that a resident may be at risk for or suffer from unintended weight loss:

- Needs help to eat or drink
- Eats less than half of meals/snacks served
- Has mouth pain
- Has dentures that don't fit
- Has a hard time chewing or swallowing
- Has sadness, crying spells, or withdrawal from others
- Is confused, wanders, or paces
- Has diabetes, COPD, cancer, HIV or other chronic disease



#### **ACTION STEPS**

Below are some action steps to increase food intake, create a positive dining environment, and to help residents get enough calories:

#### **Nursing Assistant**

- Report observations and warning signs to nurse and dietitian
- Encourage resident to eat
- Honor food preferences
- Offer many kinds of foods and beverages
- Help residents who have trouble feeding themselves
- Allow adequate time to finish eating
- Notify nursing staff if resident has trouble using utensils
- Record meal/snack intake
- Provide oral care before meals
- Position resident correctly for feeding

#### **Other Members of the Interdisciplinary Care Team**

- Monitor weight
- Provide higher calorie food, beverages, or oral supplements
- Give high calorie liquids with medications
- Incorporate increased fluid into resident's diet plan
- Assess cultural, ethnic preferences
- Reassess resident's dietary restrictions
- Modify food texture or temperature to increase intake
- Assist the resident to develop an advance directive regarding feeding/hydration issues
- Consider tube feeding, if indicated, and in accordance with advance directive
- Consider medications to improve mood or mental status
- Consider a dental consultation

## DEHYDRATION



### WARNING SIGNS

The following are some signs that a resident may be at risk for or suffer from dehydration:

- Drinks less than 6 cups of liquids daily
- Has one or more of the following:
  - dry mouth
  - cracked lips
  - sunken eyes
  - dark urine
- Needs help drinking from a cup or glass
- Has trouble swallowing liquids
- Frequent vomiting, diarrhea, or fever
- Is easily confused/tired



### ACTION STEPS

Most residents need at least 6 cups of liquids each day to stay hydrated. Below are some action steps to help residents get enough to drink:

#### Nursing Assistant

- Report observations and warning signs to nurse and dietitian
- Encourage resident to drink every time you see the resident
- Offer 2-4 ounces water or liquids frequently
- Be sure to record fluid intake
- Offer ice chips frequently
- Offer sips of liquid between bites of food at meals and snacks
- Drink fluids with the resident, if allowed
- Make sure pitcher and cup can be lifted by resident
- Offer the appropriate assistance as needed if resident cannot drink without help

#### Other Members of the Interdisciplinary Care Team

- Monitor fluid intake
- Incorporate increased fluid into resident's diet plan. For example: popsicles, juice bars, gelatin, ice cream, sherbet, soup, broth, fruit/vegetable juices, lemonade, flavored water
- Offer a choice of liquids at meals and snacks
- Assist the resident to develop an advance directive regarding feeding/hydration issues
- Consider oral rehydration or IV hydration treatment if enteral intake fails to meet needs
- Consider tube feeding, if indicated, and in accordance with advance directive
- Assess medications and revise prescriptions that contribute to dehydration
- Give medications with 1 cup (240 cc) water or other liquid

## PRESSURE ULCERS



### WARNING SIGNS

-Patient subject to:

- incontinence
- moisture

- Needs help:

- moving arms, legs or body
- turning in bed
- changing position when sitting

- Weight loss

- Eats less than half of meals/snacks served

- Dehydration

- Has discolored, torn, or swollen skin over bony areas



### ACTION STEPS

Below are some action steps to help residents who are at risk for or suffer from pressure ulcers:

#### Nursing Assistant

- Report observations and warning signs to nurse and dietitian
- Check and change linens as appropriate
- Handle/move the resident with care to avoid skin tears and scrapes
- Reposition frequently and properly
- Use "unintended weight loss action steps" so resident gets more calories and protein
- Record meal/snack intake
- Use "dehydration action steps" so resident gets more to drink

#### Other Members of the Interdisciplinary Care Team

- Initiate wound management protocol
- Consider nutritional supplementation based on a resident's needs
- Assist the resident to develop an advance directive regarding feeding/hydration issues
- Use "unintended weight loss action steps" to improve calorie/protein intake
- Use "dehydration action steps" to improve fluid intake

## RESIDENTS WHO ARE TUBE FED



### WARNING SIGNS

The following are some signs that a resident may be at risk for or experiencing tube feeding complications:

- Has one or more of the following:

- nausea/vomiting/diarrhea
- swollen stomach

- constipation/cramping

- At the site where the feeding tube enters the body, there is:

- pain, redness, heat, or swelling
- crusty or oozing fluid
- A cough, wet breathing or a feeling of something "caught" in the throat



### ACTION STEPS

Below are some action steps to help residents who are at risk for or suffer from pressure ulcers:

#### Nursing Assistant

- Report observations and warning signs to nurse and dietitian
- Maintain position of resident with head elevated 30 degrees or more as tolerated during feedings and for at least 30 minutes after feedings

#### Other Members of the Interdisciplinary Care Team

- Assess pain and other complaints to rule out non-tube feeding causes
- Assess/revise medications to minimize complications/pain, if indicated
- Check placement of tube and residual prior to each feeding
- Check tube for obstructions
- Flush tube regularly
- Modify tube feeding administration, rate, strength, and formula, if necessary
- Reassess need for tube feeding; transition to oral feedings if appropriate
- Assist the resident to develop an advance directive regarding feeding/hydration issues.



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