Chapter 20

Assisting With Nutrition and Fluids
Basics of Nutrition

● Food and water:
  ➢ Are physical needs
  ➢ Are necessary for life

● A poor diet and poor eating habits:
  ➢ Increase the risk for diseases and infection
  ➢ Cause healing problems
  ➢ Affect physical and mental function
    • This increases the risk for accidents and injuries.
Basic Nutrition

● Nutrition is the processes involved in the ingestion, digestion, absorption, and use of foods and fluids by the body.
  ➢ Good nutrition is needed for growth, healing, and body functions.

● A nutrient is a substance that is ingested, digested, absorbed, and used by the body.
  ➢ Nutrients are grouped into fats, proteins, carbohydrates, vitamins, minerals, and water.
MyPlate

The MyPlate food guidance system encourages smart and healthy food choices and daily activity.

- The kind and amounts of food to eat daily
- Gradual improvement
- Physical activity
- Variety
- Moderation
- The right amount from each food group band
  - Grains, vegetables, fruits, milk, meat and beans, and oils
Nutrients

- Protein is the most important nutrient.
  - It is needed for tissue growth and repair.

- Carbohydrates provide energy and fiber for bowel elimination.

- Fats provide energy.
  - They add flavor to food and help the body use certain vitamins.

- Vitamins are needed for certain body functions.

- Minerals are needed for bone and tooth formation, nerve and muscle function, fluid balance, and other body processes.

- Water is needed for all body processes.
Factors Affecting Eating and Nutrition

Many factors affect nutrition and eating habits.

- Age
- Culture
- Religion
- Appetite
- Personal choice
- Body reactions
- Illness
- Disability
OBRA Dietary Requirements

The Omnibus Budget Reconciliation Act of 1987 (OBRA) has requirements for food served in nursing centers:

- Each person’s nutritional and dietary needs are met.
- The person’s diet is well-balanced.
  - It is nourishing and tastes good.
- Food is appetizing.
- Hot food is served hot and cold food is served cold.
- Food is served promptly.
Serving Food

● Food is prepared to meet each person’s needs.
● Other foods are offered if the person refused the food served.
  ➢ Substituted food must have a similar nutritional value to the first foods served.
● Each person receives at least 3 meals a day.
● A bedtime snack is offered.
● The center provides needed assistive devices and utensils.
Special Diets

Doctors may order special diets for:
- A nutritional deficiency
- A disease
- Weight control
- To remove or decrease certain substances in the diet

Regular diet, general diet, and house diet mean there are no dietary limits or restrictions.
The Sodium-Controlled Diet

- Certain diseases and drugs cause the body to retain extra sodium. Sodium causes the body to retain water.
- With too much sodium:
  - Tissues swell with water.
  - There is excess fluid in the blood vessels.
  - The heart has to work harder.
- Sodium control decreases the amount of sodium in the body.
- Sodium-controlled diets involve:
  - Omitting high-sodium foods
  - Not adding salt when eating
  - Limiting the amount of salt used in cooking
Diabetes Meal Planning

● Diabetes is a chronic illness in which the body cannot produce or use insulin properly.
● Diabetes is usually treated with insulin or other drugs, diet, and exercise.
● The meal plan involves:
  ➢ Food preferences
  ➢ Calories needed
    • The same amounts of carbohydrates, protein, and fat are eaten each day.
  ➢ Eating meals and snacks at regular times
The Dysphagia Diet

- Dysphagia means difficulty swallowing.
  - A slow swallow means the person has difficulty getting enough food and fluids for good nutrition and fluid balance.
  - An unsafe swallow means that food enters the airway (aspiration).
    - Aspiration is breathing fluid, food, vomitus, or an object into the lungs.

- Food thickness is changed to meet the person’s needs.
The Dysphagia Diet, cont'd.

● When feeding a person with dysphagia, you must:
  ➢ Know the signs and symptoms of dysphagia.
  ➢ Feed the person according to the care plan.
  ➢ Follow aspiration precautions.
  ➢ Report changes in how the person eats.
  ➢ Observe for signs and symptoms of aspirations.
    • Report choking, coughing, difficulty breathing during or after meals, and abnormal breathing or respiratory sounds at once.
Fluid Balance

- Water is needed to live.
- Water is ingested through fluids and foods.
- Water is lost through:
  - Urine, feces, and vomit
  - The skin (perspiration)
  - The lungs (expiration)
Fluid Balance, cont'd.

 Fluid balance is needed for health.
  ➢ The amount of fluid taken in (intake) and the amount of fluid lost (output) must be equal.
  ➢ If fluid intake exceeds fluid output, body tissues swell with water. This is called edema.
  ➢ Dehydration is a decrease in the amount of water in body tissues.
    • Fluid output exceeds intake.

 An adult needs 1500 milliliters (mL) of water daily to survive.
  ➢ 2000 to 2500 mL are needed for normal fluid balance.
To maintain fluid balance, the doctor may order the amount of fluid a person can have in 24 hours.

- Intake records are kept.
- Common orders are:
  - Encourage fluids
  - Restrict fluids
  - Nothing by mouth (NPO)
  - Thickened liquids
Meeting Food and Fluid Needs

The following can affect appetite and ability to eat:

- Weakness, illness, and confusion
- Unpleasant odors, sights, and sounds
- An uncomfortable position
- The need for oral hygiene
- The need to eliminate
- Pain
Preparing for Meals

Preparing patients and residents for meals promotes comfort.

These dining programs are common in nursing centers:

- Social dining
- Family dining
- Assistive dining
- Low-stimulation dining
- Restaurant-style menus
- Open-dining
Serving Meal Trays

● You serve meal trays after preparing patients and residents for meals.

● If food is not served within 15 minutes:
  ➢ Re-check food temperatures.
    • Follow agency policy.
  ➢ If not at the correct temperature, get a fresh tray.
    • Some agencies allow re-heating in microwave ovens.
Feeding the Person

- Serve food and fluids in the order the person prefers.
- Offer fluids during the meal.
- Use teaspoons.
- Tell visually impaired persons what is on the tray.
  - Use the numbers on a clock for the location of foods.
- When feeding visually impaired persons, describe what you are offering.
- Allow time and privacy for prayer.
- Engage the person in pleasant conversation.
  - Allow time for chewing and swallowing.
- Sit facing the person.
Special Diets and Snacks

● Many special diets involve between-meal snacks.
  ➢ They are served upon arrival on the nursing unit.
  ➢ Provide needed utensils, a straw, and a napkin.
  ➢ Follow the same considerations and procedures for serving meal trays and feeding persons.

● Calorie counts
  ➢ The nurse tells you which persons need calorie counts.

● Patients and residents need fresh drinking water each shift and whenever the pitcher is empty.
Assisting With Special Needs

When persons cannot eat or drink because of illness, surgery, or injury, the doctor may order:

➢ Nutritional support
➢ IV (intravenous) therapy

Enteral nutrition is giving nutrients into the gastrointestinal tract through a feeding tube.

➢ Gavage is the process of giving a tube feeding.
➢ A naso-gastric (NG) tube is inserted through the nose into the stomach.
➢ A gastrostomy tube (stomach tube) is inserted into the stomach.
   • It involves a surgically created opening.
Reporting Observations

Report the following at once:

- Nausea
- Discomfort during the feeding
- Vomiting
- Distended abdomen
- Coughing
- Complaints of indigestion or heartburn
- Redness, swelling, drainage, odor, or pain at the ostomy site
- Fever
- Signs and symptoms of respiratory distress
- Increased pulse rate
- Complaints of flatulence
- Diarrhea
Aspiration

- Aspiration is a major risk from tube feedings.
  - It can cause pneumonia and death.

- Aspiration can occur:
  - During tube insertion
  - From tube movement out of place
  - From regurgitation (the backward flow of stomach contents into the mouth)

- To assist the nurse in preventing regurgitation and aspiration:
  - Position the person in Fowler’s or semi-Fowler’s position before the feeding.
  - Maintain Fowler’s or semi-Fowler’s position according to the nurse’s directions and the care plan.
  - Avoid the left side-lying position.
Feeding Tubes

● Persons with feeding tubes usually are NPO.
  ➢ Dry mouth, dry lips, and sore throat cause discomfort.

● These comfort measures are common:
  ➢ Oral hygiene, lubricant for lips, and mouth rinses every 2 hours while the person is awake
  ➢ Cleaning the nose and nostrils every 4 to 8 hours

● NG tubes can irritate and cause pressure on the nose.
  ➢ They can change nostril shape or cause pressure ulcers.
Intravenous (IV) therapy (IV, IV infusion) is giving fluids through a needle or catheter inserted into a vein.

- The doctor orders:
  - The amount of fluid to give (infuse)
  - The amount of time to give it in

- The RN figures the flow rate.
  - The flow rate is the number of drops per minute (gtt/min).

- You can check the flow rate.
Tell the RN at once if:
- No fluid is dripping
- The rate is too fast
- The rate is too slow
- The bag is empty or close to being empty

You help meet the safety, hygiene, and activity needs of persons with IVs.

You are never responsible for:
- Starting or maintaining IV therapy
- Regulating the flow rate
- Changing IV bags
- Giving blood or IV drugs