



Policy Name  <b>ARTIFICIAL NUTRITION</b> <b>(Total Parenteral Nutrition (TPN), Enteral Feedings)</b>	Policy Number: <b>0214</b>
	Effective Date: <b>May 9, 1996</b>
Approved By: Management	Date Revised: <b>April 7, 2010</b>
Classification: Pain and Symptom Management	Page No: <b>Page 1 of 2</b>

## POLICY

Agapé Hospice provides individualized end-of-life care. The Resident and their health advocate are the central members of the interdisciplinary team. Agapé Hospice recognizes that the resident and/or health advocate have the right to request or refuse treatment/care. Individuals admitted to the hospice who **already** are receiving enteral feedings (tube feeds) will have the choice to continue or discontinue the tube feeds following admission. Tube feeds **will not be initiated** at the hospice. Tube feeds can be administered by gravity infusion or an infusion pump. Recognizing that artificial nutrition may be a form of medical treatment for comfort, the benefits and risks must be considered in regards to the resident's goals of care and clinical prognosis. Artificial nutrition can have many complications such as: infection, edema of extremities, aspiration and pneumonia, pulmonary edema, nausea and diarrhea. Ensuring that the resident and/or family/health advocate understands the benefits as well as the risks involved with tube feeds enables them to make an informed decision.

Artificial feeding by Total Parental Nutrition (TPN) is **neither initiated nor continued** at Agapé Hospice. Discontinuation of TPN and removal of the TPN line should be completed by the sending institution prior to the resident being transported to Agapé Hospice.

## DEFINITIONS

Artificial Nutrition – is a medical treatment allowing a person to receive fluids and/or nourishment.

Total Parental Nutrition (TPN) – allows a person to receive fluids and nutrients through a special type of intravenous line (central line) through a large vein. It provides proteins, fats and carbohydrates.

Enteral Feedings (tube feeds) – allows a person to receive fluids, calories and nutrients through a feeding tube inserted through the nose or through the skin of the abdomen into the stomach (gastrostomy, PEG tube) or intestine (jejunostomy).



Policy Name	Policy Number: <b>0214</b>
<b>ARTIFICIAL NUTRITION</b> (Total Parenteral Nutrition (TPN), Enteral Feedings)	Page No: Page 2 of 2

## **PROCEDURE**

1. Following admission to the Hospice the attending physician (or designate) will discuss with the Resident and/or health advocate the benefits and risks of artificial feeds.
2. If the decision is made to continue the tube feeds at the hospice, the interdisciplinary team will continue to evaluate the appropriateness of the tube feeds throughout the resident's stay at Agapé Hospice.
3. The physician must write an order, in the Resident's health record, indicating the type of fluid, amount and frequency of the enteral feeding and flushes.
4. The registered nurse (RN) will process the orders and indicate the necessary information on the Resident's care plan and medication administration record (MAR).
5. If the resident and/or health advocate makes the decision to stop the tube feeds, documentation of this discussion regarding tube feed is crucial. This information must be documented in the progress notes of the Resident's health record. Documentation should include who requested to have the tube feeds discontinued, and whether the Resident (if able), and/or health advocates, are in agreement with the decision.
6. If a Resident is no longer receiving tube feeds, but is receiving medication through the enteral feeding tube, the RN will follow the procedure set out in Policy # 0270.

## **CROSS REFERENCES**

Policy # 0230 – Transcribing and Checking Doctor's Orders.

Policy # 0270 – Enteral Feeding Tubes: Maintenance and Administration of Medications

## **REFERENCES**

Canadian Virtual Hospice – Lack of Appetite and Loss of Weight.

American Academy of Hospice and Palliative Medicine – Position Statements –  
Statement on Artificial Nutrition and Hydration Near the End of Life.

National Hospice & Palliative Care Organization – Commentary and Position  
Statement on Artificial Nutrition and Hydration.

Rainbow Hospice and Palliative Care – Position on Artificial Nutrition and Hydration.