



CLINICAL GUIDELINE

Eating Disorders Management in Acute Medical Settings

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

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Important Note:

The Intranet version of this document is the only version that is maintained. Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

Acute Sector Pathway for patients with Eating Disorders

This Pathway has been developed by Acute Medicine, Gastroenterology, Adult mental health liaison service and the Adult Eating Disorders Service (AEDS). It is specifically for adults over 18 years with an eating disorder: Anorexia Nervosa, Bulimia Nervosa or atypical eating disorder, who are physically compromised and require Acute Sector admission either directly from the community or from a psychiatric bed (this may be in AEDS or general psychiatry). AEDS can be involved both directly for current open cases and indirectly for unknown new cases. Adult Mental Health Liaison Service can be involved for all cases.

Admission to Acute Sector required:

Admission from Community: patient to be assessed in the Medical Assessment Unit (MAU) initially. A senior member of the medical team should contact and discuss with the Adult mental health liaison service: they, in turn, will then decide whether to directly involve AEDS.

Transfer from a psychiatric bed: ideally for transfer to appropriate ward; MAU assessment otherwise. A senior member of the medical team should contact and discuss with Adult mental health liaison service.

Seek expert help early: AEDS can be involved both directly for current open cases and indirectly for unknown new cases. Dietetic involvement early is vital.

Joint decision-making needs to take place immediately around-

1. Level of physical health risk
2. Monitoring required
3. Requirement for observation
4. Risk of refeeding syndrome
5. Use of the Mental Health (Care & Treatment)(Scotland) Act 2003

Due to the short time frame of medical admissions indirect contact with AEDS may be most practical.



Admission to Medical Ward: daily ward rounds will determine day to day medical care with high level of Adult mental health liaison service and/or AEDS involvement for psychiatric management. Appropriate psychiatric ward updated.



Medical discharge decision only following discussion between senior member of the Medical team and Adult mental health liaison service and/or AEDS.

If physically fit: discharge to care of community or alternatively transfer to psychiatric unit if needed.

CARE NOTES:

Information and advice notes hospital staff involved in the care of AED patients: Ward Medical Staff; Ward Nursing Staff; Dietitians; Psychiatry

Link to
Medical
Staff doc

Link to
Ward
Nurses
doc

Link to
Psychiatric
doc

Link to
Refeeding
Plans

Link to
Legal and
Restraint
doc

Management of Eating Disorders in Acute Medical Settings, NHSGGC (Derived from Medical Emergencies in Eating Disorders, [MEED](#))

MEDICAL EMERGENCIES IN EATING DISORDERS

This all-age guideline was published in 2022, replacing MaRSiPAN and Junior MaRSiPAN. It provides a comprehensive overview of the medical management of eating disorders in the acute hospital setting, including a traffic light risk system, a checklist risk assessment for frontline staff and summary sheets for different members of the MDT as well as for patients and carers. There is a separate appendix for [Type 1 Diabetes and Eating Disorders](#).

Dr Paul Robinson from University College London who initiated the original guidelines in 2010 has developed a helpful MEED website which includes an online [MEED Risk Assessment Tool](#)

LEGAL AND RESTRAINT ISSUES

Mental Health Act: early consideration of this is essential. In an emergency, any fully registered medical practitioner can detain a patient using an Emergency Detention Certificate, but should always seek expert psychiatric advice. An EDC allows detention for up to 72 hours but should be reviewed by an Approved Medical Practitioner, usually a consultant psychiatrist, as soon as is practicable.

If patients are being deprived of their liberty through admission to hospital and are not consenting, or showing variable consent, then consideration should be given to the use of mental health legislation. This affords the patient a number of safeguards under the Act, including rights of appeal, access to independent advocacy and second opinions in relation to certain treatments.

Patients with anorexia nervosa can appear very articulate and rational in making decisions about most aspects of their life but can show significantly impaired decision making ability in relation to decisions about treatment of their anorexia nervosa. Use of the Act may be required to detain the person in hospital to allow treatment, and also to authorise treatment. Nutrition is considered treatment of the mental disorder, so can be authorised under the Act, including nasogastric feeding against the person's wishes.

If the patient is detained and it is considered necessary to save life or to prevent serious deterioration, artificial nutrition via nasogastric tube may be administered. Medical staff giving this treatment must complete a Form T4, 'record of notification following urgent medical treatment' and send it to the Mental Welfare Commission for Scotland within 7 days. The T4 can be found in the 'treatment' section of <https://www.gov.scot/publications/mental-health-law-forms/>

Ongoing provision of NG feeding needs to be authorised by a Designated Medical Practitioner arranged by the Mental Welfare Commission, and this will be arranged by the Liaison Psychiatry or the Eating Disorder Service consultant psychiatrist. Form T3, Certificate of the Designated Medical Practitioner provides authorisation for treatment and may include the use of physical restraint or sedative medication.

Early involvement of Psychiatric Liaison Service can allow access to EMIS, the mental health electronic record. This will contain valuable information about diagnosis and previous treatment. It will also flag up if the patient is currently subject to the Mental Health Act or has an Advance Statement.

Further information:

- Mental Health (Care & Treatment) (Scotland) Act 2003 Forms, including Emergency Detention Certificate <https://www.gov.scot/publications/mental-health-law-forms/>
- Mental Welfare Commission for Scotland guidance on significantly impaired decision making ability in eating disorders <https://www.mwscot.org.uk/sites/default/files/2019-06/sidma.pdf>
- Mental Welfare Commission good practice guide – nutrition by artificial means <https://www.mwscot.org.uk/sites/default/files/2019->

[06/nutrition by artificial means final 0315.pdf](#)

- Mental Welfare Commission information for patients about their rights in relation to artificial nutrition <https://www.mwcscot.org.uk/sites/default/files/2019-06/mhc-guides-nutrition-revised.pdf>

Restraint

In the Rare occurrence that it is deemed necessary to have compulsory treatment or patients with extreme body weight the same principles should apply. Food has been deemed a treatment and can be given in the context of a compulsory treatment order.

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To aid in the treatment of these vulnerable patients sedation may be required, please see this link for guidance

<http://handbook.ggcmedicines.org.uk/guidelines/central-nervous-system/management-of-acutely-disturbed-patients-including-delirium/>

BACK TO PAGE 1

NURSING STAFF GUIDELINES FOR ADULT EATING DISORDER PATIENTS

General information

RMN staff are generally utilised in acute general hospitals when an AED patient is admitted. Not all RMN staff have specific experience in this area, therefore it is vital to ensure you read all the documentation and practice in accordance with the recommendations. Do not amend the plan.

- Please follow the recommendations for what should be included in note documentation
- Food related activities are distressing for the patient, so therapeutic encouragement and support is required at mealtimes.
- Observe for common ED behaviours include food smearing, hiding food, food spoiling, water loading, vomiting, laxative abuse, and covert exercising
- Be aware that patients can demonstrate psychological signs of starvation including; cognitive confusion, thought rigidity, emotional lability, obsessional traits and strong resistance to treatment.
- The patient must not be left alone. As patients are often nursed in single rooms (only single rooms in the QEUH), you must always ensure another member of staff is with the patient if you require to leave the room for any reason.
- Ensure you take allocated breaks, and do not eat your lunch/snacks in the room with the patient.
- Communicate regularly with ward staff, who require to be updated on the patients progress. Keep in mind that they are a good resource in helping to care for the patient as they are in the ward regularly, whereas RMN staff change daily.
- Patients should not be discussing weight, BMI, menu plans or comparisons with fellow patients. If these are discussed patients should be reminded this is inappropriate for general daily discussion and conversation should be steered to everyday discussion about weather, TV, hobbies etc. Patients should be advised to discuss these issues with their ED Key Worker during 1:1 sessions. Tight professional boundaries are essential.
- Restraint may be required to administer life-saving treatment. This should be done within the training and experience of the ward staff supported by RMN staff. Close consultation between psychiatry and medical staff is required in this circumstance.

Supervisions

Patient should be sitting in an upright position with feet on the floor. Legs should not be crossed. This is to promote digestion and reduce any temptation to covertly exercise i.e. foot tapping, leg shaking, tensing muscles and lifting legs off the floor. Patient may need to be reminded to remain restful throughout supervision and should not get up out of chair at this time. Patient should also be sitting in the lower chairs provided, again this is to discourage any urges to lift legs off the floor and cause extra strain on muscles. Staff should also not be sitting with legs on chairs or tapping feet/hands throughout supervision period also. This is to encourage

patients to comply with expectations of supervision. No mobile phones should be used during supervision. Patients should not go to the toilet during supervision. If a patient cannot wait until after supervision they will be accompanied into the toilet and observed by staff throughout. Please remind the patients that they should visit the toilet prior to meals/snacks to prevent this in the future. Staff can encourage patients to engage in activities during supervision such as board games, playing cards, DVDs etc. as a means of distraction as this is a very distressing time of the day. Relaxation scripts can also be used. Please check with regular ward/ED staff for appropriate material which can be used. Ask ward staff about supervision timescales.

Special Observations

Patients should not be walking about excessively from room to room. Staff should point out any ED behaviours observed to allow patients to acknowledge and correct these. These mostly will include covert exercise (foot tapping, leg shaking, tensing muscles, lifting legs off the floor, excessive movement to fetch things). Patients should be observed at all times including in the toilet and shower. Observations are used as a supportive measure for patients around ED behaviours and distress.

Toilet + Shower Obs

Patients should remain within your sight at all times. Do not turn your back to the patient or stand out of sight. Patients need to be observed at these times to reduce and monitor ED behaviours such as hovering slightly above the toilet seat, not sitting on provided shower seat, over bending/stretching, washing hair and body over vigorously, jogging on the spot and drinking water from the shower. Patients should be seated when drying self and hair should be out in a towel turban instead of rubbing dry. If patient on bed rest, hair should be dried by nursing staff. Showers should last five minutes only. Please run the shower beforehand and check temperature before patient enters the shower. Hair should be completely dried after showering. Patients with a very low BMI are at high risk of collapse. This is also an important reason why we observe in the shower.

Bed Rest

When ED patients are placed on bed rest this is because they are physically compromised. Patients should be lying in bed with legs straight out (not tucked underneath) this is to minimise opportunity for covert exercise and promote better circulation. Patient should not be stretching around the bed area, going into bedside drawers, lifting heavy toiletry bags or doing anything like these activities which cause them to be moving excessively.

Wheelchair Use

If patient has to be mobilised on wheelchair please make sure the footrests are raised when getting into/out of the chair. This is to minimise the risk of falls and over exercising. Patient should wait until the wheelchair is brought over to them and also until staff have taken them to their destination and stopped before exiting the wheelchair.

Patients should not leave the ward in a wheelchair unless their BMI is at a sufficient level and this has been agreed as part of the care plan.

Mealtimes

Mealtimes can be a difficult time for patients. Staff should be seated at the table with patients for meals (unless otherwise stated in treatment plan). Table conversation should not be about food, likes/dislikes of food or generally anything food related. Conversation should be directed to everyday general topics. Patients may question portion sizes provided as part of their anxieties around food. Patients should be reminded that ward staff are aware of portion sizes provided and they should accept portion provided. Main meals should last no more than thirty minutes and snacks no more than fifteen minutes. Any food not completed within this time should be removed and supplement offered. If a patient refuses to complete a meal/snack provided they should be encouraged to do so. Ask why they are unable to finish. Remind patients they are expected to complete all meals and snack as part of their treatment plan (food is viewed as medicine) and not completing entire meal or snack is viewed as a refusal to comply with treatment plan and a supplement equivalent will be offered. If refusing to eat the meal they must sit with the meal for the duration of that meal i.e. thirty minutes and snack fifteen minutes, before being offered a supplement which they should complete in no more than five minutes.

EATING DISORDER BEHAVIOURS

Patients with eating disorders often have behaviours associated with food that are linked to their illness and are not common amongst people who do not have an eating disorder.

The following are common behaviours:

- checking food labels for specific information : usually calories or fat content
- having lists of 'healthy' and 'unhealthy' foods or 'safe' foods
- eating a poor variety of foods by choosing 'safe' options
- calculating total amounts of consumed by weighing or measuring foods and fluids
- eating at specific times and feeling anxious if this cannot happen
- using compensatory behaviours when routine is broken or extras are eaten
- eating foods only in specific combinations (e.g. no protein and carbohydrate together)
- systematic eating (e.g. only one food at a time)
- eating food in a set pattern (e.g. vegetables then starch food)
- cutting food into tiny pieces before eating
- mashing food which does not need it
- flattening/squashing sandwich before eating it
- rearranging food on the plate or in the sandwich
- segregation of food (e.g. peeling lasagne apart)

- flattening food on plate unnecessarily then eating tiny amounts (e.g. breakfast cereal)
- nibbling tiny portions of food
- eating crusts off sandwiches before remainder
- over-chewing food
- storing food in mouth to avoid eating it
- hiding food to give the appearance of having eaten it (e.g. in pockets)
- having to have food very hot or very cold
- overusing seasonings or condiments
- having large amounts of vegetables or salads with meals
- having cooked vegetables with sandwiches
- trying to negotiate 'safer' carbohydrates at meals (e.g. potatoes with curry or sweet and sour dishes)
- taking over 30 minutes to eat a meal
- getting rid of spreads onto plate/napkins/fingers/hair
- transferring food from serving plate to clean plate to get rid of 'calories' (e.g. toast)
- picking solids from sauces
- spreading sauce over the plate to leave it
- leaving food from meal plan
- delaying eating food
- deliberately spilling food
- ritualistic counting before eating (to give feeling of safety)
- trying to negotiate meal plan with nursing or catering staff
- unwillingness to handle food (e.g. not using fingers to eat sandwiches)
- inappropriate staring at others when eating
- fidgeting at the table whilst eating (as exercise)
- inappropriate comments about food (e.g. varied portion sizes)
- using inappropriate cutlery
- diluting drinks which should not be diluted (e.g. milk or fruit juices)
- drinking excessive fluids to 'fill up'
- drinking deliberately to manipulate weight
- chewing large amounts of gum
- brushing teeth more than necessary
- unnecessary tidying up after food
- doing inappropriate exercise or activity
- standing unnecessarily
- unnecessary pacing

Essential Aspects of Psychiatric and Psychological Management of Patients with Eating Disorders on Adult Medical Wards

- Eating disorders are serious medical and psychiatric illnesses. They continue to have the highest mortality of any psychiatric illnesses (higher than depression, schizophrenia, or bipolar disorders) and therefore require careful management.
- Patients with severe Anorexia Nervosa (AN) can seem deceptively well. They are often intelligent, articulate and well read. But they can also lack insight into the severity of their illness and can have poor motivation to receive treatment (precontemplative). This makes their management on a busy medical ward very challenging. It is important for staff to appreciate that these individuals are cognitively impaired as a result of starvation and weight loss. They need staff to work together to take over the control of their recovery despite the strong resistance that they may show.
- A psychiatric assessment will be essential to guiding patient care. All medical practitioners should be able to carry this out. Key features included in the assessment are; background history, the patient's understanding of his/her eating disorder, triggers, relationships with family and friends, vocation or university attendance and acknowledgement of the use of legislation as required.
- Seek expert help early. A senior member of the medical team should contact and discuss with the Adult Mental Health Liaison Service (AMHLS), they, in turn, will then decide whether to directly involve AEDS (Adult Eating Disorder Service). AEDS can be involved both directly for current open cases and indirectly for unknown new cases. Joint decision-making needs to take place immediately around level of physical health risk; monitoring required; requirement for observation; risk of refeeding syndrome; and use of the Mental Health Act (MHA).
- Early consideration of the MHA is essential. Any medical practitioner (except FY1 level) can use the Act in an emergency, but should always seek expert psychiatric advice. Use of the MHA is mandatory if the patient's liberty and choice is being restricted without clear evidence of informed consent and unimpaired thinking. The nature of the anorexic illness includes poor insight, denial, precontemplation and treatment avoidance. Sometimes the use of the MHA is essential in order to support life saving treatment and often timely intervention is critical.
- Restraint may be required to administer life-saving treatment. This should be done within the training and experience of the ward staff supported by RMN staff. Close consultation between psychiatry and medical staff is required in this circumstance.
- Early involvement of the Adult Mental Health Liaison Service can allow access to EMIS. This is the mental health electronic record, it will contain valuable information about diagnosis and previous treatment. It will also flag up if the patient is currently subject to the MHA or has an Advance Statement
- Patients at low weight will often show psychological signs of starvation including; cognitive confusion, thought rigidity, emotional lability, obsessional traits and strong resistance to treatment. They can be very articulate and convincing in certain matters whilst being fully trapped by the eating disorder.
- Patients suffering from AN often utilise powerful psychological defences including denial, minimisation, projection and splitting which can divide teams and jeopardise the treatment plan. A shared understanding of the patients presentation and an agreed approach to treatment can greatly improve consistency of care and improve treatment outcome. This could be provided by Psychiatry or Psychology and may be especially valuable for longer length stays.
- These patients will require core skills from staff of patience, empathy and good communication of clear boundaries. It is important that staff are well supported in order to provide a compassionate approach to patients as this illness is challenging to manage and treat.

- The aim of treatment in a medical admission is to support weight and health restoration. Goals of treatment include managing risk, enabling weight gain and healthy eating, restoring cognitive capacity and managing other eating disorder related symptoms including over-exercising, laxative misuse, vomiting, low mood and distress. The primary task is that of building a trusting therapeutic relationship in which the patient feels understood and valued. Within this context the patient will then be able to tolerate food from the dietetically provided menu plan and cope with reduced activity as supported by the nursing staff. An early priority is the establishment of weight gain by means of an individually tailored dietary plan and regular medical monitoring due to refeeding risk.

Care plans for the management of Eating Disorder (ED) behaviours

- Examples of common ED behaviours include food smearing, hiding food, food spoiling, water loading, vomiting, laxative abuse, covert exercising and keeping the room cold to burn more energy. Often patients will vehemently deny the existence of any ED thoughts or behaviours and whilst working to manage them it is best not to get into too much discussion around them.
- These care plans should be written (by RMN) for the management of any ED behaviours to explicitly describe the psychological approach agreed for the intervention.
- Examples of 'low intensity' (can be suggested by any clinician) interventions include encouragement, flexibility, negotiation, gentle humour, praise, distraction, mindfulness and relaxation.
- It can also be valuable to mention the illness behaviour that is most likely to be used and then the support offered to prevent or stop this behaviour.

Safe and Supportive Observation

- The NHS GG&C Mental Health Service Safe and Supportive Observation Policy and the Practise Guidance document applies to all mental health settings. Patients suffering from eating disorders present a particular subset of risks.
- There should be a specialist nurse (RMN) provided during special observation in order to gently help the patient tolerate improved nutritional intake and rest which can be a huge challenge.
- High risk eating disorder behaviours including covert purging and obsessive exercising, are common amongst this group and poor psychological health is combined with high physical risk due to starvation. Most patients require special observation in order to support the treatment approach of a dietetically devised menu plan and supported rest.
- Enhanced observation should be safe and therapeutic, offering opportunity for quiet privacy alongside more active therapeutic interventions including psychological distraction and relaxation.
- It is acknowledged that all food related activities, particularly meal times, will usually be experienced as stressful anxiety provoking events, and nurses will offer psychological support and encouragement during these times.
- Depending on clinical need the patient will be explicitly supported through enhanced observation at meal times with gentle encouragement and motivational support, then after mealtimes in post-meal supervision in order to offer distraction and emotional support to guard against rumination and purging.
- Emotions are often high around the task of eating so patients may be offered assistance in distress tolerance, anxiety management and relaxation in order to cope.

Role of the Adult Eating Disorder Service (AEDS) or other services

- Patients with eating disorders who are treated on medical wards may be known or unknown to AEDS. All patients with severe AN are eligible for input from the Adult Eating Disorder Service (AEDS) this can be direct or indirect (consultation). Due to the short time frame of medical admissions indirect contact may be more useful as required.
- When patients are medically stable they will either be moved to a psychiatric bed either one of AEDS four specialist beds on a general psychiatric ward (Armada Ward, McKinnon House, Stobhill Hospital) or to their own local psychiatric hospital.

BACK TO PAGE 1

Management of Eating Disorders in Acute Medical Settings, NHSGGC

Ward Medical Staff Care Notes

General Points: The following is for general guidance only, individualised care plans devised in cooperation with all members of the multi-disciplinary team, are the gold standard

Meals: Seek immediate Dietetic advice: early involvement of a dietitian is essential to the safe reintroduction of food. *See Dietetic Information Sheet*

Treat meals as you would the administration of medication.

Refeeding syndrome: this is a relatively rare but a potentially fatal condition. If you are aware of it and actively looking for it, it should not happen.

Observation level: One-to-one observation is the default position until such time as expert Psychiatric advice is available. *See Nursing Information Sheet*

Mental Health Act: early consideration of this is essential. Any medical practitioner can use the Act in an emergency, but should always seek expert psychiatric advice.

Limit to necessary investigations as fasting for procedures and leaving the ward for investigations may interfere with life saving weight restoration.

	<u>BMI<13</u> High Risk	<u>BMI 13-15</u> Moderate Risk
Nutrition	Liaise with dietician regarding nasogastric feeding. Supervised (and up to 30 minutes post-meal) All meals to be advised by dietitian. Monitor for re-feeding syndrome.	Supervised (and up to 30 minutes post-meal) All meals to be advised by dietitian.
Fluids	Input and output to be measured (supervised) Liaise with dietitian.	Liaise with dietitian regarding fluid balance.
Observations	Blood pressure, pulse and core temperature (four times daily). Blood glucose four times daily before meals using BM machine. Cardiac monitoring (may require medical HDU)	Blood pressure, pulse and temperature (twice daily) Blood glucose (daily – depending on physical well-being).
Bed Rest	24 hours for most patients (consider deep vein thrombosis prophylaxis). Assess tissue viability and liaise with tissue viability nurse regarding a special mattress.	Periods of bed rest may be introduced. Rest in social settings.
Leave from ward	On Bed Rest: no ward leave.	Short periods in wheelchair where appropriate (depending on physical wellbeing) No unaccompanied leave

Please note that risk may be critically high at a low or normal BMI due to other factors for example starvation, rapid weight loss or purging. These individuals should be treated as **High Risk** in terms of their management. Patients with eating disorders are relatively immunosuppressed: hypoglycaemia, pyrexia or hypothermia, and either a rise or fall in white blood count may indicate hidden infection rather than lack of food.

Cardiac monitoring recommended if electrolytes in the red 'Urgent Action Required' range or ECG abnormalities evident.

Physical investigations for seriously ill patients with anorexia nervosa during re-feeding

Baseline

- FBC
- Urea and electrolytes
- Amylase
- CK (if overactivity suspected)
- Bone profile, magnesium, CRP
- LFTs
- Glucose (by POCT on a glucose meter on the ward and/or laboratory method)
- Zinc, copper, selenium
- Iron profile, vitamin B12 and folate
- Vitamin A/E and carotene
- Vitamin D
- Thyroid function
- Weight – early morning weight after voiding. Twice a week initially.
- ECG

Frequency

Daily: Urea and electrolytes, bone profile, magnesium, LFTs, amylase, glucose, FBC
ECG – daily if BMI<13 and/or cardiac dysrhythmia.

Then always seek specialist advice to determine subsequent frequency.

MICRONUTRIENT SUPPLEMENTATION

Give thiamine supplementation: slow intravenous Pabrinex® one pair of vials three times a day for 48 hours and then thiamine tablets 50 mg four times daily with a balanced multivitamin/trace element supplement (Forceval® once daily). Ensure first Pabrinex® given before commencing feed.

If features suspicious of Wernicke's encephalopathy: treatment dose Pabrinex to be given (Pabrinex® two pairs of vials three times a day).

Electrolyte Replacement

	GREEN Continue to monitor	AMBER Action required	RED Urgent Required Action
Potassium	>3.5	2.5-3.5	<2.5
Phosphate	>0.7	0.3-0.7	<0.3
Magnesium	>0.7	0.3-0.7	<0.3
Calcium (adj)	>2.1	1.8-2.1	<1.8 or tetany

Hypokalaemia:

- Plasma K⁺ 3-3.5mmol/L: Sando-K® 2 tablets 3 times daily*
- Plasma K⁺ 2.5-2.9mmol/L: Sando-K® 3 tablets 3 times daily*
- Plasma K⁺ <2.5mmol/L or cardiac arrhythmia: 40mmol KCl in 500ml sodium chloride 0.9% or glucose 5%; *the rate of infusion should not normally exceed 10mmol/hour.*

*Sando K may be poorly tolerated and reduce appetite: try equivalent oral Kay-Cee-L or revert to intravenous if not tolerated.

Hypophosphataemia:

- Mild to Moderate 0.3-0.7mmol/l: Phosphate-Sandoz® 1-2 tablets three times a day
- Severe <0.3mmol/L with normal renal function: Sodium glycerophosphate 21.6% IV 40mmol given as 2 x 12 hour infusions, i.e. 20mmol (20ml) in 500ml glucose 5% over 12 hours x 2 (if impaired renal function: Sodium glycerophosphate 21.6% IV 20mmol (20ml) in 500ml glucose 5% over 12 hours).

Hypomagnesaemia:

- Mild to Moderate 0.3-0.7mmol/l: Magnesium aspartate dihydrate 243 mg sachet (Magnaspartate®) 2 sachets daily in 50 ml - 200 ml water, tea or orange juice or Magnesium glycerophosphate tablets 3 - 6 tablets daily.
- Severe <0.3mmol/L with normal renal function: magnesium sulphate 20mmol to 30mmol per day for up to 3 days((Add 20 mmol (10 ml of magnesium sulphate 50%) to a 500 ml infusion bag of glucose 5% and infuse over 12 - 24 hours). If impaired renal function, reduce dose by 50%.

Hypocalcaemia:

- Oral Calcium salts – up to 50mmol daily in 2–3 divided doses. For example: Sandocal-1000, 1–2 tablets (25–50mmol) in water.
- If Calcium <1.8mmol/l or hypocalcaemic tetany: Calcium gluconate injection (10%) 10 ml over 10 minutes with cardiac monitoring.

Note: 1. Use oral as the preferred route unless medically indicated

2. The serum calcium may drop during phosphate supplementation

Hypoglycaemia:

- Mild – autonomic symptoms may be a feature. Patient is conscious, orientated and able to swallow. Treat with 15-20g of quick-acting carbohydrate such as: Dextrosol® 5–7tablets or Glucotabs® 4–5 or Glucojuice 60ml or Original Lucozade® 170ml
Test blood glucose level after 10-15 minutes, and if still <4mmol/L, repeat above treatment options up to 3 times. If still hypoglycaemic consider glucose IV (as per severe hypoglycaemia section below)
- Moderate / severe – autonomic and neuroglycopenic symptoms may be a feature. Plasma glucose is typically <2.8mmol/L and can result in coma if left untreated. **Glucagon unlikely to be effective**
Give glucose IV over 10 minutes as:
 - 20% glucose 100ml or 10% glucose 150ml

NASOGASTRIC FEEDING

Liaise with Dietetics

BACK TO PAGE 1

Emergency Refeeding Plans

This document is designed to offer practical guidance to clinicians for the refeeding of seriously ill adult patients with Anorexia Nervosa (AN) admitted to an acute setting. This guidance should be used when an individualised plan is not possible. It is intended to supplement and support the implementation of the current MARSIPAN Guidelines (2014) for adults only. Any patients admitted under 18 years old, please refer to the Junior MARSIPAN, Royal College of Psychiatrists 2012.

The refeeding plans are only to be used when there is no dietetic cover due to the weekend or on extended holiday weekends. Please refer to Dietetics via Trakcare as early as possible so assessment can be prioritised when cover resumes. At all other times, the ward Dietitian must be contacted to provide an individualised menu plan for the patient.

Correct Deranged Bloods

Management of deranged electrolytes, dehydration and hypoglycaemia should be commenced prior to feeding. It is also essential that vitamin/mineral supplementation is initiated immediately prior to feeding e.g. Forceval. For management guidance, please refer to the medical supplement.

Decide the Feeding Route

The medical team needs to decide whether to feed the patient orally or via NG, with food **always** being the first choice. Legally the least restrictive feeding option should be tried first where it is safe to do so.

Starting Calories

MEED recommends that patients should be started on 20kcal per kg body weight unless there are clinical indicators, refer to detailed guidance [MEED](#) (2022). The medical team must therefore decide whether to start a patient on 20kcal or not.

If lower calorie levels are used (5–15 kcal/kg/day), clinical and biochemical review should be carried out twice daily, with calories increased gradually to 20 kcal/kg/day within 2 days unless there is a contraindication. See [MEED](#) for further information.

Feeding at 5 - 10kcal per kg will provide the patient with very little calories and they will be at extreme risk of under feeding and hypoglycaemia. For example: a 35kg patient is kept on 5kcal per kg for 24 hours, they will receive only 175kcal in those 24hours. This is clearly not enough and so they should have their calories increased as soon as is medically possible.

If the decision is made to feed the patient at a lower calorie rate please adapt the refeeding plans accordingly i.e. 10kcal/kg – half the amounts of food and calorie containing drinks in the plan.

Progression

Check biochemistry prior to commencing the next day's plan. Refer to the medical [management section](#) for replacement guidance, if required. If the biochemistry is not satisfactory, please repeat previous day menu, do not move on and do not return to day 1. If the patient does not fully complete the days food and drink intake, repeat that day, again do not return to day 1.

Fluids Volume

The fluid volumes in the refeeding plans are calculated to meet the patient's basic fluid requirements based on their weight but can be increased if required. It is important that their hydration status is monitored and if increases are required, please alter the water, tea or coffee amounts only and not the milk as the milk has been included in the calorie calculation.

Fluids and Medication

Some patients may need to be put onto medications which require fluids to be taken with them for example Fybogel or Sando K. These fluids will need to be considered in the patient's fluid balance but not taken out of their fluid allocation.

Patient access to Food and Drink

Patients should be supervised during meals to ensure they complete the meals and do not engage in any eating disorder behaviours. All fluids should be as prescribed in the menu plan only. No jugs of water should be left by the patient's bedside.

Documentation

Regardless of plan chosen, all diet/fluid/supplement or NG bolus intakes should be documented on an NHS GG&C Food Chart (diet) and Fluid Balance (fluid) stored in the bed end folder. This should not be shared with the patient.

Catering

Please notify kitchen staff that a refeeding plan has been initiated so an adequate supply of products can be provided. The products used in the plans are those normally available on wards however thick and creamy yoghurts may need to be requested.

Likes and Dislikes

Most ED patients will claim to have at least one (usually more than one) food that they genuinely do not like and insist that it is not related to their ED. It is very difficult to disentangle genuine likes and dislikes from ED behaviours. Initially no dislikes are allowed and so if the patient refuses to eat a particular food, the replacement supplement should be offered and an alternative food should not be sourced

- Do not contact catering to source an alternative food
- Do not source alternative food from other wards
- Do not buy the food from elsewhere e.g. M&S in the QEUH
- Do not allow food to be brought in by family or friends
- Only food or drinks provided by catering should be offered to the patient.

Timings of Meals and Snacks

The patient should only be offered the food and drink prescribed on the refeeding plan. If they refuse, they should be left with the food for 25 minutes, 10 minutes if a snack. If the food or drink is still refused the supplement equivalent is then offered. Refer to nursing section.

Allergies and Intolerances

Allergies or intolerances are often given as a reason by ED patients why they cannot eat a particular food or drink, with dairy being the most commonly reported. Only diagnosed allergies or intolerances through their GP are accepted. If a patient claims to have an allergy or intolerance, if it is self-reported and not officially diagnosed then they are not allowed. Nut allergies are the obvious exception to this.

Initiation of the Refeeding Plan

The refeeding plan should be initiated as soon as possible to avoid unrestricted access to food or fluids. Please ensure that details of the plan are effectively communicated to all wards staff, crucially catering and domestic staff. Details and documentation started should be handed over to adjacent wards if transferred.

How to Weigh an Eating Disorder Patient Safely on a Ward

Although you will weigh patients daily as part of your job, there are some issues that have to be remembered when weighing a patient who has an eating disorder.

It is important to get an accurate weight for these patients as the choice of refeeding menu plan is based on their weight and if they have an artificially high weight and the wrong plan is chosen, the patient may be given too many calories and especially carbohydrates that can lead to refeeding syndrome. Refeeding syndrome can be a serious condition which can lead to severe medical complication and if left untreated can lead to death.

It is not unusual for eating disorder patients to falsify their weight, especially if they are trying to avoid an admission. Care must be taken when checking these patients' weight to look out for some of the common methods that may be used to achieve the false weight.

Possible Method of Weight Falsification	Solution
Heavy clothing, heavy footwear or too many clothes e.g. a patient wearing two pairs of trousers is not uncommon, heavy jumpers, even in summer or boots in winter	Weight the patient in their underwear
Items in pockets or hiding items within clothes e.g. phones, keys or coins or coins in bra	Weigh the patient in their underwear and check the patient for any obvious signs of items hidden in their bra or pants
Heavy jewellery	Ask patient to remove all jewellery
Ankle weights	Weigh the patient in their underwear
Water loading	Weigh the patient first thing in the morning after they have gone to the toilet. Ensure that staff see the patient going to the toilet, do not take the patients' word that they went. If the patient is admitted during the day, they should be weighed on admission but their weight should be rechecked first thing the next morning.

Remember

- Weigh the patient in their underwear
- Weigh the patient first thing in the morning
- Weigh the patient before they have any food or drink
- Weigh the patient after they have been to the toilet

Supervise the patient in the toilet to ensure that they did empty their bladder and/or bowel, and to stop them drinking fluid from the taps or shower

Emergency Refeeding Plans

Choose the appropriate plan based on the actual body weight obtained.

Follow the link to the appropriate refeeding plan which contains the first 4 days of an emergency refeeding plan based on 20kcal per kg body weight. Days 1 – 3 of all plans are the same and there is an increase on day 4. After day 4, liaison with a Dietitian required for an individualised plan. Checking biochemistry should occur daily before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one. Refer to the medical [management section](#) for replacement guidance, if required.

Oral Diet and Supplements

Only offer the oral diet that is detailed in the plan. No food or should be brought in by family or friends to the patient and alternatives should not be sourced from catering (see likes and dislikes)

The patient should only be given supplements if they cannot complete the prescribed food or drink. If they are able to complete the food or drink prescribed, they should not be offered any supplement.

If the patient does require supplements, either as a meal replacement or if they refuse all oral diet please use the Ensure Plus Milkshake type only. **Do not use Ensure Compact or Ensure Plus Juice.** The Ensure Compact is too concentrated and can lead to refeeding syndrome. The Ensure Juice contains no fat, and therefore no fat associated nutrients e.g. fat soluble vitamins, and so are not nutritionally complete. Eating disorder patients will request the juice based supplements because they contain no fat.

Enteral Feeding, Bolus

A NG tube is the preferred mode of delivery of enteral feed. Please refer to the NHS GG&C NG Nutrition Resource Manual for NG Insertion, position and care planning guidance. Bolus is preferable over pump feeding as it can mimic meal times and allow the patient to work towards oral diet. Bolus feeding also reduces the risk of interference to the feeding by the patient when compared to continuous pump feeding.

[Link to 25kg](#)

[Link to 27.5kg](#)

[Link to 30kg](#)

[Link to 32.5kg](#)

[Link to 35kg](#)

[Link to 37.5kg](#)

[Link to 40kg](#)

[Link to 42.5kg](#)

[Link to 45kg](#)

[Link to 47.5kg](#)

[Link to 50kg](#)

BACK TO PAGE 1

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 25kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

25kg, Oral Diet, Days 1 - 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 150mls Water	110mls
Pm snack	250mls Water, tea or coffee with milk but NO sugar	
Eve Meal	½ Cooked Meal – see below 150mls Water	150mls
Supper	100mls semi-skimmed milk	40mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

25kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion Semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 150mls Water	110mls
Pm snack	250mls Water, tea or coffee with milk but NO sugar	
Eve Meal	Full Cooked Meal – see below 150mls Water	300mls
Supper	150mls semi-skimmed milk	50mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

25kg Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	80mls Ensure Plus Milkshake Type 100mls water	120mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Lunch	80mls Ensure Plus Milkshake Type	120mls Ensure Plus Milkshake Type
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Eve Meal	80mls Ensure Plus Milkshake Type	120mls Ensure Plus Milkshake Type
Supper	100mls Ensure Plus Milkshake Type 100mls water	140mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

25kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	80mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus	120mls Ensure Plus Milkshake Type 50mls flush sterile water before and after bolus
Snack		
Lunch	80mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus	120mls Ensure Plus Milkshake Type 50mls flush sterile water before and after bolus
Snack		
Eve Meal	90mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus	130mls Ensure Plus Milkshake Type 50mls flush sterile water before and after bolus
Supper	90mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus	130mls Ensure Plus Milkshake Type 50mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 27.5kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

27.5kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 150mls Water	110mls
Pm snack	250mls Water, tea or coffee with milk but NO sugar	
Eve Meal	½ Cooked Meal – see below 150mls Water	150mls
Supper	150mls semi-skimmed milk	50mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

27.5kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 150mls Water	110mls
Pm snack	250mls Water, tea or coffee with milk but NO sugar	
Eve Meal	Full Cooked Meal – see below 150mls Water	300mls
Supper	200mls semi-skimmed milk	70mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

27.5kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	90mls Ensure Plus Milkshake Type 100mls water	130mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Lunch	90mls Ensure Plus Milkshake Type	130mls Ensure Plus Milkshake Type
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Eve Meal	90mls Ensure Plus Milkshake Type	130mls Ensure Plus Milkshake Type
Supper	100mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

27.5kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	90mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus	130mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Snack		
Lunch	90mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus	130mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Snack		
Eve Meal	90mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus	140mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Supper	90mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus	140mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 30kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

30kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 150mls Water	110mls
Pm snack	250mls Water, tea or coffee with milk but NO sugar	
Eve Meal	½ Cooked Meal – see below 150mls Water	150mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Remember: Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day only – do not return to day one

30kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 200mls Water	110mls
Pm snack	100mls semi-skimmed milk	40
Eve Meal	Full Cooked Meal – see below 200mls Water	300mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Remember: Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day only – do not return to day one

30kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	100mls Ensure Plus Milkshake Type 100mls water	140mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Lunch	100mls Ensure Plus Milkshake Type	140mls Ensure Plus Milkshake Type
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Eve Meal	100mls Ensure Plus Milkshake Type 100mls water	140mls Ensure Plus Milkshake Type 100mls water
Supper	100mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

30kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	100mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	140mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Snack		
Lunch	100mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	140mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Snack		
Eve Meal	100mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	140mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus
Supper	100mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	150mls Ensure Plus Milkshake Type 60mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 32.5kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

32.5kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	100mls semi skimmed milk	40mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

32.5kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal 60mls Semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	200mls semi-skimmed milk	50mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

32.5kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	110mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Lunch	110mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Eve Meal	110mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water
Supper	110mls Ensure Plus Milkshake Type 100mls water	150mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

32.5 kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	110mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	150mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus
Snack		
Lunch	110mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	150mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus
Snack		
Eve Meal	110mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	150mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus
Supper	110mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus	150mls Ensure Plus Milkshake Type 70mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient’s minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 35kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

35kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	200mls semi skimmed milk	70mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

35kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	250mls semi-skimmed milk	90mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Supper	250mls semi-skimmed milk	90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognaise serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

35kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	120mls Ensure Plus Milkshake Type 100mls water	160mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Lunch	110mls Ensure Plus Milkshake Type 100mls water	160mls Ensure Plus Milkshake Type 100mls water
Snack	200mls Water, tea or coffee with milk, NO sugar	200mls Water, tea or coffee with milk, NO sugar
Eve Meal	120mls Ensure Plus Milkshake Type 100mls water	160mls Ensure Plus Milkshake Type 100mls water
Supper	120mls Ensure Plus Milkshake Type 100mls water	160mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

35kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	120mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus	160mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus
Snack		
Lunch	110mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus	160mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus
Snack		
Eve Meal	120mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus	160mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus
Supper	120mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus	160mls Ensure Plus Milkshake Type 80mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 37.5kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

37.5kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	100mls semi skimmed milk	40mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 200mls semi-skimmed milk	90mls 70mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

37.5kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	100mls semi-skimmed milk	40mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

37.5kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	120mls Ensure Plus Milkshake Type 100mls water	170mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	120mls Ensure Plus Milkshake Type 100mls water	160mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	130mls Ensure Plus Milkshake Type 100mls water	170mls Ensure Plus Milkshake Type 100mls water
Supper	130mls Ensure Plus Milkshake Type 100mls water	170mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

37.5kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	120mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	170mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Snack		
Lunch	120mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	160mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Snack		
Eve Meal	130mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	170mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Supper	130mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	170mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 40kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

40kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	150mls semi skimmed milk	50mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

40kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	200mls semi-skimmed milk	70mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

40kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	130mls Ensure Plus Milkshake Type 100mls water	170mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	130mls Ensure Plus Milkshake Type 100mls water	170mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	140mls Ensure Plus Milkshake Type 100mls water	180mls Ensure Plus Milkshake Type 100mls water
Supper	140mls Ensure Plus Milkshake Type 100mls water	180mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

40kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	130mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	170mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Snack		
Lunch	130mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	170mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Snack		
Eve Meal	140mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	180mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus
Supper	140mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus	180mls Ensure Plus Milkshake Type 90mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 42.5kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

42.5kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	250mls semi skimmed milk	90mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

42.5kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk	70mls
Am snack	250mls Water, tea or coffee with milk but NO sugar	
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x thick and creamy yoghurt 100mls semi-skimmed milk	100mls 40mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 200mls semi-skimmed milk	90mls 70mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

42.5kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	140mls Ensure Plus Milkshake Type 150mls water	180mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	140mls Ensure Plus Milkshake Type 100mls water	180mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	140mls Ensure Plus Milkshake Type 100mls water	190mls Ensure Plus Milkshake Type 100mls water
Supper	150mls Ensure Plus Milkshake Type 100mls water	190mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

42.5kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	140mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus	180mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus
Snack		
Lunch	140mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus	180mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus
Snack		
Eve Meal	140mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus	190mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus
Supper	150mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus	190mls Ensure Plus Milkshake Type 100mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 45kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

45kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	150mls semi-skimmed milk	50mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x Thick and creamy yoghurt 250mls Water, tea or coffee with milk but NO sugar	100mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 200mls semi-skimmed milk	90mls 70mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

45kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	150mls semi-skimmed milk	50mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x Thick and Creamy Yoghurt 250mls Water, tea or coffee with milk but NO sugar	100mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

45kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	150mls Ensure Plus Milkshake Type 150mls water	190mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	150mls Ensure Plus Milkshake Type 100mls water	190mls Ensure Plus Milkshake Type 100mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	150mls Ensure Plus Milkshake Type 150mls water	190mls Ensure Plus Milkshake Type 150mls water
Supper	150mls Ensure Plus Milkshake Type 100mls water	200mls Ensure Plus Milkshake Type 100mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

45kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	150mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	190mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Snack		
Lunch	150mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	190mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Snack		
Eve Meal	150mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	190mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Supper	150mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	200mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 47.5kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

47.5kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	200mls semi-skimmed milk	70mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x Thick and Creamy Yoghurt 250mls Water, tea or coffee with milk but NO sugar	100mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

47.5kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	250mls semi-skimmed milk	90mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x Thick and Creamy Yoghurt 250mls Water, tea or coffee with milk but NO sugar	100mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

Supplement Replacement: ONLY if they do not complete the food or drink

- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

47.5kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	160mls Ensure Plus Milkshake Type 150mls water	200mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	160mls Ensure Plus Milkshake Type 150mls water	200mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	160mls Ensure Plus Milkshake Type 150mls water	200mls Ensure Plus Milkshake Type 150mls water
Supper	160mls Ensure Plus Milkshake Type 150mls water	200mls Ensure Plus Milkshake Type 150mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

47.5kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	160mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	200mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Snack		
Lunch	160mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	200mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Snack		
Eve Meal	160mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	200mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus
Supper	160mls Ensure Plus Milkshake Type 130mls flush sterile water before and after bolus	200mls Ensure Plus Milkshake Type 110mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

Please Read the Nutrition Section
before starting refeeding

Ensure that you have weighed
your patient properly

This refeeding plan is for
patients around 50kg

If using supplements please make sure you
use Ensure Plus Milkshake only

Do not use Ensure Compact
or Ensure Plus Juice

Ensure Compact can increase the risk of re-
feeding syndrome which can lead to severe
medical complications and death

50kg, Oral Diet, Days 1 – 3

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	250mls semi-skimmed milk	90mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x thick and Creamy Yoghurt 250mls Water, tea or coffee with milk but NO sugar	100mls
Eve Meal	½ Cooked Meal – see below 250mls Water	150mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

Fluids: Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the milk as this is included in the calorie calculations. Fluids with medication does not affect the fluids here

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- If manage all meal or snack, do not offer supplement
- If manages more than half of the meal or snack but cannot complete it, please offer only half the supplement amount
- If manages less than half of the meal or snack please offer all of the supplement

Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

50kg, Oral Diet, Day 4

Meal	Food	Ensure Plus Milkshake Type only if food/drink is not completed
Breakfast	½ portion cereal & ½ portion semi-skimmed Milk 250mls water	70mls
Am snack	250mls semi-skimmed milk	90mls
Lunch	½ Sandwich 250mls Water	110mls
Pm snack	1 x Thick and Creamy Yoghurt 100mls semi-skimmed milk	100mls 40mls
Eve Meal	Full Cooked Meal – see below 250mls Water	300mls
Approx 7.30pm	250mls Water, tea or coffee with milk but NO sugar	
Supper	1 x toast and spread 250mls semi-skimmed milk	90mls 90mls

Do not make any changes to the menu plan. It has been specifically calculated for this patient. If the patient tries to negotiate a change, do not engage in the negotiation. If the patient refuses food please offer the supplement replacement, and not find an alternative food choice

Fruit Juice: Do not give apple juice as it is too low in calories

Tea & Coffee: Must have milk but NO sugar during re-feeding

Bread: Plain or pan, white or wholemeal, whatever is on ward. Patient is not allowed to request a particular type

Toast: Patient is not allowed to request how toasted the bread should be. Not allowed jam at this time

Sandwiches: ½ sandwich = 1 full slice of bread = ½ packet

Main meal: Serve with ½ portion of mash/wedges/chips or croquettes with ½ portion vegetables

Salad: If coleslaw is not available, please serve with 50mls semi skimmed milk as replacement. No extra vegetables.

- Turkey Salad serve with ½ portion chips
- Roast pork Salad serve with ½ portion potato croquettes
- Tuna mayo salad serve with ½ portion croquettes
- Smoked mackerel salad serve with ½ portion potato croquettes
- Egg mayo salad serve with ½ portion potato croquettes

Rice Dishes: No extra vegetables with any rice dishes

Pasta Dishes:

- Beef lasagne serve with ½ portion croquettes
- Macaroni and cheese serve with ½ portion chips
- Mushroom Ravioli serve with ½ portion croquettes
- Vegetarian Cannelloni serve with ½ portion mash
- Savoury Spaghetti serve with 1 x slice bread and spread
- Quorn Pasta Bolognese serve with 1 x slice bread and spread

Condiments: Up to 1 x salt, 1 x pepper, 1 x sauce and 1 x vinegar, depending upon the meal, but only one sachet of each per meal. Condiments need to be meal appropriate e.g. none with curry, vinegar only with chips, none on sandwiches etc.

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Friends and Family: No food or drinks to be brought in by friends or family. Only food provided by catering is allowed

Check bloods before moving onto the next day. If bloods are unsatisfactory, repeat that day. Do not return to day one

50kg, Supplements Only

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	170mls Ensure Plus Milkshake Type 150mls water	210mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Lunch	160mls Ensure Plus Milkshake Type 150mls water	210mls Ensure Plus Milkshake Type 150mls water
Snack	250mls Water, tea or coffee with milk, NO sugar	250mls Water, tea or coffee with milk, NO sugar
Eve Meal	170mls Ensure Plus Milkshake Type 150mls water	210mls Ensure Plus Milkshake Type 150mls water
Supper	170mls Ensure Plus Milkshake Type 150mls water	210mls Ensure Plus Milkshake Type 150mls water

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The non-calorie fluids can be increased if bloods are monitored but please be aware of water loading. Do not leave a jug at the bedside. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.

50kg, Nasogastric

	Day 1 – 3	Day 4
Meal	Ensure Plus Milkshake Type only	Ensure Plus Milkshake Type only
Breakfast	170mls Ensure Plus Milkshake Type 140mls flush sterile water before and after bolus	210mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus
Snack		
Lunch	160mls Ensure Plus Milkshake Type 140mls flush sterile water before and after bolus	210mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus
Snack		
Eve Meal	170mls Ensure Plus Milkshake Type 140mls flush sterile water before and after bolus	210mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus
Supper	170mls Ensure Plus Milkshake Type 140mls flush sterile water before and after bolus	210mls Ensure Plus Milkshake Type 120mls flush sterile water before and after bolus

Fluids

Please note that the above fluids cover the patient's minimal fluid requirements only. The flushes can be increased if bloods are monitored but please be aware of fluid overloading. Do not increase the Ensure as this is included in the calorie calculations. Fluids with medication does not affect the fluids here.