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Screening for Risk of Acute Malnutrition in Paediatric Hospital Patients

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Introduction

Nutritional assessment of paediatric patients is an integral part of clinical care process. However, routine nutrition screening of paediatric patients upon admission to hospital is still a rare practice in Hong Kong perhaps related to the lack of a universally accepted simple and accurate screening tool. Sermet-Gaudelus et al in year 2000 validated the Paediatric Nutritional Risk Score (PNRS) that can be used on admission to identify children at risk of acute malnutrition during hospitalization. The PNRS ranged from 0 to 5 and was calculated by adding the values for the significant risk factors as follows: 1 for food intake <50%, 1 for pain, 1 for grade 2 pathologic condition, and 3 for grade 3 pathologic condition. A score of 1 or 2 indicated moderate risk and a score > or = 3 indicated high risk of malnutrition.

Objectives

To validate PNRS's applicability in general paediatric wards of Prince of Wales Hospital

Methodology

All patients admitted to the three general paediatric wards between 1st and 14th July 2013 were screened by nurse using PNRS within 24 hours of admission. User satisfaction survey was conducted afterwards.

Result

There were total 182 patients screened, 177 patients (97%) were classified as normal, five patients (3%; one patient had food intake <50%, two patients had pain, and two patients had grade 2 pathologic condition) as medium, and none of the patients (0%) as high risk of malnutrition. This prevalence of patients at risk of malnutrition was much lower than that reported by Sermet-Gaudelus et al's study in year 2000 which out of 296 patients screened, forty-four patients (15%) were classified as normal, 121 patients (41%) as medium and 131 patients (44%) as high risk of malnutrition. The difference could be explained by inclusion only general paediatric patients in our study whereas both general and surgical patients in Sermet-Gaudelus et al's research. Out

of the fifty-six nurses who have completed the user satisfaction survey questionnaire, majority (82%) of them rated the screening tool easy to use. Our study is the first attempt of use of PNRS in hospitals of Hong Kong. We shall further explore application of PNRS in other paediatric wards with the aim to develop nutrition screening as part of routine clinical procedures to promote early detection and management of malnutrition for paediatric patients. Reference: Sermet-Gaudelus et al. Simple pediatric nutritional risk score to identify children at risk of malnutrition. *Am J Clin Nutr* 2000; 72: 64-70.