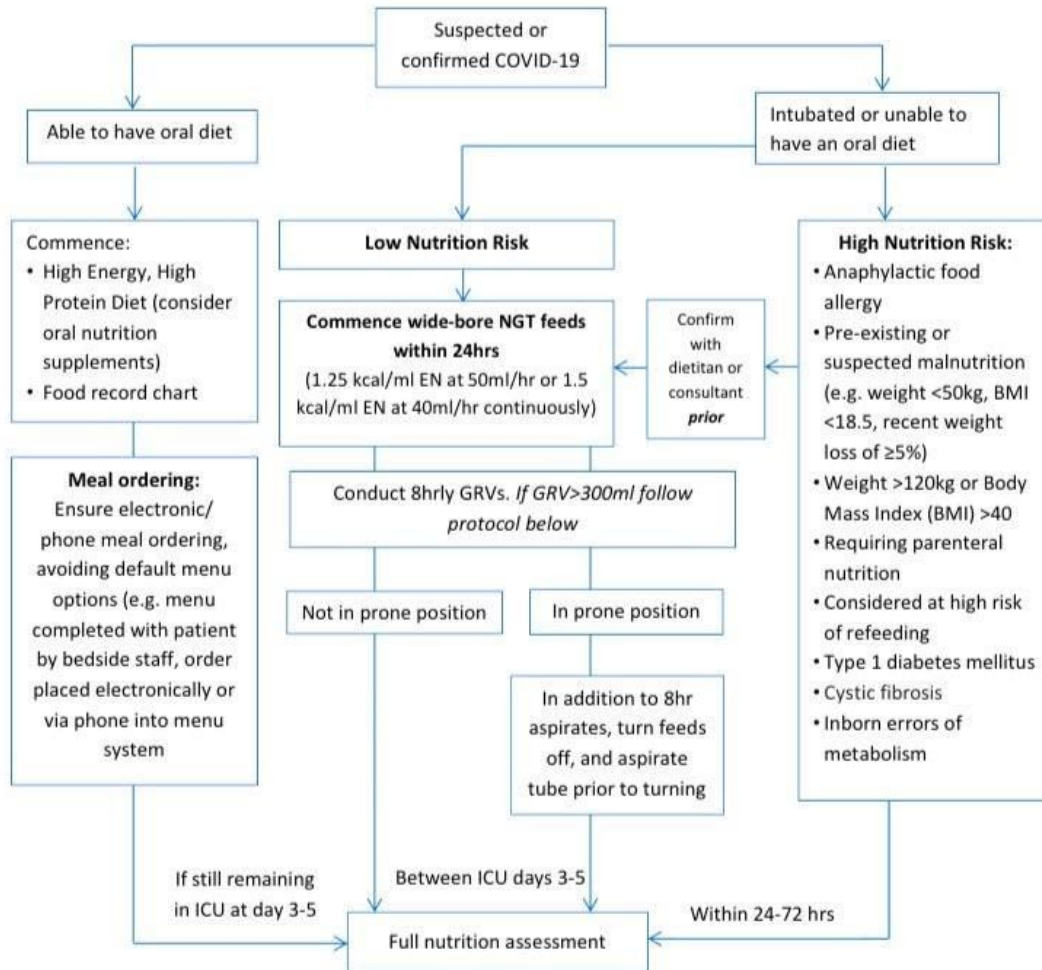


ICU Nutrition Algorithm for Management of Patients with COVID-19 in Australia and New Zealand
 Algorithm to be enacted on instruction of senior medical and nutrition staff



- Please use in conjunction with local nutrition policy and procedures.
- **The dietitian or treating consultant may elect to commence the standard algorithm in high nutrition risk patients**
- Medical and nursing teams to please contact the Dietitian if a nutritional assessment is necessary earlier than stated in the algorithm.
- For first GRV >300ml commence prokinetics as per usual site practices (e.g. metoclopramide IV 10mg 6-hourly **together with** erythromycin IV 200mg bd) for 24 – 72hrs where possible and no contraindications exist.
- If GRV remains >300ml, despite prokinetics, consider post-pyloric feeding or supplemental PN.
- Nutrition support should be escalated if energy and protein delivery are <50% of prescribed targets for ≥5-7 days.