



## DEPARTMENTAL POLICY & PROCEDURE

**Entity Name & Region:** Clinical Nutrition Services-WR

**Subject:** Clinical Nutrition Outpatient Clinics Services-WR

**Original Date:** Version 1 August 2011

**Effective:** August 2012

**Reference:** 028010-10 Version 2

**Replaces Number:** 8010-10 Version 1

**Targeted Employees/Departments:** Clinical Dietitians, Nursing Staff, Medical Staff, Patient Services, Patient Relations, Ambulatory Care Center Staff

### 1. Purpose:

**1.1** To establish the policies, procedures and guidelines concerning the management and operation of the Clinical Nutrition Out patient Clinics.

**1.2** To ensure proper administration of Nutrition care to all Clinical Nutrition Out patients.

### 2. Definitions:

**2.1** Nutrition Care Process: a method for Clinical Dietitians applying standardized process for providing care and standardized language in making decisions and provide high quality nutrition care.

**2.2** Nutritional Assessment: to identify patient's nutritional problems and high risk patients who need special attention as a basis for nutritional care plan. It includes collection and analysis of anthropometric, biochemical, clinical, dietary, and psychosocial data as well as consideration of the planned therapeutic management.

**2.3** QCPR: QuadraMed Computerized Patient Record

### 3. Policy Statements:

**3.1** To define the relationship of Ambulatory Care Services with the Department of Clinical Nutrition Services.

**3.2** To establish and set forth in writing as far as practical, definite policies and regulations for Clinical Dietitians with other professional and non- professional employees in Ambulatory Care Centre.

**3.3** To establish written policies and guidelines for routine management for the Clinical Nutrition Outpatient Clinics.

**3.4** To institute and maintain good inter-departmental relationships.

### 4. Procedures:

**4.1** The function of Clinical Nutrition Outpatient Clinics is to provide appropriate nutritional care through one-on-one or group-counseling sessions depending upon the priorities identified to



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eligible patients properly referred to Clinical Nutrition Outpatient Clinics in compliance with Strategic Plans, and established Policies and Procedures.

**4.2** The Clinical Dietitian functions as a consultant on the healthcare team. Counseling is available for, but not limited to, the following areas for all ages (Pediatrics and Adults):

**4.2.1** Breastfeeding

**4.2.2** Cancer and immune compromised

**4.2.3** Diabetes

**4.2.4** Gastrointestinal disease

**4.2.5** Metabolic disease

**4.2.6** Food Allergy

**4.2.7** Heart disease

**4.2.8** High blood pressure

**4.2.9** High cholesterol

**4.2.10** Home tube feeding

**4.2.11** Pregnancy

**4.2.12** Renal disease

**4.2.13** Weight control & Weight loss.

**4.2.14** Post Gastric Bypass

**4.3** The Clinical Dietitian provides outpatient services to all patients requiring nutritional intervention and involves:

**4.3.1** Anthropometric information



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**4.3.2** Laboratory information

**4.3.3** Nutrition history including food allergies and medication

**4.3.4** Medical concerns

**4.3.5** Developing, implementing, and documenting an individualized plan

**4.3.6** Analyzing subjective and objective information

**4.4** Providing nutritional counseling and education to patients and their caregivers, including information on modified diets and food-drug interactions, and evaluation of the effectiveness of counseling based on objective information when possible.

**4.5** All Clinical Dietitians shall document relevant information regarding patient's adherence to the prescribed diet via electronic system (QCPR).

**4.6** Official documentation via electronic system should follow the latest Nutrition Care Process format of American Dietetic Association: Assessment, Diagnosis, Intervention, Monitoring, and Evaluation (ADIME).

**4.7** Recommended diet based on nutritional assessment shall be coordinated with the attending consultant and nurse: "Please refer to "APP (1429-11) Food Services: Ordering, Monitoring & Billing" Article related to (Nursing Responsibilities) & (Patient Meal Orders).

**4.8** Clinical Dietitian shall provide individualized diet counseling with written instructions/diet guides.

**4.9** Whenever possible family members should be included in the development of nutrition care plan and education regarding patient's recommended diet.

**4.10** Eligibility of Patients for Clinical Nutrition Outpatient Clinics at King Abdulaziz Medical City-Jeddah:

**4.10.1** Codes for Eligibility to treatment and the Coverage codes as per APP: 1429-01 "Patient Registration & Admission".



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**4.11** Patient Categories: Patients treated in Clinical Nutrition Outpatient Clinics will fall into one of four categories:

**4.11.1** New Referrals (NP)

**4.11.2** Clinic follow-up appointments (FU)

**4.11.3** Post-discharge follow-up appointments (PDFU)

**4.11.4** Walk-in Patients (WP)/Over booking (OB)

**4.12** Clinical Nutrition Outpatient Clinics in Other Locations:

**4.12.1** Chief Clinical Nutrition Services will be responsible for ensuring that Clinical Dietitians, who have scheduled their leave, have arranged for either Blockage or Coverage of their Outpatient Clinics in other locations, such as Protocol (VIP) Clinics, Business Center Clinics, etc.

**4.13** Emergency Leave/Rescheduling Clinics/Cancellation of Clinics:

**4.13.1** It is the responsibility of Chief Clinical Nutrition Services to see that adequate coverage is maintained at all times. However, in exceptional circumstances when it is unavoidable and when no alternative Clinical Dietitian is available, the rescheduling of patients must firstly be justified by Chief Clinical Nutrition Services, submitted for the approval of the Executive Director, Operation Services or his designee, and signed by the Director of Ambulatory Care Services.

**4.13.2** Rescheduling may be agreed, provided the charts of all patients to be rescheduled are reviewed by the attending Clinical Dietitian assigned by Chief Clinical Nutrition Services to ensure that rescheduling will not compromise patient care.

**4.13.3** The Clinical Dietitian must ensure any re-scheduled patient has sufficient diet supplements to allow a deferred appointment.

**4.13.4** An alternative Clinical Dietitian must see any patient who cannot be contacted by Patient Services on the date his/her appointment was originally scheduled.



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#### 4.14 Attendance at Conference and Symposia:

**4.14.1** Requests to close all Clinical Nutrition Outpatient Clinics to permit as many Clinical Dietitians as possible to attend a local conference or symposium are not acceptable.

**4.14.2** If Clinical Nutrition Department is hosting the activities, it is acceptable that all Clinical Dietitians block their clinics three months ahead.

#### 4.15 Clinical Dietitians Attendance in Scheduled Clinics:

**4.15.1** Clinical Dietitians are expected to attend clinics on time and not leave before all scheduled patients are seen. If the Clinical Dietitians anticipates a delay in his/her arrival, he/she should advise the Back up coverage Clinical Dietitian by telephone.

#### 4.16 Clinical Nutrition Outpatient Clinics Scheduling:

**4.16.1** The time allocated for the new patients and follow up will be according to the recommendation of the Clinical Dietitians who is covering the clinics.

**4.16.2** All clinics must start on time regardless of the time allocated for the new or follow up patients. If the Clinical Dietitians does not arrive thirty (30) minutes after the scheduled clinic time, the Clinic Patient Relation Staff should report this as per regionally applicable process.

**4.16.3** All clinics must finish on time regardless of the time allocated for the new or follow up patients. Habitually late finishing Clinical Dietitians are asked to reduce clinic slots. If required, an additional clinic may be created to allow adequate time to see booked patients.



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**4.16.4** During work days from Saturday to Wednesday:

| Time      | Open time | First appointment | Last appointment | Finish time |
|-----------|-----------|-------------------|------------------|-------------|
| Morning   | 8:00am    | 8:30am            | 12:15am          | 12:30pm     |
| Afternoon | 1:00pm    | 1:00pm            | 4:30pm           | 5:00pm      |

**4.16.5** During Holy Ramadan days from Saturday to Wednesday:

| Time      | Open time | First appointment | Last appointment | Finish time |
|-----------|-----------|-------------------|------------------|-------------|
| Morning   | 10:00am   | 10:00am           | 12:15pm          | 12:30pm     |
| Afternoon | 1:00pm    | 1:00pm            | 3:00pm           | 4:00pm      |

**4.17** New Referral of Patients from Clinical Dietitians to another Specialty:

**4.17.1** When a patient is referred from Clinical Nutrition Outpatient Clinics for treatment by Clinical Dietitians to another specialty, a regionally applicable referral form (Consultation Request and Report Form, Oracle#: 116174) is required and must be completed for the patient to be seen.

**4.18** Referral for Clinical Nutrition Outpatients:

**4.18.1** Physician should fill up the Clinical Nutrition Referral Form.

**4.18.2** Proper communication between Physicians and Clinical Dietitians at the time of arranging an outpatient referral. This will avoid inappropriate referrals that could be disappointing for patients, and this will save patients and their families from futile repeat hospital visits.

**4.18.3** The referral of hospital employees and their eligible dependents to Clinical Nutrition Outpatients will be co-coordinated by the Physician in the Employee Health Clinic. Appointments will not be scheduled in Clinical Nutrition Outpatients without the proper referral from Employee Health Clinic.



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#### 4.19 Post Discharge and Clinic Follow Up Appointments:

**4.19.1** Any inpatient discharged from King Abdulaziz Medical City-Jeddah, whom the treating Clinical Dietitians needs to see again, will be given an appointment for follow-up treatment.

**4.19.2** Unless a specific appointment date is necessary for follow-up, Clinical Dietitians are encouraged to indicate a range of days/weeks for a follow-up appointment (for example 5-7 days or 3-4 weeks).

#### 4.20 Patient Relations for Clinical Nutrition Outpatients Clinic:

**4.20.1** Patient Relations Officers have a key role to play in Clinical Nutrition Outpatients Clinics, in addressing and solving problems as they arise in a timely manner.

**4.20.2** Patients with a problem will be referred directly to the Patient Relations Officer.

#### 4.21. Patients Attendance for Clinical Nutrition Outpatients Clinics:

**4.21.1** To avoid overcrowding and congestion, patients should be encouraged to attend the Clinical Nutrition Outpatients Clinics no more than 15 minutes prior to their scheduled appointment time.

**4.21.2** Patients who attend late for their appointment in excess of 25 minutes will usually be rescheduled for another appointment, unless it is agreed with the Clinical Dietitian to accommodate the patient in the same clinic.

#### 4.22 Did Not Attend (DNA - No Show) for Clinical Nutrition Outpatients Clinics:

**4.22.1** Patients who fail to keep an appointment (DNA) will not be accepted in Clinical Nutrition Outpatients Clinics as walk-in patients. The Clinical Dietitians will review the medical records of these patients, and decide whether the patient should be given a routine rescheduled appointment or discharged.



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#### 4.23 Patient Discharge from Clinical Nutrition Outpatients Clinics:

**4.23.1** Patients should be discharged by Clinical Dietitians as soon as their medical and nutrition condition/status no longer needs Clinical Dietitians care except:

**4.23.1.1** Patients on permanent enteral feeding such as Nasogastric tube feeding (NGT)/ Percutaneous Endoscopic Gastrostomy (PEG) tube feeding.

**4.23.1.2** Oncology patients

**4.23.1.3** Patients with Metabolic diseases

**4.23.1.4** Failure to thrive patients

**4.23.2** A brief consultation sheet should be written and a copy given to the patient to take with him/her at the last appointment.

**4.23.3** An appropriate supply of discharge take home supply (if needed) should be provided.

**4.23.4** In the event problems are encountered or the patient resists discharge, the patient will be referred to the Patient Relation Officer.

#### 4.24 The issuance of enteral formula both for adult and pediatric patients:

**4.24.1** The Clinical Dietitian should identify the nutritional condition and requirements of the patient.

**4.24.2** The Clinical Dietitian will identify the eligibility status of the patient.

**4.24.3** The Clinical Dietitian should use patient's identification official card to make sticker label or addressograph must be placed in the Take Home Supply Form.

**4.24.4** The Clinical Dietitian must clearly put the oracle number of the product and specific number of cans or boxes based on the requirements of the patient.





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**4.24.5** The Clinical Dietitian should issue limited to 1 month for those eligible Jeddah residents, 2 months for those eligible outside Jeddah residents.

**4.24.6** The eligible patient will take the completed original take home supply form signed by Clinical Dietitian and present to the Central store staff. The Clinical Dietitian will take the second copy to be endorsed to Admin Assistant of the Clinical Nutrition Department.

**4.24.7** The Central store staff should verify the signature of the Clinical Dietitian by comparing in the lists of updated Clinical Dietitians specimen signature which will be provided by the Chief Clinical Nutrition Services.

## 5. Equipments/Forms:

**5.1** Outpatient Appointment Slip

**5.2** Dietitian's Referral

**5.3** QuadraMed Computer System (QCPR)

**5.4** Consultation Request and Report Form, Oracle#: 116174

**5.5** Take Home Supply Form

**5.6** Addressograph White Card

**5.7** Addressograph Machine

## 6. Related References:

**6.1** Unified Policy & Procedures for Outpatient Services, APP Number: 1424-04

## 7. Appendices:

None



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**8. Recommendations:**

None