



## DEPARTMENTAL POLICY & PROCEDURE

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

**Subject:** Preparation, Storage, Distribution and Handling of Enteral Formula

**Original Date:** Version-1 April 2005

**Effective:** August 2012

**Reference:** 028010-07 Version-7

**Replaces Number:** NUT-01-07 Version 6

**Targeted Employees/Departments:** Food Services Department, Clinical Dietitians, Medical & Nursing Staff

### 1. Purpose:

**1.1** To ensure the proper procedure of preparation, storage, distribution and handling of enteral nutrition formula.

### 2. Definitions:

**2.1 Enteral (EN) Formula:** a food product which is formulated to be consumed or administered enterally under the supervision of the Clinical Dietitian which is intended for dietary management of a disease or condition for which distinctive nutritional requirements, based on recognized scientific principles, and re-established by medical evaluation. It is available in the form of liquid or powder.

**2.2 Reconstituted Enteral Formula:** enteral formula prepared with modular additives and sterile/purified water.

**2.3 Formulary Room:** the location of enteral formula preparation and reconstitution following standard aseptic technique.

**2.4 Hang Time:** the length of time an enteral formula is considered safe for delivery to the patient beginning with the time of formula has either been reconstituted, warmed, decanted or has had the original package seal broken.

**2.5 QCPR:** QuadraMed Computerized Patient Record

**2.6 MRN:** Medical Record Number

### 3. Policy statements:

**3.1** The Food Service's Dietitian & Diet Technician, Clinical Dietitian and Nursing Staff are the disciplines responsible in the implementation of guidelines in preparation, storage, distribution and handling of enteral formula or medical foods.



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### 4. Procedures:

#### 4.1 Preparation of Enteral Formula:

**4.1.1** The Clinical Dietitian should enter the recommended recipe or enteral nutrition formula through electronic documentation via QCPR system (tube feeding/enteral feeds program).

**4.1.2** The Food Service Dietitian will print the list of enteral nutrition formula/tube feeding list all daily (morning) via QCPR system.

**4.1.3** The Food Service Diet Technician will prepare the recipe as endorsed by the Food Service Dietitian and should comply with the hygiene and sanitation guidelines (using disposable gown, gloves, head covers, prohibition of watches, rings, piercings, or artificial nails).

**4.1.4** The Food Service Dietitian must check that the formulary room, hand hygiene and aseptic practices are being in place to prevent contamination.

**4.1.5** Any instruments or utensils used in EN preparation should either be disposable

**4.1.6** Daily modified enteral formula will be prepared according to the ordered recipe daily. The powder formula/modular will be measured by using an electronic weighing scale, the liquid enteral formula by using a measuring glass and liquid modular by using a measuring spoon.

**4.1.7** For reconstitution of the enteral formula, purified or sterile water is used in the preparation of infant formula.

**4.1.8** The Diet Technician must use osterizer in mixing, reconstituting the formula, pours the formula through a strainer into disposable administration container.

**4.1.9** A label should be applied to all EN formula administration containers (sterile plastic containers, bottles) indicate patient name, Medical Record Number (MRN), the date, the time and the name of the formula.



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**4.1.10** The Clinical Dietitian should telephonically order a new diet/late orders of enteral formula to the Food Service Dietitian or Diet Technician if the order was received beyond 9:00 hours.

**4.1.11** Prior delivery the Food Service Dietitian must do the final checking of the prepared formula based on the updated tube feeding list.

**4.1.12** The receiver of the formula in the ward should document the name, the time, the date, the badge number and the signature once the formula is accepted.

## 4.2 Storage of Enteral Formula:

### 4.2.1 Food Service Area:

**4.2.1.1** The storage area should be separated from any preparation area to avoid contamination.

**4.2.1.2** EN formula products either liquid or powder must be stored on a clean and dry table in the formulary room. It must be labeled with the date/time when opened.

**4.2.1.3** The formulary room should maintain hygiene and sanitation standards.

**4.2.1.4** To specify temperature and time frame of EN formulas can be refrigerated.

**4.2.1.5** Enteral formula will be used according to the expiry date following FIFO, i.e. “first in first out” process.

### 4.2.2 Ward Area (Wards, Intensive Care Units):

**4.2.2.1** When the nursing staff receives the EN formula and the formula is not used immediately after preparation, it should be refrigerated at a temperature of 5 °C to reduce contamination.

**4.2.2.2** EN formula either in a can or tetra pack are stored in a clean, dry cabinet in the ward kitchenette assigned for this purpose.



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**4.2.2.3** Enteral supplements used at the bedside should be stored in a refrigerator, labeled with the patient's sticker- MRN, the name, the date and the time of opening). If formula not used within 24 hours after opening it must be discarded.

**4.2.2.4** Unopened enteral supplements that are not consumed by the patient in the isolation, will remain at the bed side.

**4.2.2.5** Reconstituted formulas not used will be discarded after 24 hours of preparation.

### 4.3 Distribution of Enteral Formula:

**4.3.1** The Food Service Department shall start delivering the enteral formula/supplements daily to specific wards at 12:00 hours.

**4.3.2** The nurse will receive the EN formula/reconstituted formula by signing the receiving copy of the Food Service Department with complete name, the date, and the time and badge number.

**4.3.3** The EN formula must be double checked by the nurse if the container has the proper label, MRN of the patient, name, type of formula and concentration time of preparation for preparing the formula before signing in the receiver's copy.

**4.3.4** Enteral supplements ordered as snacks will be delivered during specific snack time delivery.

### 4.4 Handling of Enteral Formula- (Nurses Responsibilities):

**4.4.1** The nurse should practice hand hygiene before handling the EN formula.

**4.4.2** The nurse must use 70% isopropyl wipe for cleaning the EN formula in the can prior opening.



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**4.4.3** The nurse should read the affixed label on the EN formula container before administering the formula to the patient and identify the patient by using the two (2) unique patient identifiers, i.e. patient name and MRN.

**4.4.4** The nurse must shake the EN formula prior to administration.

**4.4.5** Enteral formula should be protected from any heat exposure.

**4.4.6** Reconstituted enteral formula must be taken out from the refrigerator 30 minutes prior administrations to allow the formula to be at room temperature.

**4.4.7** Maximum hanging time for EN formula decanted into sterile bag is eight (8) hours.

**4.4.8** The reconstituted EN formula received from Food Service Department must hang no more than four (4) hours.

## 5. Equipments/Forms:

**5.1** Electronic weighing scale in grams as a unit of measurement

**5.2** Osterizer

**5.3** Measuring spoons

**5.4** Measuring glass

**5.5** Disposable gloves

**5.6** Disposable head cap

**5.7** Disposable enteral formula container



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**6. Related References:**

**6.1** JPENJ Parenter Enteral Nutr 2009;33;122 originally published online Jan 26,2009;  
<http://pen.sagepub.com>.

**6.2** APP No. 1429-11, Title: “Food Services Ordering, Monitoring & Billing”.

**7. Appendices:**

None

**8. Recommendations:**

None