Abstract Title:	Homemade blenderized tube feeding: A survey of dietitians
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Objectives: Homemade blenderized tube feeding (HBTF) appears to be gaining popularity. The purpose of this cross-sectional survey study was to describe dietitians' perspectives and perceived expertise on HBTF.

Methods: An anonymous web-based questionnaire was emailed to all 715 dietitians registered with the College of Dietitians of British Columbia holding the authority to design, compound, or dispense enteral nutrition. Response frequencies were analyzed.

Results: There were 221 completed questionnaires. Respondents varied with regards to practice settings and patient age ranges, with the majority working primarily in acute care and with adults. Only 28% of respondents felt knowledgeable about HBTF and 24% felt they could confidently manage patients/clients using HBTF. Less than half felt they had the expertise to design HBTF, administer HBTF, or teach patients/clients to administer HBTF (29%, 16%, 24%). Comparing commercial formulas to HBTF, many respondents felt HBTF provides equal or superior nutritional benefit (33%, 37%), is more cost effective (46%) and more effective for managing food allergies (40%). However, a considerable number felt HBTF has higher risk for tube blockages and bacterial contamination (77%, 84%). Respondents' HBTF education was mostly derived from informal sources (self-directed learning 49%, learning from colleagues 33%, learning from patients/clients 32%), while 27% reported having no education of any kind. Most respondents (64%) support the use of HBTF and 89% reported a desire to learn more about HBTF.

Conclusion: Dietitians have limited confidence in managing patients/clients who chose to use HBTF. They perceive themselves to lack knowledge and expertise on the practice. Formal education on HBTF is uncommon among dietitians, however support of the use of HBTF is prelavent.

Significance to the Field of Dietetics: The trend towards HBTF appears to be gaining momentum among patients/clients. In order for dietitians to confidently and capably support patients/clients using HBTF, education is essential.