

Abstract Title

An Evaluation of Dietitian Consult Practices Using the Malnutrition Screening Tool (MST) in Surgical and Medical Units at Nanaimo Regional General Hospital (NRGH)

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Abstract

Background: Before December 2018 the MST was a component of the Adult Admission History Powerform (AAHP) used at NRGH to identify patients at risk for malnutrition. Automatic consults were generated for patients at nutrition risk scoring 4-5 on the MST. It is unknown how frequently the MST was used or how it impacted the number of Registered Dietitian (RD) consults.

Objectives: To determine the frequency at which adult patients on acute care wards at NRGH were assigned an MST score at admission. To investigate how the MST was used at NRGH to involve RDs in patient care.

Methods: A retrospective chart review was conducted of 270 patients from NRGH medical and surgical wards discharged between February 1 and April 30, 2018 who were admitted for 48 hours or more. Data collected included demographics, presence of MST score and numerical value if taken, presence of a RD consult and if an RD was involved in patient care. Descriptive statistics were used to analyze data.

Results: 18.5% of all participants had an MST score. 54% of all participants were found to have a formal RD consult. A total of 20.4% of all participants had an RD involved in their care, 34.5% of these had an MST score. 8.1% of all participants had an MST score between 2-3, 27.3% of which had an RD involved in their care.

Conclusions: There is a low rate of RD consults based on the original build of the AAHP, which does not generate automatic consults for participants at nutrition risk scoring 2-3.

Significance to the Field of Dietetics: With the new build of the AAHP and improved nursing workflow any patient identified at nutrition risk will generate an automatic RD consult. Our findings will help to measure anticipated improvements based on the new build of the AAHP.