An Evidence-Based Practice Project to Implement Enteral Feeds during Pediatric Stem Cell Transplant
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**Problem**: Total parenteral nutrition (TPN) has been the traditional method of providing nutritional support for pediatric and adult Stem Cell Transplant (SCT) patients. Adult studies have shown the use of Enteral Feeds (EN) is less costly with fewer complications. Our multidisciplinary pediatric SCT team initiated an evidenced-based practice (EBP) project to determine the feasibility of introducing EN via a feeding tube instead of TPN. The Iowa Model of EBP (Titler, 2001) guided this project.

**Evidence**: An extensive literature search was conducted using multiple on-line databases. Evidence synthesis demonstrated that 1) nutritional status was maintained using EN, 2) routine use of pain medications and antiemetics contributed to the success of EN, 3) support for patients/ families is essential to successful transition to EN.

**Strategy**: Based on the evidence, the team decided to pilot the use of EN in our unit. Prior to implementation we provided education for staff, families & patients and we monitored patient outcomes to determine the efficacy of the practice change.

**Practice Change**: Practice guidelines for EN were developed by the team. Intensive education was provided for nursing staff, patients and families on EN protocols and monitoring.

**Evaluation**: A tool was developed to monitor feeding parameters (TPN or EN), nausea & vomiting and mucositis.

**Results**: From April 2008 -Aug 2008, 19 patients were admitted to the SCT unit. Two of the patient were transferred to the PICU and therefore excluded. Out of the remaining 17 patients, 6 were sustained on EN alone. The other 11 were given a combination of TPN and EN. The length of stay was decreased by one third which ultimately reduced medical costs related to the SCT.

**Recommendations**: EN for pediatric patients shows very promising results for patients. The SCT team is very supportive and continues to evaluate this new feeding method.

**Lessons Learned**: We will need to continue to monitor to validate that this new practice becomes integrated into our SCT supportive care.
Bibliography


