

Transcript Details

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How to Take a Multidisciplinary Approach to Nutritional Care

Announcer:

Welcome to *Clinician's Roundtable* on ReachMD. On this episode, sponsored by Nestlé Health Science, we'll explore best practices for taking a multidisciplinary approach to nutritional care with Dr. Dawn Adams. Dr. Adams is an Associate Professor of Medicine and Medical Director for the Center for Human Nutrition in the Division of Gastroenterology at Vanderbilt University Medical Center. Let's hear from her now.

Dr. Adams:

When caring for patients with impaired GI function that results in malnutrition, a multidisciplinary care team is essential to advancing the care of these patients. When I think of this team, I think of a physician, whether it's a gastroenterologist, surgeon, or internist, who is outlining the plan for diagnosis and workup. This may or may not include endoscopy imaging plans for getting in a feeding tube or a central line or plans for where we're going to eventually bridge this patient back to a normal regular diet.

Dietitians are also an essential part of the team. They help identify the nutritional needs of the patients and identify what special dietary considerations we might need to be making—for example, is the patient diabetic or has renal and heart failure and needs appropriate dietary accommodations? They also help create the specific plan, whether that be with enteral nutrition and choosing the type of feeds, the rate, and how we're delivering that, or a parenteral nutrition formula, helping to calculate their macro and micronutrient goals, or even if it's just a plan with aggressive oral nutrition supplementation. A pharmacist is another key person on this team, especially when we're dealing with parenteral nutrition, the pharmacist is essential for helping with the stability, compatibility, and safety of such a prescription. And in today's day and age, they're also essential to assist with shortages and substitutions to ensure that a complete parenteral nutrition formula is provided.

When you work together with a multidisciplinary care team, it's very important to outline clear practices for collaborating and communicating.

In terms of communication styles, I personally find that face-to-face team-based rounding is best. On my nutrition support team, we sit down every day and chat about our inpatients with the multidisciplinary team and also schedule monthly reviews of some of our complex patients to identify gaps in care and reassess deficiencies or needs to try and optimize their nutrition.

In general, when communicating, phone calls I find are much more successful in communicating the complex needs of these GI nutrition patients than messaging in the electronic medical record. And I think this really helps to identify some problems that might be occurring with the patient in providing their nutrition therapy that are not obvious just from chart review or communicating amongst the team directly.

I think collaborative ideas lead to better choices for the patient. When you sit and discuss with all of the different areas of expertise, we are going to identify different perspectives and different needs that each of the members of the team can bring to the table.

I think also I'd just like to make a plug for the data that's already known that this collaborative approach with a nutrition support team, at least in the setting of inpatient care with GI diseases, can lead to more appropriate use of both parenteral and enteral nutrition. And there is an ASPEN value project that's been published showing that nutrition support and teamwork can actually save Medicare hundreds of millions of dollars per year. So both for better patient care, but also economically, I think a collaborative team-based approach is the only way to approach these complex GI patients with nutritional issues.

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