



ENTERAL NUTRITION TROUBLESHOOTING CHECKLIST

This checklist was developed in collaboration with Allison Krall, MS, RD, LD, CNSC

i This checklist serves as a resource for healthcare professionals seeking guidance to help identify the root cause of enteral nutrition intolerance.

It is important to walk through each step of the checklist in order to determine the best plan of care for your patient.

For additional guidance, view the course [Enteral Tube Feeding: Gastrointestinal Complications](#) on [anhi.org](#).

ENTERAL NUTRITION TROUBLESHOOTING CHECKLIST		NOTES
<input type="checkbox"/>	Does patient have a history of EN intolerance?	
<input type="checkbox"/>	If yes, what has previously been tried?	
<input type="checkbox"/>	If no, what has changed?	
<input type="checkbox"/>	Not applicable, new EN patient	
<input type="checkbox"/>	What is the current volume? Is it too much for the patient?	
<input type="checkbox"/>	Is the current method of delivery (bolus, gravity drip, continuous) an issue?	
<input type="checkbox"/>	When was the patient's last bowel movement?	
<input type="checkbox"/>	Have BMs been consistent? What is consistency of BM?	
<input type="checkbox"/>	Is the patient receiving medications causing constipation?	
<input type="checkbox"/>	Is the patient receiving medications causing diarrhea/loose BMs?	
<input type="checkbox"/>	Is the patient on chemotherapy or a treatment that may result in nausea/vomiting?	
<input type="checkbox"/>	When was the last time tube tip placement was confirmed?	
<input type="checkbox"/>	Is the patient well hydrated?	

KEY EN- Enteral Nutrition | BM- Bowel Movement

Visit [anhi.org](#) to complete the course [Enteral Tube Feeding: Gastrointestinal Complications](#) and for a digital copy of this checklist.

