

THE IMPLEMENTATION OF TREATMENT PROTOCOLS AMONG THE DIETETICS TEAM FOR HOSPITALIZED COVID-19 PATIENTS

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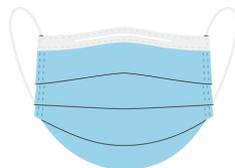
CLINICAL QUESTION

"Among the hospitalized COVID-19 patients that are at your facility, are there any specific treatment protocols in place among the Dietetics team, and if so, what are those protocols?"

ABSTRACT

COVID-19 has had a dramatic effect on the ways in which RDs in a hospital setting are able to interact with hospitalized COVID-19 patients.

The aim of this study was to get a deeper understanding of how COVID-19 has affected the RDs in Tennessee in regards to how they are able to interact with and treat hospitalized COVID-19 patients. In previous research, there is a common theme in which RDs are now interacting with patients in a more visual and virtual manner as opposed to entering the rooms of hospitalized COVID-19 patients.¹ The aim of this study was to determine if this was true for RDs in Tennessee as well and to get more information on the myriad of ways in which COVID-19 has affected their treatment protocols.



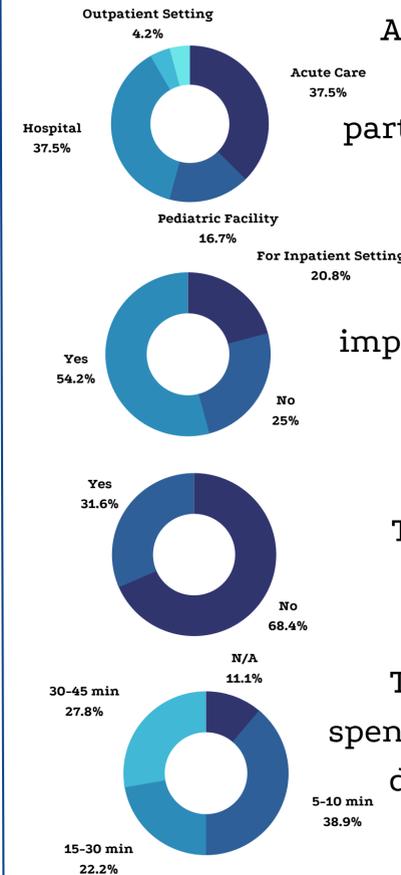
REVIEW OF LITERATURE

The COVID-19 pandemic has changed nutrition care processes in healthcare facilities. According to ASPEN Report on Nutrition Support Practice Processes With COVID-19, the nutrition team is no longer allowed to enter the patient's room in all in-patient care facilities. Instead, they rely on other healthcare providers, nurses, family members, or medical history to collect relevant patient information and limit Covid-19 exposure. Dietitians contact patients by telephone or video chat to obtain information needed for the assessment.

METHODS

- The research team developed a 12 question survey through Qualtrics.
- The survey, an informed consent form, and participant recruitment email were sent out to RDs throughout Tennessee in the November 2021 TAND Newsletter.
- The survey allowed the respondents to type in their responses so that more detail could be provided beyond a simple "yes" or "no" answer.
- 27 respondents began the survey. 3 participants did not sign the consent form, and their responses were omitted from the data. A total of 24 RDs responses were analyzed for the purposes of this research study.

RESULTS



A total of 24 RDs participated in the study. The majority of the participants practice at acute care facilities and hospitals.

Most of the participants implemented telehealth protocols for COVID-19 patients.

The majority of RDs don't enter rooms of COVID-19 patients.

The average length of time RDs spend with a COVID-19 patient was determined to be 5-10 minutes.

Nurses perform Malnutrition Screening upon admission to the hospital.

3 out of 24 participants conduct NFPE exams. 10 out of 24 participants perform a comprehensive nutrition assessment to identify malnutrition in COVID-19 patients.

CONCLUSION

This research represents nutrition care issues and specific treatment protocols that were implemented in response to the COVID-19 pandemic in health care facilities. Many RDs have had to conform to new regulations and protocols due to the effects COVID-19 has had on healthcare. Based on our results, the standard of patient care has not changed, but the way RDs interact with patients and treatment protocols have altered. Although many RDs may not be meeting with patients in-person, individualized nutrition education and length of time spent with patients have not changed due to COVID-19. The results in this study were obtained from the Tennessee area and may not be applicable to RDs in other states. Limitations of this study should be considered when evaluating the findings.



REFERENCES

1. Wells Mulherin D, Walker R, Holcombe B, Guenter P. ASPEN Report on Nutrition Support Practice Processes With COVID-19: The First Response. *Nutr Clin Pract.* 2020;35(5):783-791. doi:10.1002/ncp.10553

