COLLABORATIVE REGIONAL BENCHMARKING GROUP

Nutrition & Hydration in Critical Care

Aim: To provide guidance on Nutrition & Hydration support for patients in Critical Care

Scope: All adult patients in Critical Care

ASSESS NUTRITIONAL RISK & STATUS:

- using nutrition screening tool on admission[1]
- on change in condition
- weekly reassessment[6]

Additional Risks

- Malnourishment prior to admission
- Re-feeding syndrome
- Multiple co-morbidities

STANDARD NUTRITION & HYDRATION SUPPORT

1	Nutritional status and risk (including risk of refeeding syndrome) assessed on admission to ICU[1] and repeated at least weekly
2	Document weight and height on admission[1] and as per hospital policy thereafter
3	Risk of malnutrition been assessed if the patient has been in ICU for >48hours[1,2]
4	If not contraindicated, enteral nutrition (EN) should be commenced within 48 hours of admission[1,2]
5	Nasogastric tube used for EN should be 14 French gauge or less[1]
6	Daily (MDT) review of nutrition and hydration status[4] with high-risk patients reviewed by a dietician[2,5]
7	Where EN is not feasible or insufficient, Parental Nutrition (PN) should be considered for patients at risk of malnutrition[1]
8	Bowel movements (frequency & type) must be monitored and documented every 24 hours[1] and appropriate action taken, as per local policy, in the event of no bowel movement
9	Assess patients for thirst [1, 7, 8]
10	Monitor blood glucose levels in line with local policy[2] and where not within target range titrate therapy accordingly[2]
11	Maintain accurate fluid balance[3]
12	Swallow assessments must be performed as per local policy
13	For patients consuming oral diet, maintain food intake chart, ensure appropriate menu options are available, including, snacks, diabetic, cultural preferences, modified texture, vegetarian, vegan.
14	Treat any barriers to oral intake such as sore mouth, nausea, ill fitting dentures, functional ability

Please see your units full guidelines for more information

Version1 2026

	References
1	Guidelines for the Provision of Intensive Care Services V3 (GPICS)(2026) The Faculty of Intensive Care Medicine / Intensive Care Society.
2	ESPEN practical and partially revised guideline: Clinical nutrition in the intensive care unit
3	National Institute for Health and Care Excellence (NICE). Intravenous Fluid Therapy in Adults in Hospital (CG174).
4	NICE (2010) (Updated 2023) CG103 Delirium: prevention, diagnosis and management in hospital and long-term care
5	Friend, K & Aylen, R. (2018) BDA Manual of Dietetic Practice – Critical Care Chapter
6	NICE (2017) (CG32) Nutrition support for adults: oral nutrition support, enteral tube feeding and parenteral nutrition
7	Flim M, Hofhuis J, Spronk P, Jaarsma T. Measuring thirst distress of patients in the intensive care unit. Nurs Crit Care. 2022 Jul;27(4):576-582. doi: 10.1111/nicc.12719. Epub 2021 Oct 6. PMID: 34612559. https://pubmed.ncbi.nlm.nih.gov/34612559/
8	Horinouchi M, Sakuramoto H, Fukushima A, Yoshihara S, Kajiwara K, Mukoyama M, Koyanagi M, Mihara A, Imamura Y. Thirst in ICU Patients: A Scoping Review. Cureus. 2025 May 15;17(5):e84144. doi: 10.7759/cureus.84144. PMID: 40519461; PMCID: PMC12166508. https://pmc.ncbi.nlm.nih.gov/articles/PMC12166508/