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Nutrition and Feeding

Nursing Foundation

Balanced diet, nutritional requirements, factors affecting nutrition, therapeutic diets, feeding dependent patients, nasogastric feeding and nursing responsibilities.

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CHAPTER 13

CHAPTER 13 Nutrition and Feeding

B.Sc. Nursing | Nursing Foundation I & II

Nutrition and balanced diet

Nutrition supplies energy and materials for growth, tissue repair and physiological function. A balanced diet meets individual energy, macronutrient, micronutrient, fibre and water needs. Carbohydrate and protein supply about 4 kcal/g; fat supplies 9 kcal/g. Protein supports tissue repair; fats support energy and vitamin absorption; vitamins/minerals support metabolic processes; water supports circulation and temperature regulation; fibre promotes bowel health.

Requirements and assessment

Requirements depend on age, growth, body size, activity, pregnancy/lactation, disease, renal/hepatic function and recovery. Assess diet, recent weight change, appetite, swallowing, clinical findings and relevant labs; use validated nutrition screening. BMI = weight (kg) / height (m) squared; interpret according to population and clinical condition rather than alone.

Therapeutic diets

Diet	Typical purpose
Regular	Meets routine nutritional needs.
Soft or texture-modified	Selected chewing or swallowing needs, according to assessment.
Clear/full liquid	Specific short-term indications; may not meet long-term needs.
High protein	Selected patients with increased requirements.
Sodium-restricted	Individualized cardiac/renal conditions.
Diabetes meal plan	Individualized glucose management and adequate nutrition.
Renal diet	Patient-specific protein, electrolyte and fluid needs.

Feeding a dependent patient

Verify prescribed diet and allergy/swallowing restrictions. Perform hand hygiene, assist upright positioning when safe, offer small portions at a suitable pace, observe swallowing, encourage independence and stop if choking or aspiration is suspected. Provide oral hygiene and record intake. Use prescribed texture and fluid consistency; do not give oral food to a patient who cannot swallow safely.

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Enteral nutrition and nasogastric feeding

Enteral feeding delivers nutrients into a functioning gastrointestinal tract through NG, OG, gastrostomy or jejunostomy access when oral intake is inadequate or unsafe. Follow authorized regimen and approved tube placement verification. For initial NG use, an approved gastric aspirate pH method (commonly pH 1-5.5 in NHS guidance) or radiography interpreted by an authorized clinician is required; do not use air insufflation/auscultation. Never introduce feed, fluid or medication until placement is confirmed. Recheck placement as required before each use and after suspected displacement. Elevate head approximately 30-45 when appropriate, administer feed/flushes at prescribed rate, monitor tolerance and maintain positioning according to protocol. Document intake.

Complications and other methods

Monitor aspiration, tube migration or blockage, vomiting, diarrhoea, constipation, dehydration and electrolyte disturbance. High-risk malnourished patients need assessment for refeeding syndrome. Parenteral nutrition provides intravenous nutrients when indicated, requiring specialist prescription, aseptic line care and metabolic monitoring.

Nursing responsibilities and exam revision

Assess nutritional risk, weight, intake/output and swallowing; coordinate with dietitian, maintain tube safety and educate patient/caregiver.

1. 1. Explain balanced and therapeutic diets.
2. 2. Describe dependent feeding and NG feeding safety.
3. 3. Discuss nutritional assessment and enteral feeding complications.

Reference

NHS England. Nasogastric tube safety alerts and guidance. https://www.england.nhs.uk/patient-safety/patient-safety-alerts/

Educational notes. Clinical skills require supervision, authorized orders and current facility protocols.

Quick Revision

- Balanced nutrition meets individual energy, macronutrient, micronutrient, fibre and water needs.

- Carbohydrate and protein provide about 4 kcal/g; fat provides about 9 kcal/g.

- Nutritional assessment includes intake, weight change, appetite, swallowing, clinical findings and appropriate screening.

- For dependent feeding, verify diet and swallowing restrictions, position upright when safe and monitor swallowing.

- Confirm NG placement by an approved method before feed, fluids or medicines; never use air insufflation and auscultation.

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- Monitor enteral feeding for aspiration, migration, blockage, gastrointestinal symptoms, dehydration and electrolyte disturbance.

Practice questions

Choose one best answer. The answer key and explanations follow the questions.

1. Which nutrient provides about 9 kcal per gram?

A. Carbohydrate
B. Protein
C. Fibre
D. Fat

2. Enteral feeding delivers nutrients through which route?

A. Bloodstream
B. Functioning gastrointestinal tract
C. Pleural cavity
D. Subcutaneous tissue

3. Which method must not be used to confirm initial nasogastric tube placement?

A. Approved aspirate pH testing
B. Radiography interpreted by an authorized clinician
C. Air insufflation with auscultation
D. An approved placement-verification method

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Answer key and explanations

1. D - Fat

Fat supplies about 9 kcal/g, while carbohydrate and protein supply about 4 kcal/g.

2. B - Functioning gastrointestinal tract

Enteral nutrition uses the gastrointestinal tract.

3. C - Air insufflation with auscultation

Air insufflation and auscultation are not approved confirmation methods.

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