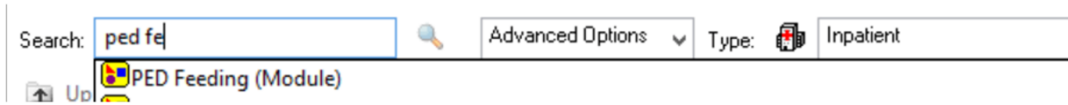


How To: Order Increase Feeds to Goal Rate

1. Search **PED Feeding** to bring up the Module.



This will populate all the relevant orders and you can select the appropriate diet/formula order for the patient.

2. Select the appropriate formula categories from the Module.

<input type="checkbox"/>	<input type="checkbox"/>	Component	Status	Dose ...	Details
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Maintain Head of Bed			T;N
Diet/Nutrition					
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Breastfeed, Exclusive (Breastfeed)			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Expressed Breast Milk (EBM) (Expressed Breast Milk wi...			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Term Infant Formula - Standard (Non-NICU)			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Term Infant Formula - Therapeutic (Non-NICU)			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Preterm Infant Formula (Non-NICU)			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pediatric Formula: Child 1-13 Years			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pediatric Formula: Child Older Than 13 Years			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pediatric Formula: Hydrolyzed			T;N
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pediatric Formula: Therapeutic			T;N

3. Select **Formula, Concentration, Volume per Feed, Frequency, Route**, and any **Modulars**.

Details for **Pediatric Formula: Child 1-13 Years**

Details | Order Comments | Offset Details

Requested Start Date/Time: PST

*Formula Type:

*Volume (mL):

*Frequency:

*Primary Feeding Route:

Modular:

Modular Amount:

Secondary Route (multi-select):

Rate (mL/hr) - for Continuous ONLY:

Feed Bolus Infusion Time:

- If there is a **Secondary Route**, enter it (hold Ctrl for multi-select).
- For **continuous feeds**, enter current **Rate (mL/hr) – for Continuous ONLY**

Secondary Route (multi-select):	<input type="text"/>
Rate (mL/hr) - for Continuous ONLY:	<input type="text" value="10"/>
Feed Bolus Infusion Time:	<input type="text"/>
Administration Method:	<input type="text" value="Pump"/>
Estimated Feeding Volume (mL per 24 hours):	<input type="text" value="960"/>

- For **tube feeds that are advancing** (e.g. start at 10mL/hr and increase as tolerated to 40mL/hr), enter the current rate as **Rate (mL/hr)** and the final goal feeding volume as **Estimated Feeding Volume (mL per 24 hours)**.
- Use **Special Instructions** or **Order Comments** for details of the feeding schedule. Enter instructions for any **IV fluids** (e.g. decrease IV as feeds increase)

Special Instructions:	<input type="text" value="Start at 10mL/hr and increase to goal of 40mL/hr."/>
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- Click **Sign**.