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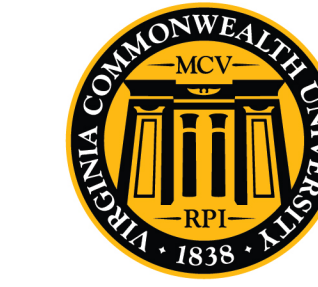
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# Deleting a Sacred Cow from the EMR: Removing Gastric Residual Volume Assessments

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## Purpose

- Implement current clinical practice guidelines related to gastric residual volume (GRV) assessments for monitoring feeding intolerance.

## Background

- Enteral nutrition for metabolic support is critical for survival and recovery from crucial illness.
- Current clinical practice guidelines do not support the practice of monitoring GRVs.
- Over 98% of critical care nurses utilize GRV monitoring to assess for feeding intolerance
- In our urban, Academic Level I Trauma Center, electronic medical record (EMR) orders include GRV assessments which supported this nursing practice.

***Systems can promote or inhibit translation of clinical practice guidelines.***

**Through a modification to the EMR we removed an electronic prompt that perpetuated the outdated practice of GRV assessments.**



## Methods

- Reviewed *Guidelines for the Provision and Assessment of Nutrition Support Therapy in the Adult Critically Ill Patient* published in 2016 by the Society for Critical Care Medicine and American Society for Parenteral and Enteral Nutrition.
- Conducted literature search to validate 2016 Guidelines
- Reviewed current clinical practice
  - Observations in ICU setting
  - Discussion with practice councils

## Results

- Practice councils recommended to remove GRV orders from the EMR for all patients receiving enteral nutrition.
- Information Technology removed GRV assessments from the order set.
- Education of practice and EMR change to unit, division, and organization.
- Next steps include:
  - Nursing survey to assess practice change.
  - Collaborating with hospital bioinformatics to obtain data on feeding intolerance to evaluate effectiveness