

# BEST PRACTICE PREVENTION AND MANAGEMENT OF UNINTENDED WEIGHT LOSS

## Assessment

- Identification of risk factors that contribute to weight loss (medications, functional impairment, oral problems, therapeutic diets, pain)
- Identification of persons at risk for unintended weight loss (dementia, depression, wandering, previous weight loss, disease process)
- Registered Dietitian's (RD) annual assessment of nutrition and fluid needs
- RD's planned person-specific nutrition related goal(s)

## Care Plan

- Person-centered measurable goals
- Individualized interventions
- Utilization of the RD's assessments, nutrition goals, and recommendations
- Utilization of an interdisciplinary approach

## Care

### Weighing Procedures

- Establish a baseline--weigh weekly for 4 weeks
- Weigh the same time of day
- Weigh using the same scale
- Record weights to easily assess trends
- Re-weigh within 72 hours if significant loss occurs (5% in 30 days or 10% in 180 days)
- Date and document both weight and re-weight
- Weigh weekly until weight stable
- Modify procedures for people with special needs (dialysis, catheters, wheelchairs, etc.)

### Weight Management

- Document and date the re-weight within 72 hours of significant weight change
- Notify MD, RD, family, etc. within 48 hours following verification of weight loss
- Facility takes action to intervene in weight loss within 24 hours following verification

## Preventing Reversible Weight Loss

### Individual Interventions

- Facilitate increased food consumption (food preferences)
- Provide feeding assistance
- Manage underlying issues (physical, spiritual, etc.)
- Reassess effects of medications on intake

### Dining

- Enhance the dining experience such as providing a homelike atmosphere and a variety of foods
- Provide appropriate positioning and/or utensils
- Encourage family support

### Between Meal Nutrition Opportunities

- Order and/or offer varied and appropriate snacks to all individuals
- Provide snacks in various settings such as group activities and socials

### Nutritional Therapy

- Offer fortified foods, snacks, finger food
- Offer liquid nutritional supplements between meals

## Palliative Care

- Identify people with unavoidable weight loss
- Complete Palliative Care form
- Liberalize therapeutic diet

## Resources

- (1.) [www.texasqualitymatters.org](http://www.texasqualitymatters.org)
- (2.) American Dietetic Association Unintended Weight Loss (UWL) in Older Adults. Evidenced-Based Nutrition practice Guideline, Chicago (IL):American Dietetic Association, 2009.
- (3.) American Medical Directors Association (AMDA) Clinical Practice Guideline: Altered Nutritional Status

