 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-CSSD-DIET-P005
	Revision Number:	2
	Effective Date:	07-30-2020
	Document Type:	Policy
	Page Number:	1
	Department/Section:	Dietary
	Document Title:	TUBE FEEDING LABEL

PURPOSE:

1. To properly identify the patient's tube feeding.
2. To ensure that the Attending Physician's diet order is followed.

LEVEL:

Physician, Dietitian, Food Service Worker

DEFINITION OF TERMS:

- Tube feeding- a liquid form of nourishment that is delivered to your body through a flexible tube. The nutrients within the tube feed are similar to what one would get from normal food, and are also digested in the same way.¹

POLICY:

1. All tube feeding bottles shall be properly labeled.
2. The patient's name, room number, date, calories and volume, time of preparation and kind of diet shall be indicated in the label.
3. All labels shall be replaced when there are changes.




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Effective Date:	07-30-2020
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Department/Section:	Dietary
Document Title:	TUBE FEEDING LABEL


APPROVAL:

	Name/Title	Signature	Date
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	DENNIS C. ESCALONA, MN, FPSQua Quality Assurance Supervisor	<i>Dennis C. Escalona</i>	07-22-2020
Recommending Approval:	ENGR. NOEL P. GARBO, FPCHA Corporate Strategic Support Officer	<i>Engr. Noel P. Garbo</i>	7/24/2020
	HENRY F. ALAVAREN, MD, FPSMID Total Quality Division Officer	<i>Henry F. Alavaren</i>	8/9/2020
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO	<i>Genesis Goldi D. Gologan</i>	09-15-2020

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APPROVAL:

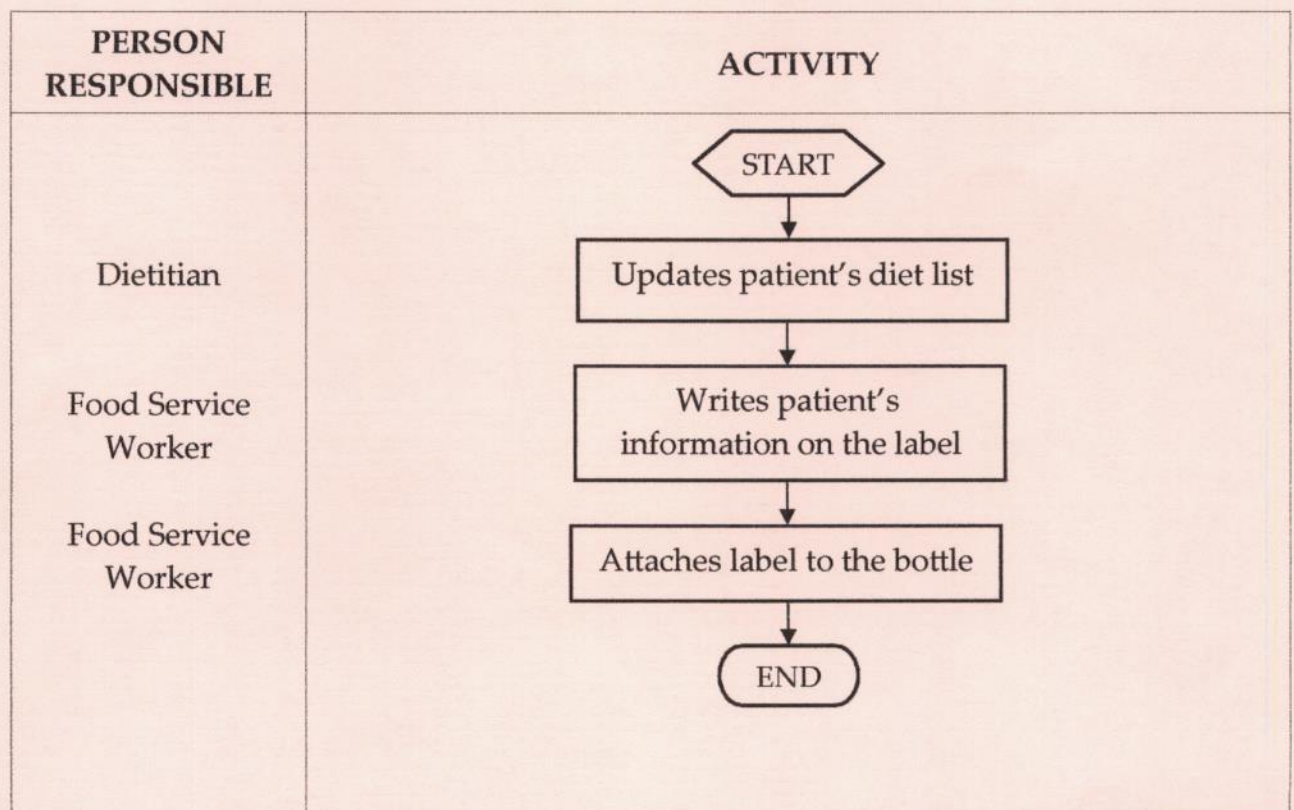
	Name/Title	Signature	Date
Prepared by:	MA. PAMELA P. GARILAO Dietary Manager	<i>Ma. Pamela P. Garilao</i>	7/17/20
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	Revision Number:	2
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PROCEDURE:

1. The Dietitian updates the patient's diet from the computer generated list per stations.
2. The Food Service Worker writes the patient's name, room number, date, calories and volume, time of preparation and kind of diet in the label.
3. The Food Service Worker attaches the tube feeding label on the bottle.

FLOWCHART:



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WORK INSTRUCTION:

Dietitian

1. Updates patient's diet from the computer generated list per station.

Food Service Worker

1. Writes patient's name, room number, date, calories and volume, time prepared and kind of feeding in label.
2. Attaches the tube feeding labels to the bottle.

DOCUMENTATION:


1. Computer generated diet list.
2. Feeding Bottle Label.

DISSEMINATION:

1. Unit Meetings and orientation

REFERENCE:

- ¹*What is Tube Feeding? - Tube Feeding.* (n.d.). Wwww.Tube-Feeding.Com. <http://www.tube-feeding.com/What-is-Tube-Feeding/>

 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-F-79-P01-S09
	Effective Date:	08-15-2021
	Document Type:	Standard Operating Procedure
	Page Number:	1 of 3
	Department/Section:	Dietary Department
	Document Title:	TUBE FEEDING LABEL

PURPOSE:

1. To properly identify the patient's tube feeding.
2. To ensure that the Attending Physician's diet order is followed.

SCOPE:

Applies to all Dietary Department Staffs


RESPONSIBLE PERSON:

Dietitians and Food Service Worker

GENERAL GUIDELINES:

1. All tube feeding bottles shall be properly labeled.
2. The patient's name, room number, date, calories and volume, time of preparation and kind of diet shall be indicated in the label.
3. All labels shall be replaced when there are changes.


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APPROVAL:

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Recommending Approval:	NOEL P. GARBO Corporate Strategic Support Division Officer	<i>[Signature]</i>	8-11-2021
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Approved:	GENESIS GOLDI D. GOLINGAN President and CEO	<i>[Signature]</i>	10/23/2021

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PROCEDURE:

1. The Dietitian updates the patient's diet from the computer generated list per stations.
2. The Food Service Worker writes the patient's name, room number, date, calories and volume, time of preparation and kind of diet in the label.
3. The Food Service Worker attaches the tube feeding label on the bottle.

REFERENCE:

¹*What is Tube Feeding? - Tube Feeding.* (n.d.). Wwww.Tube-Feeding.Com. <http://www.tube-feeding.com/What-is-Tube-Feeding/>

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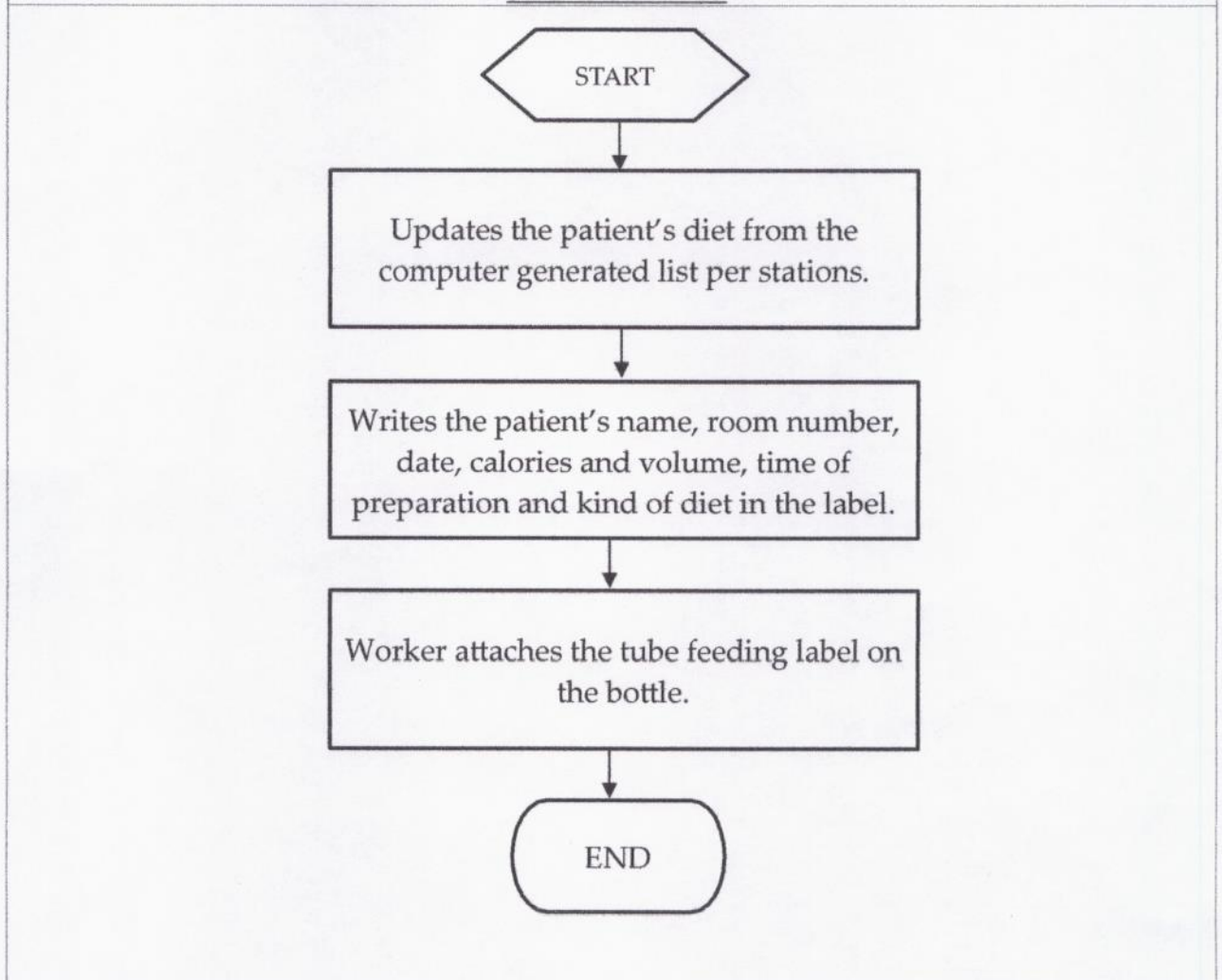


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FLOWCHART:



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Document Type:	Flowchart
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APPROVAL:


	Name/Title	Signature	Date
Prepared by:	MA. PAMELA GARILAO Dietary Manager	<i>Ma. Pamela Garilao</i>	8-7-21
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Recommending Approval:	NOEL P. GARBO Corporate Strategic Support Division Officer	<i>[Signature]</i>	8/24/2021
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Approved:	GENESIS GOLDI D. GOLINGAN President and CEO	<i>[Signature]</i>	10/23/2021

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	Effective Date:	08-15-2021
	Document Type:	Work Instruction
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KEY TASKS	PERSON RESPONSIBLE
1. Updates the patient's diet from the computer generated list per stations	Dietitian
2. Writes the patient's name, room number, date, calories and volume, time of preparation and kind of diet in the label	Food Service Worker
3. Attaches the tube feeding label on the bottle	Food Service Worker

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APPROVAL:

	Name/Title	Signature	Date
Prepared by:	MA. PAMELA GARILAO Dietary Manager	<i>Ma. Pamela Garilao</i>	9/7/21
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Recommending Approval:	NOEL P. GARBO Corporate Strategic Support Division Officer	<i>[Signature]</i>	9/16/2021
	HENRY F. ALAVAREN, MD, FPSMID Total Quality Division Officer	<i>[Signature]</i>	9/17/2021
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO	<i>[Signature]</i>	10/23/2021

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