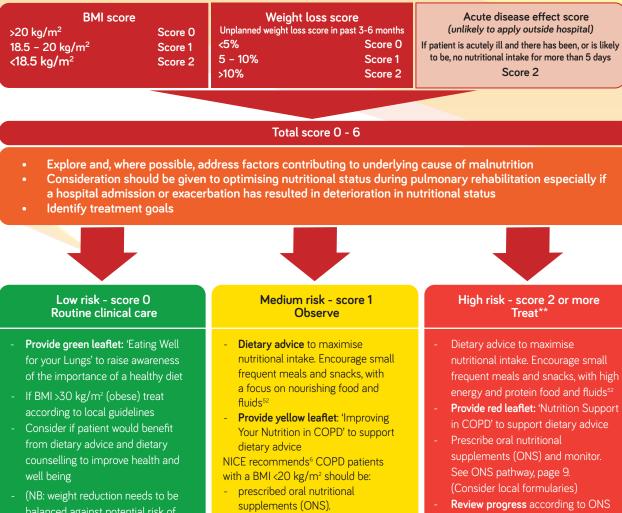
Identifying Malnutrition according to Risk Category Using 'MUST' *³⁸ - First Line Management Pathway



- Review progress according to ONS pathway, page 9
 - On improvement, consider managing as 'medium risk'
 - Consider referral to a Dietitian for dietary counselling at the earliest opportunity especially for complex

*The 'Malnutrition Universal Screening Tool' ('MUST') is reproduced here with the kind permission of BAPEN (British Association for Parenteral and Enteral Nutrition). For more information and supporting materials see http://www.bapen.org.uk/musttoolkit.html **Treat, unless detrimental or no benefit is expected from nutritional support e.g. imminent death.

See ONS pathway, page 9

encouraged to exercise to

Review progress after 1-3 months:

supplementation

'high risk'

augment the effects of nutritional

if improving continue until 'low risk'

if deteriorating, consider treating as

Consider factors contributing to malnutrition/poor nutritional intake and whether they can be treated or managed: Shortness of breath • Dry Mouth • Taste changes • Nausea • Early satiety • Poor appetite • Fatigue • Anorexia • Polypharmacy See relevant patient and carer leaflets for advice: www.malnutritionpathway.co.uk/copd

The following questions can assist in obtaining information to inform a clinical impression of malnutrition risk and determine the most appropriate intervention:

- How is your appetite lately? How are you managing with your eating and drinking?
- 2. How would you describe your weight? What is a usual weight for you?

balanced against potential risk of

Review / re-screen annually

losing muscle)

- 3. Do you feel like your weight has changed in the last few weeks or months?
- 4 How are your clothes and jewellery fitting? Do you feel they fit differently to usual?

Estimated risk of malnutrition	Indicators
Unlikely to be at-risk (low)	Not thin, weight is stable or increasing, no unplanned weight loss, no reduction in appetite or intake
Possibly at-risk (medium)	Thin as a result of COPD or other condition, or unplanned weight loss in past 3-6 months, reduced appetite or ability to eat
Likely to be at risk (high)	Thin or very thin and/or significant unplanned weight loss in previous 3-6 months, reduced appetite or ability to eat and/or reduced dietary intake

For all individuals

- Discuss when to seek help e.g. ongoing weight loss, changes to body shape, strength or appetite
- Refer to other healthcare professionals if additional support is required (e.g. dietitian, physiotherapist, GP)









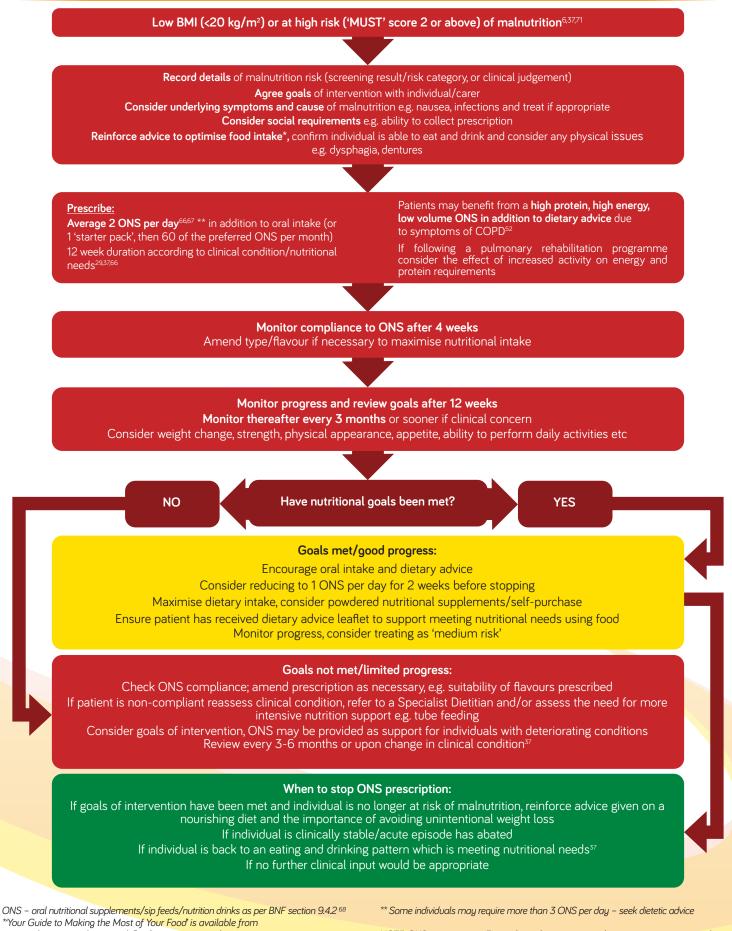




Royal College

of Nursing

Pathway for Using Oral Nutritional Supplements (ONS) in the Management of Malnutrition in COPD



www.malnutritionpathway.co.uk/leaflets-patients-and-carers For more detailed support or for patients with complex conditions seek advice from a Dietitian NOTE: ONS requirement will vary depending on nutritional requirements, patient condition and ability to consume nutrients, from food and fluid or other sources of nutrition











