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| **Student’s Name:** | |  | **Birth Date (YYYY/MM/DD):** |  |
| **PHN:** |  | | | |

**Instructions for completing this form:**

* This order form must be completed by the student’s most responsible practitioner (MRP). This may be a physician, nurse practitioner, or registered dietitian (RD). If the orders are written by an RD, a physician must also sign the order form at minimum annually and check the “Physician orders feeds as directed by RD” box.
* The orders on this form will be used by the NSS RN to develop a care plan that will describe and direct the restricted activities that the non-medical school staff will perform in the school setting.
* In completing this order form, the MRP acknowledges an understanding that the care in the school setting will be provided by non-medical school staff who will follow the care plan.
* All ordered care must be routine (not PRN), essential (i.e., cannot be provided outside school hours), and have a predictable student response.
* Orders must be updated annually and/or when changes occur in child’s medical care needs.

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| **Ordering MRP Information and Signature** | | | | | | | | | |
| By providing orders, signing, and submitting this order form, I, the undersigned MRP agree that: (MRP please tick both and sign)  The student’s tube feed can be safety managed at school by a non-medical school staff following the orders provided.  I have read and understand the information in this form. | | | | | | | | | |
| **Physician Name:** |  | | | | **BC College #:** | |  | | |
| Physician orders feeds as directed by RD | | | **Name of RD:** |  | | | | | |
| **Nurse Practitioner Name:** | |  | | | | **BCCNM Registration #:** | |  | |
| **MRP Address:** | | | | | | | **Phone Number:** | | **Fax Number:** |
|  | | | | | | |  | |  |
| **MRP Signature *(required)*:** | | | | | **Date Completed (YYYY/MM/DD):** | | | | |
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| Send completed order form to Nursing Support Services via fax at **(604) 708-2127** or email at [nssreferrals@cw.bc.ca](mailto:nssreferrals@cw.bc.ca) |

**Note:**This order form is supported by the NSS Delegation of Tube Feeding in the School policy. It can be referenced at[**https://shop.healthcarebc.ca/phsa/BCWH\_2/CW%20Campus%20Wide/C-0506-11-63018.pdf**](https://shop.healthcarebc.ca/phsa/BCWH_2/CW%20Campus%20Wide/C-0506-11-63018.pdf)

**\* If child requires two different feeds in one day (i.e. one formula, one water) use the second page for the second order**

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| **Formula**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \* If additional nutritional product(s) are required, write them below  \* If ordering water for hydration, write “water only” in “Formula” line above  **Formula volume**: \_\_\_\_\_\_ mL  **Water volume**: \_\_\_\_\_\_ mL  **Total volume**: \_\_\_\_\_\_ mL (max volume 500 mL)  **Duration**: \_\_\_\_\_\_\_ minutes (max 20 minutes)  **Flush before and after feed**: \_\_\_\_\_\_mL over \_\_\_\_\_\_ seconds (**max 50 mL;** medical rational required for larger volumes – note below)  **Tube feed time(s) at school**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *\* Due to varying school schedules, school staff may move the scheduled feed time(s) up to 60 minutes (either earlier or later) than the ordered time(s).*  *If this is not safe for the student, indicate the maximum minutes that school staff may shift feed times: \_\_\_\_\_\_ minutes* |

**Nutritional Product(s) to be Added to Tube Feed  N/A**

|  |  |  |
| --- | --- | --- |
| **Name of nutritional product(s) to be added to tube feed** |  | Nutritional products include things such as protein powders, formula powders, carbohydrate powders and fat modules.  Any substance classified by [Health Canada](https://publications.gc.ca/collections/Collection/H30-12-11-2000E.pdf)1 as a drug (including electrolytes) or as a [Natural Health Product Substance](https://laws-lois.justice.gc.ca/eng/regulations/sor-2003-196/page-9.html)2 (except nutritional products as above) cannot be added to a tube feed and must be ordered as a medication. (See Medication Administration Order Form) |
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**Orders for Gastric Venting  N/A**

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| \_\_\_\_\_ minutes before feed, vent G port for \_\_\_\_\_ minutes  \_\_\_\_\_ minutes after feed, vent G port for \_\_\_\_\_ minutes |

**Positioning  N/A**

|  |
| --- |
| The standard is that the student’s upper body will be elevated to at least 30 degrees during tube feed. If the student requires a different position during the feed or a specific position after the feed, please specify below.  Position student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ during feed.  Position student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for at least \_\_\_\_\_ minutes post feed. |

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| **Medical rationale for larger flush volumes:** |
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1 <https://publications.gc.ca/collections/Collection/H30-12-11-2000E.pdf>  
2 <https://laws-lois.justice.gc.ca/eng/regulations/sor-2003-196/page-9.html>

**\* Use this page for a second order if child requires two different feeds in one day (i.e. one formula, one water)**

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| **Formula**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \* If additional nutritional product(s) are required, write them below  \* If ordering water for hydration, write “water only” in “Formula” line above  **Formula volume**: \_\_\_\_\_\_ mL  **Water volume**: \_\_\_\_\_\_ mL  **Total volume**: \_\_\_\_\_\_ mL (max volume 500 mL)  **Duration**: \_\_\_\_\_\_\_ minutes (max 20 minutes)  **Flush before and after feed**: \_\_\_\_\_\_mL over \_\_\_\_\_\_ seconds (**max 50 mL;** medical rational required for larger volumes – note below)  **Tube feed time(s) at school**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *\* Due to varying school schedules, school staff may move the scheduled feed time(s) up to 60 minutes (either earlier or later) than the ordered time(s).*  *If this is not safe for the student, indicate the maximum minutes that school staff may shift feed times: \_\_\_\_\_\_ minutes* |

**Nutritional Product(s) to be Added to Tube Feed  N/A**

|  |  |  |
| --- | --- | --- |
| **Name of nutritional product(s) to be added to tube feed** |  | Nutritional products include things such as protein powders, formula powders, carbohydrate powders and fat modules.  Any substance classified by [Health Canada](https://publications.gc.ca/collections/Collection/H30-12-11-2000E.pdf)1 as a drug (including electrolytes) or as a [Natural Health Product Substance](https://laws-lois.justice.gc.ca/eng/regulations/sor-2003-196/page-9.html)2 (except nutritional products as above) cannot be added to a tube feed and must be ordered as a medication. (See Medication Administration Order Form) |
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**Orders for Gastric Venting  N/A**

|  |
| --- |
| \_\_\_\_\_ minutes before feed, vent G port for \_\_\_\_\_ minutes  \_\_\_\_\_ minutes after feed, vent G port for \_\_\_\_\_ minutes |

**Positioning  N/A**

|  |
| --- |
| The standard is that the student’s upper body will be elevated to at least 30 degrees during tube feed. If the student requires a different position during the feed or a specific position after the feed, please specify below.  Position student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ during feed.  Position student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for at least \_\_\_\_\_ minutes post feed. |

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| **Medical rationale for larger flush volumes:** |
|  |

1 <https://publications.gc.ca/collections/Collection/H30-12-11-2000E.pdf>  
2 <https://laws-lois.justice.gc.ca/eng/regulations/sor-2003-196/page-9.html>