

A measured approach to balanced nutrition



Proper nutrition plays a vital role in the recovery of your ventilated patients.¹ That's why finding the right nutritional balance for each of your patients' unique needs is critical in speeding up the healing process.

While Indirect Calorimetry is the 'gold standard' for determining nutritional needs, tools for its measurement are often unavailable.² Thus predictive equations are frequently used, even though studies have shown equations to be accurate only about 30 percent of the time.^{3,4,5}

Did you know?

Approximately

40-50%



of patients, particularly those in the Intensive Care Unit (ICU), have a moderate to severe degree of malnutrition.^{1,2}

Indications for Indirect Calorimetry (IC)⁶

In patients with known nutritional deficits or derangements

When patients fail attempts at liberation from mechanical ventilation

When the need exists to assess the VO₂ to evaluate the hemodynamic support of mechanically ventilated patients

To determine the causes of increased ventilatory requirements

Timely and appropriate nutrition has been shown to potentially reduce LOS in the ICU by as much as 2.9 days⁷

The CARESCAPE™ R860 when accompanied by the respiratory gas module offers advanced tools for Indirect Calorimetry parameters that are measured, not estimated: VO₂, VCO₂, EE (Energy Expenditure), RQ (Respiratory Quotient)



Because the module is integrated with the ventilator, you continuously capture gas exchange and energy expenditure measurements. This data can be used to customize nutritional support. By personalizing each patient's support, you help them regain their nutritional balance.

1. Correia M, Hegazi R, Higashiguchi T, Michel J, Reddy B, Tappenden K, et al. Evidence-based recommendations for addressing malnutrition in healthcare: an updated strategy 2014; 15: 544-550.
 2. Reid, CL. Nutritional requirements of surgical and critically-ill patients: do we really know what they need? Proc Nutr Soc.
 3. Reeves MM, Capra S. Variation in the application of methods used for predicting energy requirements in acutely ill adult patients: a survey of practice. Eur J Clin Nutr. 2003; 57: 1530-1535.
 4. American Association for Respiratory Care (AARC) Clinical Practice Guideline. Metabolic Measurement Using Indirect Calorimetry During Mechanical Ventilation 2004 Revision & Update. Respiratory Care. Sept 2004 Vol 49 No 9. 1073-1079.
 5. Neumayer LA, Smout RJ, Horn HG, Horn SD. Early and sufficient feeding reduces length of stay and charges in surgical patients. J Surg Res. 2001;95(1):73-77.