

**Large gastric residual is considered
>50% of the previous feeding**

- Abdominal distention, discoloration, or tenderness
- Dark green or bloody residual (light green is tolerated)
- Increased Apnea/Bradycardia
- Clinical instability/temp instability
- Bloody stool
- Frequent emesis

Feeding Intolerance Algorithm

No residuals will be checked during the trophic feed period ($\leq 20\text{ml/kg/day}$)

Not present on assessment

Refeed residual and continue normal feeding volume

2nd consecutive occurrence of large residual

Notify MD/NNP

Present on assessment

Notify MD/NNP

KUB

Normal

Abnormal

1. Return residual and give full feed
2. Return residual and subtract from feeding volume
3. Return residual and hold current feed
4. Consider continuous feeding
5. Consider reduction of volume by 20%

NPO

- NEC
- Sepsis Evaluation
- Ileus Management