### Daily documentation of nutrition for infant cardiac admissions

**Measure Description:** Proportion of days infants, ≤ 30 days of age with cardiac disease, had both feeding status and caloric intake documented.

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Number of days(^1) during which the infants had their feeding status(^2) and caloric intake(^3) documented.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denominator</td>
<td>Number of days infants, ≤ 30 days of age, with cardiac disease(^4) are admitted to a patient care unit during the measurement period.</td>
</tr>
<tr>
<td>Denominator Exclusions</td>
<td>Infants with cardiac disease admitted for less than 24 hours.</td>
</tr>
<tr>
<td>Denominator Exceptions</td>
<td>None</td>
</tr>
</tbody>
</table>
| Definitions / Notes | 1. **Days:** 24-Hour Periods  
2. **Feeding status** include parenteral and enteral.  
3. **Caloric intake** is documented as calories per kilograms per day.  
4. **Cardiac disease** is defined as an acquired or congenital heart defect  
   
   **Note:** Feeding status/caloric intake should be documented every 24 hours. (Eg. If a patient is admitted for 28 hours, only one instance of feeding status needs to be documented. After 48 hours, there would need to be two notes regarding feeding status, etc.) |
| Measurement Period | Quarterly |
| Sources of Data | Medical record |
| Attribution | Unit and institution level |
| Care Setting | Inpatient |

**Rationale**

Nutrition is a critical component of care for infants with congenital heart disease. Although documentation of daily fluid intake is a standardized activity performed by nurses, assessment or measurement of nutritional intake is not consistently performed.

### Clinical Recommendation(s)

**ACC/AHA Guidelines:**

**Supporting literature:**

### Challenges to Implementation

Requires primary data collection

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