

Intake, Measuring and Recording

Purpose	The purpose of this procedure is to accurately determine the amount of liquid a resident consumes in a 24-hour period.						
Preparation	<ol style="list-style-type: none">1. Verify that there is a physician's order for this procedure and/or that the procedure is being performed per facility policy.2. Review the resident's care plan to assess for any special needs of the resident.3. Assemble the equipment and supplies as needed.						
General Guidelines	<ol style="list-style-type: none">1. Inform the resident and his or her family and visitors that the resident is on intake and output.2. If the resident is medically capable of understanding the procedure, ask him or her to assist you in telling you when he or she drank some fluid and how much he or she drank.3. Fluids taken intravenously are recorded by the licensed nurse.4. Record the fluid intake as soon as possible after the resident has consumed the fluids.5. At the end of your shift, total the amounts of all liquids the resident consumed.6. Record all fluid intake on the intake and output record in cubic centimeters (mls).7. Post an intake and output record form in the resident's room.						
Equipment and Supplies	<p>The following equipment and supplies will be necessary when performing this procedure.</p> <ol style="list-style-type: none">1. Measuring container;2. Intake and output record;3. Pen or pencil; and4. Personal protective equipment (e.g., gowns, gloves, mask, etc., as needed).						
Steps in the Procedure	<ol style="list-style-type: none">1. Place the clean equipment on the bedside stand or overbed table. Arrange the supplies so they can be easily reached.2. Wash and dry your hands thoroughly.3. Pour the leftover fluid from the serving container into the measuring container.4. Place the measuring container on a flat surface (i.e., bedside stand, overbed table, etc.).5. Carefully look at the level of fluid. Maintain eye level so that you can see the number reached by the level of the fluid.6. Subtract the amount in the measuring container from the amount in the serving container. This is the amount consumed. Example: <table><tr><td>Resident served 8 oz. glass of water</td><td>8 oz. = 240 mls</td></tr><tr><td>Leftover fluid 3 oz.</td><td>3 oz. = 90 mls</td></tr><tr><td>Total liquid resident consumed</td><td>5 oz. = 150 mls</td></tr></table> Alternately, the resident on intake, with his/her permission, may receive fluids in specific containers designed for ease in measuring fluid intake.	Resident served 8 oz. glass of water	8 oz. = 240 mls	Leftover fluid 3 oz.	3 oz. = 90 mls	Total liquid resident consumed	5 oz. = 150 mls
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Steps in the Procedure (continued)

7. Record the amount noted on the intake side of the intake and output record in Point Click Care.
8. Record the time the intake was measured.
9. Pour unused fluids down the commode.
10. Discard disposable equipment and supplies in designated containers.
11. Clean the bedside stand or overbed table and return it to its proper position.
12. Wash, rinse, and return the graduate to its designated storage area.
13. Wash and dry your hands thoroughly.

Documentation

The following information should be recorded in the resident's medical record, per facility guidelines:

1. The date and time the resident's fluid intake was measured and recorded.
2. The name and title of the individual who measured and recorded the resident's fluid intake.
3. The amount (in mls) of liquid consumed.
4. The type of liquid consumed (i.e., tea, milk, coffee, soup, etc.).
5. If the resident refused the treatment, the reason(s) why and the intervention taken.
6. The signature and title of the person recording the data.

Reporting

1. Notify the supervisor if the resident refuses the procedure.
2. Report other information in accordance with facility policy and professional standards of practice.

References	
MDS (RAPs)	G1h; J1c; J1d; K5a; K5b; K6b; P1ad (RAP # 5; RAP # 12; RAP # 13; RAP # 14)
Survey Tag Numbers	F327
Related Documents	Intake/Output Record (Shift) (Appendix B) Monthly Intake and Output Flow Sheet (Appendix B)
Risk of Exposure	Body Fluids–Infectious Diseases
Procedure Revised	Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____