



USC 2023 Virtual GI Nutrition Program
(November 4th, 2023)

83 responses (N = 102)

1. Please rate the following on a scale of 5 = excellent to 1 = poor:

	Excellent	Above Average	Combined 4 & 5
Objectives were clearly defined and presented:	77	5	82 (99%)
The program was well planned and organized:	78	4	82 (99%)
Topics were practical and relevant:	76	7	83 (100%)
The program objectives were met:	80	3	83 (100%)
My personal objectives were met:	75	7	82 (99%)

2. On a scale from 5 (excellent) to 1 (poor), please rate the overall content and practical value of each lecture:

	Excellent	Above Average	Combined 4 & 5
The Malabsorption Workup	77	4	81 (98%)
Assessing Hydration in the Acute Care, Enterally-Fed Adult Patient	70	12	82 (99%)
Nutrition Support in the Critical Care Surgical/Trauma ICU	58	16	72 (87%)
Parenteral Nutrition: Clinical Pearls	71	11	82 (99%)

3. On a scale from 5 (excellent) to 1 (poor), please identify whether each lecture was current, balanced, and supported by evidence (if evidence is available):

	Excellent	Above Average	Combined 4 & 5
The Malabsorption Workup	74	8	82 (99%)
Assessing Hydration in the Acute Care, Enterally-Fed Adult Patient	68	11	79 (96%)
Nutrition Support in the Critical Care Surgical/Trauma ICU	67	6	73 (88%)
Parenteral Nutrition: Clinical Pearls	67	11	78 (94%)

4. Would you recommend the program to others? Yes: 82 (99%)

5. What did you like best about the program? How will it change your practice?

- very comprehensive with clear guidance that I can use in my practice

- I am new to working with TPN patients so this was helpful for building my confidence with this population
- It was very informational. Am not practicing currently.
- more attention to slowing absorption vs minute micronutrient details
- Practical and evidence-based. Reinforced current practice
- I enjoyed the case studies to apply information
- It was very comprehensive, informative, transparent, and highly useful for my practice. Controlling stool output and managing hydration are a common challenge. It was nice to review guidelines and empirically understand TPN as well.
- There is a lot of information to review. I learned about Wernicke's being a possibility in nonalcoholic patients, our facility has a lot of refeeding patients. Has made me even more aware of importance of possibility for this to happen. I also see many ileostomy patents, I have a better idea of what to look for and how to care for these patients with fluid, malabsorption, etc. Also, I am more aware of need to look more carefully at surgeries to understand what is going on.
- I enjoyed the malabsorption section the most because my hospital has a GI unit which has a lot of patients with diarrhea and malabsorption concerns. Now i understand how to define osmotic and secretory diarrhea, and now I feel more conformable to request a quantitative fecal fat test.
- The lectures combine evidence based information, expert advice and practical tools. Thank you
- Practical treatment/recommendations for malabsorption and TPN complications
- I enjoyed hearing practices from other hospitals. I liked the idea of making a SMART phrase in EPIC with questions to ask for malabsorption workup; that way I can be more thorough.
- Practical interventions and problem solving. Look at meds.
- The presenters are very knowledgeable and have great experience in the field.
- Oh My Gosh, FABULOUS! Re evaluate types of hydration
- Evidence based information that can be directly applied to patient care.
- Love the practical tips, working knowledge vs strictly research.
- The level of depth and explanation about each topic. I have greater understanding and more tools in my tool kit now to help patients.
- The hydration presentation. I feel like it's often overlooked by dietitians who simply recommend 1 ml/kcal and do not assess hydration provision during the patients hospital stay. I feel more confident now in knowing the differences in NS vs 1/2 NS and other IV fluids.
- Lots of great info for my GI patients as well as my ICU /vented patients, presented in a manageable time frame (4 hrs). I appreciated the specific articles that supported Carol and Kelly's practices. Also, the sense of humor was appreciated! (nails on the driveway!)
- I liked the malabsorption work up the best, I can better assess lab values. I know this was not in the same topic, but I think the fluid estimation is how I will change my practice the most
- Very Practical and helpful
- I like that the presenter supported info with studies. I also liked that the presenters pointed out when the recommendations were based on personal bias rather than on evidence based studies.
- Good time frame
- The expertise of the speakers (with a hint of humour). I appreciated the reviews of PN and its effects on lfts and it is Alk phos not ALT/AST. Also liked the trauma review and the tip to monitor amount of TF actually fed, not just prescribed
- So much great and detailed information that will help inform me in my acute care setting

- What I loved best was being able to participate remotely. I am an MPH/RDN student at UNC, so I don't have a practice yet. However, learning from actual case studies was very insightful and I hope to use the knowledge I've gained today to better inform my practice when the time comes.
- Format, being able to watch from home. All topics will improve my confidence as a dietitian when dealing with malabsorption and dehydration especially.
- Carol is such a great presenter!! I liked that her view on topics were very practical. I wish we could stop ordering TG prior to starting TPN :(I loved the hydration presentation, it isn't talked about enough
- Practical and relevant information. I will have more confidence when collaborating and discussing patient care with providers regarding hydration and nutrition support.
- I really liked the refresher on all of the literature that supports our current practice. Having the conference virtually was super convenient!
- extremely practical and evidenced based!
- it reinforces my current clinical practice
- I learned something from every lecture I plan to apply in my daily practice.
- Practical information from Carol to use in my job. Hydration topic was helpful! Being able to ask questions
- Practical nature with case studies/real practice examples
- Learning about different hydration recs
- I appreciate the stories real patient encounters. It was enlightening to adjust the macronutrients instead of increasing more calories to help patients gain weight in light of malabsorption.
- Practical advice provided that can easily be applied in daily care plans in and outpatient settings
- The tips for malabsorption, I won't feel so pressured to change TF every time a patient has diarrhea.
- lots of practical info
- I love how practical and straight forward the talks were, such useful information for day to day practice!
- The malabsorption portion.
- Applying knowledge to daily practice
- Liked hearing about hydration - reminder for me to address for all hospital patients Liked that this was offered on a Saturday (although work does not pay for virtual conference on Saturdays) - if it was during the week, may have missed.
- It was very informative with practical information that will be easy to apply. I will be more considerate of malabsorptive and hydration issues with those with altered GI tracts.
- Practical information and recommendations shared by experienced skilled dietitians. Distinguish between osmotic and secretory diarrhea. Identify patients at risk of dehydration. Identify patients at risk for Wernicke's.
- The hydration talk was most inspiring to me. Will definitely pay more attention to urine output.
- The topics were informative and evidence based. Additionally, the speakers were very knowledgeable regarding topics discussed.
- The practical information to apply in the clinical setting
- I really enjoyed hearing Carol talk about these topics! The malabsorption workshop was very relevant and I will take the info back into my practice.
- I learned so much, and am already referring to the handouts and my notes for difficult to nourish patients

- I liked how relevant the topics were and up to date with current research. I'll keep in mind adding free water flushes to prevent dehydration with my TF patients.
- I loved the amount of practical information. It made everything immediately transferrable to direct patient care. Also, having this offered virtually was fantastic.
- Virtual format and q&a opportunities
- It had a great flow, with actual information I could use. I took notes on a few things we can change at our hospital.
- provided me with more clear thiamine recommendations that I will absolutely be using in everyday practice
- Made me feel better about ordering thiamine for everyone :) and gave me some ideas on how to approach decreasing my high ileo output GI pts' outputs
- Practical and applied information. It will increase my confidence in speaking with physicians regarding nutrition support
- The malabsorption work up. No matter how many times I hear this talk, I always learn something new!
- Practical information that can be used in my daily practice.
- The speakers were both very knowledgeable on the topic and had many years of practice so they could share their personal experiences working with the patient population. I appreciate when speaker discuss the studies grading so we don't take guidelines blindly
- I liked the real life/clinical examples throughout the presentations
- Amazing experienced speakers with real life examples and practical treatment options
- Carol did an amazing job speaking. I feel like there was so much for me to reference back when I get a patient with malabsorption. I also recognized that we have been under hydrating most patients on tube feeds so since the talk I have tried to provide better hydration for these patients.
- I like the discussion about hydration and what speaker discussed about having the doctor assess fluid needs and directing provision of fluid. Sometimes I feel like it's above my pay grade, you know like when my BMI >50 patient with CKD who's 10 liters up has hypernatremia and they want me to "add some water".
- Malabsorption workup, hydration in en
- Application to my work in home infusion.
- It was a good combination of topics, and incredibly relevant to everyday practice for inpatient clinical care. I will reference these materials while caring for patients.
- The speakers were fantastic. I found Carol's discussion to be incredibly motivating and educational.
- I like how each presentations are case studies based where it's more applicable to daily clinical practice.
- I enjoyed learning about the various topics discussed at the conference and found them very applicable to my daily practice as an inpatient clinical dietitian working with many nutrition support patients. I plan to be more proactive with assessing hydration status especially and monitoring for malabsorption.
- discussion of various approaches to malabsorption

6. What suggestions do you have for improving the program?

- Presentations were scattered at times. More focus on a specific topic, for example a deep dive into acid/base balance in PN, would be great. It was hard to follow and seemed rushed when Carol was presenting PN pearls.
- I always appreciate interactive quizzes during the talk
- Slowing down with presentations
- None that I can think of. It would be wonderful to have it annually :)
- Maybe send us the article links in an email.
- The program is very informative and useful, I really hope the presentation was recorded so I can review it again.
- Maybe think of evening course, one or two lectures per week for a month
- perhaps offering two smaller series
- Carol clearly has lots of experience and knowledge. It was a little hard to follow at times though because she does speak quickly. For Kelly's presentation there was one comment about not using arginine supplementation in pts with sepsis being common knowledge or a settled matter, but I was under the impression that was actually not the case. So I felt a little confused by her comment. Maybe a topic for a future conference?
<https://clinmedjournals.org/articles/ijccem/international-journal-of-critical-care-and-emergency-medicine-ijccem-2-017.php?jid=ijccem>
- I like the format. 4hrs great. A lot of great info.
- Please start EARLIER. Next one please start 8 a.m. PST
- More frequent opportunities for this type of program or more/different topics.
- None, it was excellent
- Use a different platform than teams. I got kicked off the platform and the audio was not working at times.
- 4hrs straight was a little too long even at my own home. Suggest doing 2- 2hr sessions if possible
- provide more links to articles previously written by speakers
- It would be great to have a decision tree for sodium levels
- There was a lot of info with little breaks. I need a break between the first and last session.
- In person so active interaction can take place
- I wish the presentations were recorded and made available to course participants. I greatly benefit from listening to lectures more than once. The presenters had so much experience to offer... I just wish I could hear them again.
- I thought it was great.
- Nothing! The length of the lectures and the whole program was perfect
- None, I thought the program ran smoothly.
- The parenteral nutrition talk was awesome, but I was hoping to hear more on challenging cases and what to do (pearls of wisdom from those incidents), such as if patient experiences cramping with TPN, increasing compliancy, prevention of line infection (any new evidence that lipid emulsions are linked to line infections?). But again, some of the pearls in that talk were great to know such as ALT and AST are inflammation not liver function test!
- I am a critical care RD and the CC presentation wasn't very helpful
- More about IBD nutrition recs
- Add 1 or 2 case studies to help the audience practice your recommendations. I feel like to have to encounter someone with the gi issue in order to see if recs are working.
- More time for questions

- very good
- The critical care talk seemed like it was missing some newer studies, such as EFFORT (which showed that high protein may be harmful for patients not on dialysis with AKI, aiming for closer to 1.3 g/kg recommended), and NUTRIREA-3 etc, using IC when available (more readily available and easier to use, does not take a long time to warm up/calibrate anymore with QNRG and CCM express, unless machine is malfunctioning and broken, which we found was the reason we were having calibration issues with our ultima cart!), and also there are some studies starting to show association with IC guided nutrition with better results than kcal/kg or equation guided nutrition. But overall, great talks and I appreciated the discussions about strengths/weaknesses of the guidelines and research etc!
- Wished the program was recorded for participants
- Additional 1 pager sheets that dietitians can use daily at work.
- The critical care presentation did not feel like the topic really fit with the GI nutrition topics.
- Was wondering if the presentations can be recorded in future conferences and made available for registered participants to listen again for a limited period of time. (wanted to listen to some parts of the presentations again to make sure I didn't miss anything or misunderstood something.)
- Record it
- Allow for filming to review later because the presenters went through the slides very quickly and I felt I didn't capture all of the information while I was trying take notes
- The speaker about the trauma was interesting/interesting topic, but she claimed IC is "just a guess" for calorie needs, but I'm pretty sure it's considered the gold standard?
- I don't have any, I learned a lot and the presenters were great
- Maybe provide a second 10 minute break
- I know it's difficult to manage work schedules but having this on a Saturday was challenging.
- Break out groups, more case studies
- having the webinar available for others who couldn't attend - it was a difficult time to plan around with kids.
- more time for questions even if it makes the program a longer
- More case studies/examples of patients/scenarios
- Would love to have more interactive components
- Continue giving practical information
- None. Very nicely done !
- More explanation to how energy needs were calculated in ICU webinar
- I'm really bummed that it wasn't recorded. I always listen to them a second time because I have a hard time taking notes. I know I missed things. I had a question I wanted to ask but I couldn't figure out how to work the q&a.
- Talk slower (Carol)
- There was so much good information being discussed that I think I would have preferred if it were broken down into 2 hr segments instead of a 4 hr program so I could fully absorb the information.
- Keeping with evidence based recommendations for fluids. 2L/ day as a minimum is frequently too much for the many heart failure patients I see.