Stage 1 38 weeks Concern for aspiration \rightarrow consider MBS Concern for feeding intolerance/GERD/slow PO progress → consider BCH GI consult **Evaluate PO Feeding Abilities** ~ 50% or greater PO and Less than ~ 50% PO and good progress slow progress **Family Meeting Family Meeting** Discuss feeding Discuss discharge options progress/plans Continue inpatient care Implement additional Discharge when full PO strategies Reevaluate weekly Proceed to Stage 2 Arrange Outpatient Follow Up



Stage 2 40 weeks Concern for aspiration → MBS Concern for feeding intolerance/GERD/slow PO progress → BCH GI consult **Evaluate PO Feeding Abilities** All PO Not medically ready for Partial PO and (or anticipated discharge (or delayed medically stable in near future) initiation of PO) Continue inpatient care. GI consult Implement additional strategies. **Family Meeting Family Meeting** Reevaluate readiness for PO Discharge planning Discuss discharge discharge or level II/rehab feeding plan transfer weekly Continue Inpatient care Consider Reevaluate < 40-50% PO Discharge readiness for PO/G/GJ discharge all PO weekly Consider Plan for >40-50% PO discharge full PO Discharge PO/NG Arrange Outpatient Follow Up



Stage 3 42-44 weeks Aspiration ruled out or MBS reviewed Case discussed with BCH GI and multidisciplinary team **Evaluate PO Feeding Abilities** Not medically ready for All PO (or anticipated Partial PO and discharge (or delayed in near future) medically stable initiation of PO) Continue inpatient care. **Family Meeting** Implement additional strategies. **Family Meeting** Discuss discharge Reevaluate readiness for PO Discharge Planning feeding plan discharge or level II/rehab transfer weekly Surgery consult Continue Discharge Inpatient care PO/G/GJ Reevaluate < 40-50% PO readiness for discharge PO/NG Transfer to Level weekly II/Rehab Discharge >40-50% PO Full PO Discharge PO/NG Arrange Outpatient Follow Up

