



**CASE REPORT PROVIDED BY:**  
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## PATIENT HISTORY:

**Chief Diagnosis:**

FTT

**Secondary Diagnosis:**

Hypotonia, laryngomalacia, and epilepsy

## CASE HISTORY:

- **Reason for tube feeding:** Dysphagia
- Sole source of nutrition
- Patient has been tube fed for 2 years

## NUTRITION MANAGEMENT:

- **Type of previous formula:**  
Milk-based polymeric children's formula
- **Intolerances/reasons for switching:**
  - Reflux
  - Vomiting
- **Reasons for choosing Nourish Peptide:**
  - Intolerance to other formulas
  - Dairy sensitivity
  - Complex carbohydrate sources vs. refined sugars
  - History of gut dysbiosis and malabsorption
- **Additives/supplements to Nourish Peptide:**
  - Multivitamin with cofactors to support neurodevelopment
  - Liquid electrolyte concentrate (Na, K, and Mg) - 1/2 tbsp per day diluted in 8 oz of water

METHOD OF DELIVERY	AMOUNT PER DAY	FEEDING RATE
Bolus feedings via syringe	1040 mL	If episodic: 260 mL per feed x 4 feedings/day

## INSIGHTS:

- Patient's bowel patterns regulated since starting Nourish Peptide
- Patient success achieved with improvement in symptoms across multiple measures
- Nourish Peptide is an excellent wholefood, plant-based alternative to standard formulas – especially for those with allergies
- Patient will continue on Nourish Peptide with plans to transition to Keto Peptide
- Nourish Peptide will continue to be used more broadly across our center

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