GULP Dehydration Risk Screening Tool Assessment

	Score 0	Score 1	Score 2
G auge 24hr fluid intake	Intake greater than 1600ml	Unable to assess intake or Intake between 1200 and 1600ml	Intake less than 1200ml
Urine colour (use pee chart)	Urine colour score 1-3	Unable to assess urine colour	Urine colour score 4-8
Look for signs, symptoms and risk factors for dehydration	No signs of dehydration	If any of below reported: Repeated UTIs Frequent falls Postural hypotension Dizziness or light-headedness Dry mouth, lips or eyes Taking diuretics Open or weeping wound Hyperglycaemia 	If any of the below reported: Drowsiness Low blood pressure Weak pulse Sunken eyes Increased confusion or sudden change in mental state Diarrhoea and/or vomiting Fever
Plan	Low risk = total score 0	Medium risk = total score 1-3	High risk = total score 4+ (maximum score = 7)

Date of assessment_____

Initials of assessor_____

Total score_____

High/Medium/Low risk care plan to be followed (circle as appropriate)



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Care Plan – Low risk of harm from	Care Plan – Medium risk of harm from	Care Plan – High risk of harm from
dehydration	dehydration	dehydration
 Encourage service user to continue with current fluid intake Place "Keeping Hydrated" leaflet in pink folder 	 Encourage service user to increase frequency or size of drinks – using "Keeping Hydrated" leaflet for ideas Ask service user to self-monitor urine colour and aim for urine colour 1-3 	 Ensure service user takes extra 4 x 250ml drinks per day (in addition to usual fluids and foods) by: Explaining guidance to family/carers Offer or encourage 250ml drinks at each visit Providing "Hydrant Information" Discuss "Keeping Hydrated" leaflet with service user and/or family and carers

This tool has been developed by the Food First team – part of SEPT Community Health Services Bedfordshire If you would like more information regarding the tool please contact the team on 01582 707629 or email foodfirst@sept.nhs.uk

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