Background
Surgical patients are especially susceptible to nutritional disorders; additionally an adequate nutritional status is important in achieving prompt recovery.

Material and methods
Prospective, observational study (2 months)
Post-surgical patients in a third level hospital with PN support.
Estimated calorie requirements (CR) of surgical patients were calculated.
Method: The Harris-Benedict formula.
Data collection: medical history of each patient, including age, diagnosis, duration of PN support, glycaemia, electrolytes, total proteins and other haematological parameters.
Blood tests were requested for every patient, at the beginning, during and at the end of parenteral support.

Results
A total of 75 patients were studied. In 19.2% of cases the CR were successfully supplied.
In 72.6% of cases was insufficient compared to their estimated CR.
In the remaining 8.2% of cases the caloric intake exceeded their estimated CR.
23.2% of the patients studied were obese. In 76.5% of them, the prescribed caloric intake differed from the estimated CR, despite the body weight calculation being adjusted for these patients.

Conclusion
Our study showed that 80.8% of patients were not given sufficient nutritional support, missing their estimated CR.
It shows the lack of a structured protocol to addresses the nutritional assessment in surgical patients

Purpose
To describe and analyse possible shortcomings related to nutritional status of surgical patients associated with an inadequate prescription of parenteral nutrition (PN).