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## *Snapshot*

# NCP Step 2: Nutrition Diagnosis

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### **Definition:**

Nutrition Diagnosis is a nutrition and dietetics practitioner's identification and labeling of an existing nutrition problem(s) that the practitioner is responsible for treating. Nutrition diagnoses (eg, inconsistent carbohydrate intake) are different from medical diagnoses (eg, diabetes).

### **Determining a Nutrition Diagnosis:**

Nutrition and dietetics practitioners use standard nutrition diagnostic terminology to label the client's nutrition diagnosis(es) through organized nutrition assessment data that are clustered for comparison with defining characteristics list on the reference sheets. The eNCPT provides a reference sheet for each nutrition diagnosis that includes its definition, possible etiology/causes, and common signs or symptoms identified in the Nutrition Assessment step.

### **Terminology for Nutrition Diagnosis is organized in four domains (categories):**

<b>Intake Nutrition Diagnoses</b>	<b>Clinical Nutrition Diagnoses</b>	<b>Behavioral-Environmental Nutrition Diagnoses</b>	<b>Nutrition Situation</b>
<i>Too much or too little of a food or nutrient compared to actual or estimated needs</i>	<i>Nutrition problems that relate to medical or physical conditions</i>	<i>Knowledge, attitudes, beliefs, physical environment, access to food, or food safety</i>	<i>Nutrition related findings providing additional context relevant to a person's nutrition care.</i>

### **Communicating a Nutrition Diagnosis:**

Nutrition and dietetics practitioners write a PES (Problem, Etiology, Signs and Symptoms) statement to describe each problem, the root causes, and the assessment data that provide evidence for the nutrition diagnosis(es).

The format for each PES statement is "[Nutrition diagnosis term (problem)] related to [etiology] as evidenced by [signs/symptoms]."

<b>(P) Problem or Nutrition Diagnosis Term</b>  Describes alterations in the client’s nutritional status or contributing factors to alterations in the client’s nutritional status or contributing factors to alterations in the client’s nutritional status.	<b>(E) Etiology</b>  Cause/Contributing Risk Factors  Linked to the nutrition diagnosis term by the words “related to.”	<b>(S) Signs/Symptoms</b>  Data or indicators used to determine the client's nutrition diagnosis.  Linked to the etiology by the words “as evidenced by.”
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No nutrition diagnosis at this time (NO-1) may be documented if the assessment indicates that no nutrition problem exists to justify a nutrition intervention.

### **Guidelines for Writing a Clear PES Statement:**

When writing the PES statement, nutrition and dietetics practitioners can ask a series of questions that help clarify the nutrition diagnosis(es).

**P** – Can the nutrition and dietetics practitioner resolve or improve the client's nutrition diagnosis? When all things are equal and there is a choice between stating a PES statement using two nutrition diagnoses from different domains, consider the Intake nutrition diagnosis as the one more specific to the role of the RD/RDN.

**E** – Evaluate whether the etiology for each problem is the specific “root cause” that can be addressed with a nutrition intervention. If addressing the etiology cannot resolve the problem, can the RD/RDN intervention at least lessen the signs and symptoms?

**S** – Will measuring the signs and symptoms indicate if the problem is resolved or improved? Are the signs and symptoms specific enough to monitor (measure/evaluate changes) and communicate resolution or improvement of a nutrition diagnosis?

**PES Overall** – Do the nutrition assessment data support the nutrition diagnoses, etiologies, and signs and symptoms?

### **Critical Thinking Skills**

- Finding patterns and relationships among the data and possible causes

- Making inferences
- Stating each problem clearly and singularly
- Ruling in or ruling out specific diagnoses
- Identifying an etiology, and the etiology category to which it is assigned, for each problem that may be resolved, lessened, or managed by the intervention(s)
- Identifying signs and symptoms that are measurable or their change may be tracked
- Prioritizing identified problems

*\*Client refers to individuals, groups, populations, supportive individuals, and structures.*