Nutrition Care Process Model Tutorials

Nutrition Care Process and Terminology Committee
Academy of Nutrition and Dietetics

Nutrition Care Process Terminology
2015 Edition

Nutrition Monitoring & Evaluation: Examples in Two Case Studies

Objective

The objective of this presentation is to review and feature the use of nutrition monitoring & evaluation terminology in case study material. By the end of the module, the participant will be able to understand use of nutrition monitoring & evaluation terminology in two case examples:

- A 67 year old Hispanic male with heart failure
- An 8 year old white male child with iron deficiency anemia and food allergies

Case #1

Referral from Family Practice Clinic to RDN:

67 year old Hispanic male with Heart Failure

Case #1

Description of patient:

- 67 year old Hispanic male
- medical diagnosis of heart failure (diagnosed 2 months prior)
- retired engineer
- lives alone in apartment
- height: 5'6" ; weight: 135 lbs.
- weight loss of 20 lbs. from dyspnea
- inability to consume large meals
- unable to shop or cook
- 24-hour recall indicates he uses many frozen and processed foods; intake between 1000 – 1200 kcal/day

Case 1: Monitoring & Evaluation

During the intervention phase we chose to focus on the following PES statement for planning the nutrition intervention:

Inadequate oral intake related to inability to shop and cook as evidenced by a calorie intake of 500 kcal less than estimated requirements and 20 lbs. of weight loss in 2 months.

Nutrition Monitoring & Evaluation

Remember:

PES statements connect the nutrition assessment, nutrition intervention, and monitoring & evaluation steps.

- The **P**roblem states the nutrition diagnosis.
- The **E**tiology tells you what type of intervention is needed.
- The **S**igns and Symptoms tell you what needs to be monitored and evaluated.

Nutrition Monitoring & Evaluation

Inadequate oral intake related to inability to shop and cook as evidenced by a kcal intake of 500 kcals less than estimated requirements and 20 lbs. of weight loss in 2 months.

The RDN addressed the etiology of the patient's inability to shop and cook and provided a means for an increased kcal diet. During the monitoring & evaluation step the signs and symptoms of low kcal intake and weight loss can be effectively monitored.

Nutrition monitoring & evaluation

The signs and symptoms tell you what you will need to monitor and evaluate.

Inadequate oral intake related to inability to shop and cook as evidenced by a kcal intake of 500 kcals less than estimated requirements and 20 lbs. of weight loss in 2 months.

So, for this patient, the RDN will monitor & evaluate the kcal intake and weight change.

Nutrition Monitoring & Evaluation

For this patient the nutrition prescription is:

Referral to community agencies/programs (RC-1.6) for meal service of an Increased energy diet (ND-1.2.2.1)

Nutrition Monitoring & Evaluation

For this patient the terminology used for monitoring & evaluation is:

Total Energy Intake (FH-1.1.1.1)
Weight (AD-1.1.2)
Weight change (AD-1.1.4)

Nutrition Monitoring & Evaluation

Here the terms are shown in the hierarchy:

Domain: Food/Nutrition-Related History (FH)
Class: Food and Nutrient Intake (1)
Sub-Class: Energy Intake (1.1)
Sub-sub Class: Energy Intake (1.1.1)

- Record the *Total energy intake (FH-1.1.1.1)*:

Domain: Anthropometric Measurements (AD)
Class: Body composition/growth/weight history (1.1)

- Record the *Weight (AD-1.1.2)*:
- Record the *Weight change (AD-1.1.4)*:

Case #2

Referral from Pediatric Clinic to RDN – request for RDN consultation for assistance with meal planning

8 year old white male child with Fe deficiency anemia

Case #2

Description of patient:

- 8 year old white male child
- allergies to eggs and peanuts
- diagnosed with Fe deficiency anemia
- growth recently slowed with current BMI at the 30th percentile (44th percentile one year ago)
- food history questionnaire indicates an intake of 122 – 1500 kcal/day
- poor appetite
- food variety limited; intake of only 4 or 5 different foods.
- mother states he is more irritable and more fatigued than usual.

Mother requests assistance for planning bag lunches and other meals that will help her child gain weight.

Case #2: Monitoring & Evaluation

During the intervention phase we chose to focus on the following PES statement for planning the nutrition intervention:

Food and nutrition related knowledge deficit related to fear of allergens in foods as evidenced by poor appetite and reported intake of only 4-5 foods in 24 hour food recall, and stated concern about food allergies.

Nutrition Monitoring & Evaluation

Remember:

PES statements connect the nutrition assessment, nutrition intervention, and monitoring & evaluation steps.

- The **P**roblem states the nutrition diagnosis.
- The **E**tiology tells you what type of intervention is needed.
- The **S**igns and Symptoms tell you what needs to be monitored and evaluated.

Case #2: Monitoring & Evaluation

Food and nutrition related knowledge deficit related to fear of allergens in foods as evidenced by poor appetite and reported intake of only 4-5 foods in 24 hour food recall, and stated concern about food allergies.

The RDN addressed in the Nutrition Intervention step the food and nutrition related knowledge deficit, assistance with planning meals for bag lunches, and limited intake.

Nutrition Monitoring & Evaluation

The signs and symptoms tell you what you will need to monitor and evaluate.

Food and nutrition related knowledge deficit related to fear of allergens in foods as evidenced by poor appetite and reported intake of only 4-5 foods in 24 hour food recall, and stated concern about food allergies.

During the monitoring & evaluation step the RDN will monitor weight, weight change, calorie intake, food variety intake, and will re-assess the nutritional anemia profile during future visits.

Nutrition Monitoring & Evaluation

For this patient the nutrition prescription is:

Nutrition education for Nutrition relationship to health/disease (E-1.4) and Increased energy diet (ND-1.2.2.1)

Nutrition Monitoring & Evaluation

For this patient the terminology used for monitoring & evaluation is:

Total energy intake (FH-1.1.1.1)
Food variety (FH-1.2.2.5)
Height/length *(AD-1.1.1)*
Weight (AD-1.1.2)
Weight change (AD-1.1.4)
Growth pattern indices/percentile ranks *(AD-1.1.6)*:
Limited number of accepted foods (FH-5.4.9)

Nutrition Monitoring & Evaluation

Here are the terms shown in the hierarchy:

Domain: Food/Nutrition Related History (FH)
Class: Food and Nutrient Intake (1)
Sub-Class: Energy Intake (1.1)
Sub-sub Class: Energy Intake (1.1.1)
- Record the *Total energy intake (FH-1.1.1.1)*

Sub-Class: Food and Beverage Intake (1.2)
Sub-sub Class: Food Intake (1.2.2)
- Record the *Food variety (FH-1.2.2.5)*

Nutrition Monitoring & Evaluation

Here are the terms shown in the hierarchy:

Domain: Anthropometric Measurements (AD)
Class: Body composition/growth/weight history (1.1)

- Record the *Height/length (AD-1.1.1)*:
- Record the *Weight (AD-1.1.2)*:
- Record the *Weight change (AD-1.1.4)*:
- Record the *Growth pattern indices/percentile ranks (AD-1.1.6)*:

Nutrition Monitoring & Evaluation

Here are the terms shown in the hierarchy:

Domain: Food/Nutrition Related History (FH)
- Class: Behavior (5)
  - Sub-Class: Mealtime Behavior (5.4)
    - Record *Limited number of accepted foods (FH-5.4.9)*

Summary

In this presentation we have reviewed the nutrition monitoring & evaluation terminology for two case studies:

- A 67 year old Hispanic male with heart failure
- An 8 year old white male child with iron deficiency anemia and food allergies

Summary

This concludes the nutrition monitoring & evaluation tutorial, and is the final module in this set of Nutrition Care Process Model tutorials.

Instruction on obtaining CPE can be found within the "Resources" tab on the eNCPT Home Page by clicking "NCP Tutorials"

[http://ncpt.webauthor.com/encpt-tutorials]