



Nutrition Care Process Model Tutorials

Nutrition Care Process and Terminology Committee
Academy of Nutrition and Dietetics

Nutrition Care Process Terminology
2015 Edition




Nutrition Diagnosis: Examples in Two Case Studies



Objective

The objective of this presentation is to review and feature the use of nutrition diagnosis terminology and development of PES statements in case study material for two different patients. By the end of this module the participant will be able to understand use of nutrition diagnosis 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: Relevant Data



Determine the relevant nutrition assessment data:

Case #1



Relevant Nutrition Assessment Data for Nutrition Diagnosis:

- Weight loss of 20 lbs. in 2 months
- Shortness of breath
- Inability to consume large meals
- inability to shop or cook
- 24-hour recall indicates he uses many frozen and processed foods; intake between 1000 – 1200 kcal/day

Nutrition Diagnosis



What are potential PES statements for this 67 year old male based on the nutrition assessment data?

Nutrition Diagnosis



1. Inadequate energy intake related to shortness of breath as evidenced by 20 lbs of weight loss in 2 months.

Nutrition Diagnosis



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

Nutrition Diagnosis



PES statements connect the nutrition assessment, intervention, and monitoring and evaluation steps. The etiology tells you what type of intervention you need. The signs and symptoms tell you what you will need to monitor and evaluate.

Nutrition Diagnosis



Which PES statement is better?

Evaluate the PES Statement



Inadequate energy intake related to shortness of breath as evidenced by 20 lbs of weight loss in 2 months.

1. Can the RDN resolve the problem? Yes
2. Does the etiology make sense? Does it match the assessment data? Yes
3. Is there a reasonable intervention? Yes
4. Can you monitor this patient on the basis of the stated signs and symptoms? Yes

Evaluate the PES Statement



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.

1. Can the RDN resolve the problem? Yes
2. Does the etiology make sense? Does it match the assessment data? Yes
3. Is there a reasonable intervention? Yes
4. Can you monitor this patient on the basis of the stated signs and symptoms? Yes

Nutrition Diagnosis



Which PES statement is best?

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.

This PES Statement has an etiology or “root cause” that the RDN can impact, and leads to an intervention that he or she can specifically plan, and a sure method for monitoring and evaluating the patient’s progress.

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: Relevant Data



Determine the relevant nutrition assessment data:

Case #2



Relevant nutrition assessment data for nutrition diagnosis:

- Allergies to eggs and peanuts
- Fear of allergic reactions
- Food and Nutrition related knowledge deficit
- Diagnosed with Fe deficiency anemia
- Current BMI at the 30th percentile (44th percentile one year ago)
- Intake of 1200– 1500 kcal/day
- Poor appetite
- Food variety limited; intake of only 4 or 5 different foods.

Nutrition Diagnosis



What are potential PES statements for this 8 year old male child based on the nutrition assessment data?

Nutrition Diagnosis



1. Inadequate energy intake related to fear of allergic reactions as evidenced by underweight at the 30th percentile for height, weight, and age.

Nutrition Diagnosis



2. Inadequate iron intake related to fear of allergic reactions as evidenced by medical diagnosis of iron deficiency anemia.
-

Nutrition Diagnosis



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

Nutrition Diagnosis



PES statements connect the nutrition assessment, intervention, and monitoring and evaluation steps. The etiology tells you what type of intervention you need. The signs and symptoms tell you what you will need to monitor and evaluate.

Nutrition Diagnosis



Which PES Statement is best?

Evaluate the PES Statement



1. Inadequate energy intake related to fear of allergic reactions as evidenced by underweight at the 30th percentile for height, weight, and age.

1. Can the RDN resolve the problem? Yes
2. Does the etiology make sense? Does it match the assessment data? Yes
3. Is there a reasonable intervention? Yes
4. Can you monitor this patient on the basis of the stated signs and symptoms? Yes

Evaluate the PES Statement



Inadequate iron intake related to fear of allergic reactions as evidenced by medical diagnosis of iron deficiency anemia

1. Can the RDN resolve the problem? Yes
2. Does the etiology make sense? Does it match the assessment data? Yes
3. Is there a reasonable intervention? Yes
4. Can you monitor this patient on the basis of the stated signs and symptoms? Yes

Evaluate the PES Statement



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

1. Can the RDN resolve the problem? Yes
2. Does the etiology make sense? Does it match the assessment data? Yes
3. Is there a reasonable intervention? Yes
4. Can you monitor this patient on the basis of the stated signs and symptoms? Yes

Nutrition Diagnosis



Which PES statement is best?

Any of the three PES statements are accurate. There is a good chance that the inadequate energy intake and the inadequate iron intake will resolve along with addressing the food and nutrition related knowledge deficit. The signs and symptoms can be monitored in follow-up interviews.

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

Summary



In this presentation we have reviewed the nutrition diagnosis terminology and PES statements 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 diagnosis tutorial.

Please proceed to the nutrition intervention tutorial for the presentation of the planning of the nutrition interventions for both case studies.
