Nutrition Care Process (NCP)

By:

Trisha Patel, Amanda Bryan,

Amanda Sorum, Bonnie Broek

What is the Nutrition Care Process

- The Nutrition Care Process, also known as the NCP, as defined by the Academy of Nutrition and Dietetics is…
  - "systematic approach to providing high-quality nutrition care"
- The Nutrition Care Process provides the structure for customized care to be the most efficient plan in the RD's "toolbox" . The set framework of the model allows the RD to "fill in the blanks" for each patient.

Nutrition Care Process

-4 distinct, interrelated steps.

1. Nutrition assessment
    a. Data collected during the nutrition assessment guides the RD in selection of the appropriate nutrition diagnosis(es) (i.e., naming the specific problem). The

2. Nutrition intervention
    a. Root cause (or etiology) of the nutrition problem and aimed at alleviating the signs and symptoms of the diagnosis.

3. Nutrition Diagnosis

4. Monitoring & Evaluation
    a. Determine if the patient/client has achieved or is making progress toward the planned goals.

~If patient/client reveals another piece of new assessment data/information, that will cause the RD to re-assess, re-diagnose and perhaps modify the plan that he/she had started discussing with the client.
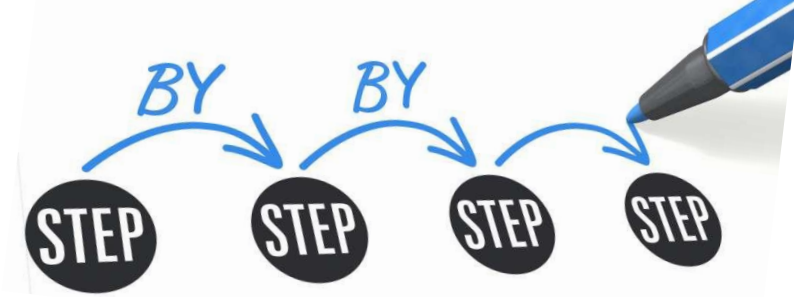
A.D.I.M.E

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A→ Assessment

The assessment is a dynamic and ongoing evaluation of data that includes medical, health, social, dietary, nutritional, medication, supplemental or herbal history, physical, anthropometrics, and laboratory. The purpose is to make professional judgement about nutrition status, and this is the foundation of nutrition care.

Assessment ABCD's

Anthropometrics

Physical measurements that can be compared to standards in order to reveal the nutritional status, growth, and health of an individual.

Ht., Wt., age, and gender are commonly used. Others?

This data provides the means to establish energy, protein, and fluid needs.

Biochemical

medical tests and procedures
May include Na, K, BUN, Creat, Gluc, LDL-chol, Alb, Prealb, or others.

According to this BMI chart . . . I am too short

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Assessment ABCD

Clinical

Physical exam conducted on the patient. The exam is used to assess everything from eyesight and reflexes to movement on the body and medical history.

Dietary

Dietary reports begin with a 24hr recall on what the patient has consumed. This assessment may include questionnaires, surveys, worksheets and more in order to obtain an accurate amount of food related history from the patient.

I'M GLAD YOU TOOK THE TROUBLE TO DIAGNOSE YOUR OWN SYMPTOMS USING THE INTERNET...AND YOU'D BE 100% ACCURATE...IF YOU WERE A GOAT!

A.D.I.M.E

D→Diagnosis

The purpose of the nutrition diagnosis it to identify and describe a specific nutrition problem that can be resolved or improved through treatment/nutrition intervention by a food and nutrition professional.

Categories

Intake: Too much or too little of a food or nutrient compared to actual or estimated needs.

Ex. Excessive Energy Intake [NI - 1.5]

Clinical: Nutrition problems that relate to medical or physical conditions.

Ex. Difficulty Swallowing [NC - 1.1]

Behavioral: Knowledge, attitudes, beliefs, physical environment, access to food, or safety

Ex. Disordered Eating Pattern [NB - 1.5]

Choose the Correct Diagnosis!

a. Inadequate energy intake NI-1.2

b. Excessive energy intake NI-1.3

c. Food- and nutrition-related knowledge deficit NB-1.1

d. Impaired ability to prepare foods/meals NB-2.4

P.E.S. Statement

-Names the nutrition problem (P)

-Identifies its cause (or etiology) (E)

-Lists the assessment data (signs and symptoms) (S) that justify the problem.

-Written as:

   Nutrition diagnosis term "*related to*" etiology "*as evidenced by*" signs and symptoms of the nutrition diagnosis.

EX: Inadequate energy intake *related to* food and nutrition-related knowledge deficit *as evidenced by* patient's/ client's food selections as recorded on food diary.

A.D.I.M.E

I→ Intervention

The intervention is the purposeful action of the RD aimed at improving the condition of the patient's nutrition diagnosis. They include interventions, such as, "nutrition related medication management," "nutrition education," and "nutrition counseling."

Goals must be:

-Measurable/ Realistically Attainable/Personalized
-Related to P.E.S. Statements in order to create unification throughout the NCP.

Choose the correct verbage for setting patient goals for the intervention:

a. Pt agrees to do everything RDN says because I said so.

b. Pt will walk out of office and forget everything discussed.

c. Pt agrees to try to....

d. Pt is clearly not in the correct stage of change and will fail miserably at any goal set.

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A.D.I.M.E

M→Monitoring
E→ Evaluation

Today I will begin my new lifestyle of healthy eating and exercise. Wait is that chocolate cake? Maybe I'll start tomorrow. Don't judge me.

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user card

THE FINAL TWO STEPS!

Plan set in motion by the nutrition professional is not only *appropriate* for that patient but *attainable* and m*aintainable.*

RD will assess whether the *goals and plan set in motion* is appropriate and how to adjust it as time passes.

Nutrition Monitoring: preplanned review and measurement of selected nutrition care indicators of patient/client's status

 Nutrition Evaluation: the systematic comparison of current findings with the previous status

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Monitoring & Evaluation:

3 Components

-Monitoring
-Measuring
-Evaluating

Monitoring:

Provide evidence that the nutrition intervention is *changing/not changing* patients behavior or status?

Measuring:

Measure outcomes by collecting data on *nutrition outcome indicators*

Evaluating:

Compare current findings to intervention goals/reference standards & EVALUATE overall impact

>Decide to discharge pt/ continue counseling

Monitoring & Evaluation

Monitoring

-Ensure patient understands goals and their importance. Not doing it "just because"

-Discuss problems, questions, and concerns with patients regarding goals.

-*Adhering?* Continue on path or Needs to change

-Continue to document, update data to patient's file and continue to measure in order to assess progress

Evaluating

-Compare *new data to old* & Compare the obtained results to the desired goals.

-Assess whether goals are being obtained, and if they are truly helping to improve the health of the patient.

-If not, discuss *alternatives.*

Monitoring & Evaluation:

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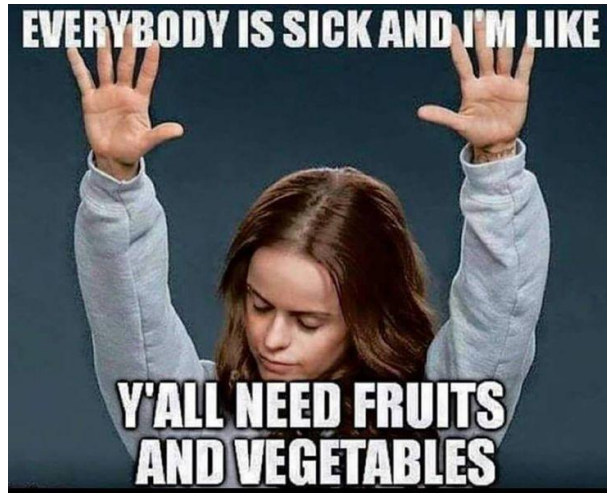
Don't forget...

-Monitor Progress

-Measure Outcome

-Evaluate Outcomes

-Document

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Impaired Renal Function Case Study

Anthropometrics:

Age: 24 yrs. old

Ht: 5 ft. 0 in. -- 60 in. -- 152.4 cm -- 2.32 m^2

Wt: 140 lbs. -- 63.6 kg

Gender: Female

BMI: 27.4 (overweight)

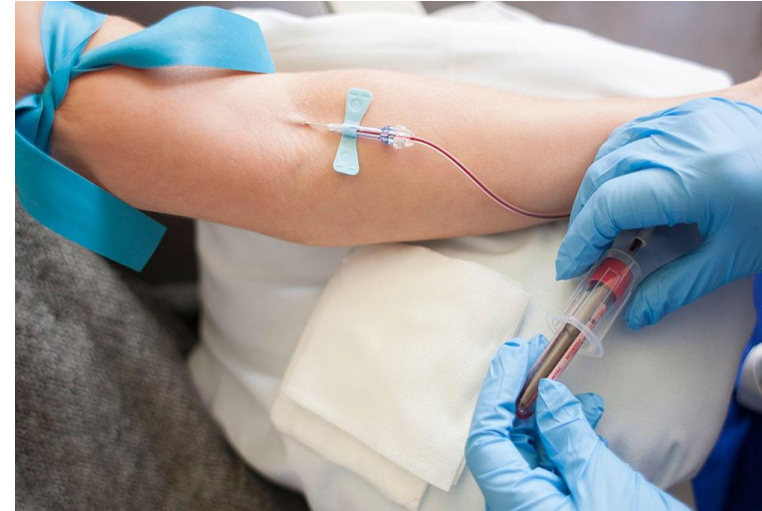**Biochemical Data:**

Glucose: 205

BUN: 80

Cholesterol: 443

TG: 300

HbA_{1C} : 8.2 H

GFR: 28 ml/min

Impaired Renal Function Case Study: Dietary Intake Assessment

Breakfast:
-Fried egg
-Fried bacon
-Fried potatoes
-Toast w/ butter

Lunch:
-2 tamales w/ chili con carne
-Fry bread
-1 can Coke

PM Snack:
-25 potato chips
-1 can Coke

Dinner:
-3 tacos made w/ ground beef, onion, tomatoes, lettuce & flour tortillas
-Coke

HS Snack:
-Peanut butter & crackers

What recommendations can we suggest for her to improve her dietary choices?

Impaired Renal Function: PES Statements

Problem: Altered nutrition-related laboratory values

<div align="center"><u>OR</u></div>

Food & nutrition related-knowledge deficit

Etiology: Alteration in GI fxn   **_<u>OR</u>_**   Renal failure

Signs & Symptoms: Abnormal GFR   **_<u>OR</u>_**   Edema & shortness of breath

Impaired Renal Function: PES Statements

Problem: Excessive carbohydrate intake

_OR_

Renal failure

Etiology: decreased energy needs **_OR_** diabetes mellitus

Signs & Symptoms: reported dietary intake & lab values

_OR_

High blood pressure

Thank You!

Good luck with the remainder of your semester and PNC appointments!