

Dietitian's Guide to **Assessment** and **Documentation**

Jacqueline C. Morris, RD, MPH, CDN

*Executive Director, Annex Nutrition Services
Elmsford, New York*



JONES AND BARTLETT PUBLISHERS

Sudbury, Massachusetts

BOSTON TORONTO LONDON SINGAPORE

World Headquarters

Jones and Bartlett Publishers
40 Tall Pine Drive
Sudbury, MA 01776
978-443-5000
info@jbpub.com
www.jbpub.com

Jones and Bartlett Publishers
Canada
6339 Ormindale Way
Mississauga, Ontario L5V 1J2
Canada

Jones and Bartlett Publishers
International
Barb House, Barb Mews
London W6 7PA
United Kingdom

Jones and Bartlett's books and products are available through most bookstores and online booksellers. To contact Jones and Bartlett Publishers directly, call 800-832-0034, fax 978-443-8000, or visit our website, www.jbpub.com.

Substantial discounts on bulk quantities of Jones and Bartlett's publications are available to corporations, professional associations, and other qualified organizations. For details and specific discount information, contact the special sales department at Jones and Bartlett via the above contact information or send an email to specialsales@jbpub.com.

Copyright © 2011 by Jones and Bartlett Publishers, LLC

All rights reserved. No part of the material protected by this copyright may be reproduced or utilized in any form, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without written permission from the copyright owner.

The author, editor, and publisher have made every effort to provide accurate information. However, they are not responsible for errors, omissions, or for any outcomes related to the use of the contents of this book and take no responsibility for the use of the products and procedures described. Treatments and side effects described in this book may not be applicable to all people; likewise, some people may require a dose or experience a side effect that is not described herein. Drugs and medical devices are discussed that may have limited availability controlled by the Food and Drug Administration (FDA) for use only in a research study or clinical trial. Research, clinical practice, and government regulations often change the accepted standard in this field. When consideration is being given to use of any drug in the clinical setting, the health care provider or reader is responsible for determining FDA status of the drug, reading the package insert, and reviewing prescribing information for the most up-to-date recommendations on dose, precautions, and contraindications, and determining the appropriate usage for the product. This is especially important in the case of drugs that are new or seldom used.

Production Credits

Publisher: David Cella
Acquisitions Editor: Katey Birtcher
Associate Editor: Maro Gartside
Editorial Assistant: Teresa Reilly
Senior Production Editor: Renée Sekerak
Production Assistant: Jill Morton
Marketing Manager: Grace Richards
Manufacturing and Inventory Control Supervisor: Amy Bacus

Composition: Abella Publishing Services
Cover and Title Page Design: Scott Moden
Cover Image: © Designus/Shutterstock, Inc.
Printing and Binding: Malloy Incorporated
Cover Printing: Malloy Incorporated

Library of Congress Cataloging-in-Publication Data

Morris, Jacqueline C.

Dietitian's guide to assessment and documentation / by Jacqueline C. Morris.
p. ; cm.

Includes bibliographical references and index.

ISBN-13: 978-0-7637-7851-4

ISBN-10: 0-7637-7851-6

1. Nutrition--Evaluation. 2. Medical history taking. I. Title.
[DNLM: 1. Nutrition Assessment. 2. Diet Therapy--methods. 3. Medical History Taking. 4. Nutritional Physiological Phenomena--physiology. 5. Patient Education as Topic. QU 146.1 M872d 2011]
RC621.M67 2011
613.2072--dc22

2009044805

6479

Printed in the United States of America

14 13 12 11 10 10 9 8 7 6 5 4 3 2 1

Contents

	Foreword	vii
	Preface	ix
	Introduction	xi
	Acknowledgments	xiii
	About the Author	xv
	Reviewers	xvii
PART 1	Identifying the Problem: Collecting and Analyzing the Evidence	1
Chapter 1	Chart Review	3
	Medical Diagnosis	4
	Surgical Review and History	5
	Weight History	12
	Skin Integrity	15
	Gastrointestinal Review	17
	Cardiovascular Review	28
	Psychiatric Review	33
	Infectious Diseases	34
	Musculoskeletal Review	40
	Psychosocial Review	41
	Pulmonary Review	41
	Biochemical Data Review	43
	Review of Medications	43

Chapter 2	The Interview	59
	Obtaining Diet History	60
	Obtaining Weight History	61
	24-Hour Recall	62
	Food Frequency Questionnaire	62
	The Relationship Between	
	Race/Ethnicity and Diseases	63
	Understanding Culture and Dietary Practices	64
	Religion and Food Practices	66
	The Use of Herbal Supplements	69
	Food Allergy and Intolerance	74
Chapter 3	Objective Tools to Collect Information for Assessment	81
	Direct Observation Study	81
	Calorie Count Study	82
	Body Mass Index	85
	Waist Circumference and Waist-to-Hip Ratio	86
	Body Fat Percentage	86
	Indirect Calorimetry	88
	Nitrogen Balance	89
	Bone Mineral Density Test	90
Chapter 4	Assessment During Pregnancy and Lactation	93
	Dietary Assessment of the Pregnant Woman	93
	Nutritional Needs of the Pregnant Woman	96
	Weight Gain During Pregnancy	98
	Risk Factors for Fetal Growth Retardation	99
	Complications in Pregnancy and	
	Dietary Intervention	100
	Lactation	103
Chapter 5	Pediatric Assessment	107
	Assessing the Newborn	107
	Nutritional Care of the Low-Birthweight Infant	108
	Assessing the Full-Term Infant	112
	Failure to Thrive	112
	Mental Retardation and	
	Developmental Disability	116

	Inborn Errors of Amino Acid Metabolism	117
	Eating Disorders in Children and Adolescents . . .	119
	Pediatric Obesity	123
PART II	Solving the Problem: Creating a Plan of Care	129
Chapter 6	Determining Nutrient Requirements and Writing the Care Plan	131
	Determining Fluid Needs	132
	Creating a Plan of Care	134
Chapter 7	Patient Teaching	145
	Writing Learning Objectives	149
	Evaluating Patient Teaching	149
Chapter 8	Diet Teaching for Specific Medical Conditions . . .	153
PART III	Documentation	169
Chapter 9	The Legal Aspects of Documentation	171
	Why Document?	171
	The Purpose of Documentation	171
	The Medical Record as a Legal Document	172
	Common Documentation Issues in Malpractice Lawsuits	172
	General Information Regarding Documentation . . .	174
	Mechanics of Good Documentation	176
	Documentation Using the Nutrition Care Process . .	178
	Appendix	181
	Approved Abbreviation List for Some Common Diagnoses and Terms	181
	Index	193

Foreword

This book does not pretend to encompass all aspects of general nutrition. Nevertheless, the author, driven to face with confidence the daily challenges of clinical nutrition, has embarked on arduous work that results in a very concise, yet comprehensive resource aimed at the generalist, dietitian or nutritionist, gastroenterologist, and student.

The objective is to bring forward current and emerging evidence regarding nutrition assessment and documentation. For example, obesity has attained epidemic proportions worldwide. In the United States, more than 30% of adults and 15% of children are obese and consequently are at risk for more than 36 different medical conditions. Premature deaths from obesity are approximately 300,000 annually; consumer expenditures for weight loss products are \$45 billion; healthcare expenses for obesity are more than \$100 billion per year. Malnutrition, on the other hand, although less prevalent than obesity, is a serious clinical issue in patients with HIV infection and other chronic clinical conditions such as liver cirrhosis.

These facts prompted a revolution in methods of nutritional assessment of the individual, and dietary and nutritional interactions with the disease aimed at changing the natural history and improving the quality of life. This process continues to evolve.

Jacqueline Morris has spent countless hours compiling the evidence to provide an efficient and meaningful learning experience. The book is organized into nine chapters, and elegantly provides information on core methods of nutritional assessment, diagnosis, approaches to management of weight gain and malnutrition, nutritional support, efficient documentation, and reasonable prevention. A full table of contents and references

are provided for the convenience of the reader. I am certain readers will enjoy this book and find it extremely useful in designing nutrition assessments and documenting the nutrition health of individual patients.

Prospere Remy, MD

Chief, Gastroenterology and Liver Disease
Bronx Lebanon Hospital Center
Bronx, New York



Preface

Delivering nutrition care to your patient is a four-step process as outlined by the American Dietetic Association's Nutrition Care Process:

1. Nutrition assessment
2. Nutrition diagnosis
3. Nutrition intervention
4. Nutrition monitoring and evaluation

Before you identify the problem or potential nutrition risk(s), it is important that you first review the medical chart, which gives information about the patient: diagnosis, social history, medical history, medication, laboratory data and assessment, and evaluations performed by other medical/clinical personnel. Reading the notes of other clinicians who have documented information about the patient provides necessary context for effective management of the condition(s) being assessed. Dietitians in private practice obtain this information from the referring physician and the patient or family.

The next step is to interview the patient to obtain diet history and other pertinent data to determine a solution to the existing problem or means by which to reduce the risk of a potential problem. With a chart review and patient interview, you can identify the nutrition problem and its etiology and provide nutrition intervention to address that problem.

To provide the appropriate intervention to meet the nutritional needs of the patient, you must have a clear understanding of the medical diagnosis and its nutritional implications. Once intervention is initiated, you must carefully monitor the patient to ensure that goals are met and the desired outcome is achieved.

Documenting findings, interventions, and outcomes in the medical record is critical to the nutrition care process—notes should paint a clear

picture without ambiguity. Details of proper documentation and steps in the delivery of nutrition care to the patient are covered throughout this book.

I have had the opportunity to present this topic to dietitians on multiple occasions and was quite impressed with the outcome of the evaluations. I believe it is helpful to have this information available to everyone in the field of dietetics and nutrition, especially new dietitians. It can also sharpen the skills of those already in practice. The materials in this book have been carefully reviewed by physicians and peers, and I hope you will find it a useful and helpful resource.

Introduction

The dietitian plays a critical role in the delivery of care to the patient. As an integral part of the healthcare team, you are responsible for helping to maintain good health and quality of life for the patients and clients you serve so well. You are more than just the “food person” that many make you out to be. You consult with physicians and other healthcare professionals to ensure the best possible outcome for their patients. However, as you execute your duties and responsibilities as a dietitian, it is extremely important that you keep abreast of the ever-changing science of medicine and nutrition because some information that you learned in school is no longer applicable today. You must have a working knowledge of the disease state that is being assessed.

To provide patients and clients with optimal care, dietitians must go below the surface and think like investigators, which is what they really are. The dietitian’s work can be described as that of a “nutritional status investigator.” While investigating the nutritional status of your patients/clients and implementing care, you must be careful to document with the law in mind because you never know when you will be called to defend what you wrote. Good documentation can keep you out of court as well as defend you in an investigation or a malpractice lawsuit.

The purpose of this book is to give details of the components of nutrition care assessment, referred to by the American Dietetic Association as the Nutrition Care Process, and to provide information on the legal aspects of documentation. It is intended to be used in collaboration with other texts that outline the nutrition care process as indicated by the American Dietetic Association. You are probably quite familiar with the phrase “if it is not documented, it was not done.” This book will help you avoid the pitfalls of improper documentation.

This book also provides an overview of common diseases and their effect on nutritional status, as well as a clear understanding of biochemical data and categories of medications as they relate to health and diseases. Included in this book you can find important information on patient teaching for specific medical conditions and acceptable abbreviations used in health care.

Acknowledgments

I would like to personally thank my friends, colleagues, and family whose support and encouragement made the publication of this book possible.

I would like to thank Sarah Barnes, my fellow dietitian, who first recommended me to speak on the topic of nutrition assessment and documentation to a group of more than 200 dietitians at the League 1199 Training and Upgrading Fund in 2005. This opportunity gave me the confidence to pursue writing this book, which is to be made available to new dietitians and to sharpen the skills of those with years of practice in dietetics and nutrition.

Special thanks to those who reviewed and edited the contents of this book. I am especially grateful to Prosper Remy, MD, chief of Gastroenterology and Liver Disease, Bronx Lebanon Hospital Center; Karen Formato, RD, director of Clinical Nutrition, Bronx Lebanon Hospital Center; MaryAlice Laub, RD, CNSD; Richard Tennant, RN; Maurice Harbon, PharmD; Geoffrey Lord, PharmD; and Arlene Spark, EdD, RD, FADA, FACN, coordinator of Nutrition at Hunter College.

I would like to acknowledge two of my good friends, Vixton Dixon and Samuel King, who always believed in me and provided support in the establishment of Annex Nutrition Services.

Thanks to my mom, Dorothy Brady, for her prayerful support; my dad and siblings, for being there for me. Thanks to my step-son, Matthew, for helping with the typing.

I especially want to thank Claudette Beckford, LD, and Sarah Addoyobo, RD, CDN, MS, from Richmond Strategy, Inc. (formerly Richmond Children Center) for giving me my first opportunity to practice dietetics in New York. Thanks also to my preceptors at Danbury Hospital where I completed my dietetic internship.

Last, I would like to thank my patients, former employers, and current clients, who gave me the opportunity to grow and expand my expertise. I learned a lot from both my patients and colleagues.

About the Author



Jacqueline C. Morris, RD, MPH, CDN, hails from the beautiful island of Jamaica, where she started her career in dietetics and nutrition. She graduated from the University of Technology in 1986 with an associate degree in Food, Nutrition, and Dietetics. She worked as an assistant dietitian at Falmouth Hospital and taught food and nutrition to high school students.

In 1993, she migrated to the United States, where she pursued her bachelor's degree in nutrition at Lehman College and later earned a Master of Public Health degree from New York University.

She was the editor of the *Beth Israel Cancer Center Newsletter*, to which she also contributed several nutrition articles, including “‘Phyte’ Back with Phytochemicals.” She worked as a clinical nutrition manager at the Bronx Lebanon Special Care Center for a number of years and developed educational materials for both staff and patients.

In 2003, Ms. Morris started her own consulting firm, Annex Nutrition Services, in Elmsford, New York. Annex Nutrition Services offers continuing education credits to dietitians, nurses, dietetic technicians, and students, as well as private counseling both at home and in the office setting. Ms. Morris works in collaboration with other companies to provide wellness programs at the corporate level and is a service provider for various healthcare agencies.

Reviewers

Jo Carol Chezem, PhD, RD

Associate Professor of Nutrition
Ball State University
Muncie, IN

B. J. Friedman, PhD, RD, LD

Professor, Director, Texas State Dietetic Internship
Texas State University
San Marcos, TX

Kathleen M. Laquale, PhD, ATC, LAT, LDN

Professor
Bridgewater State College
Bridgewater, MA

Tania Rivera, MS, RD, LD/N

Assistant Clinical Professor
Florida International University
Miami, FL

