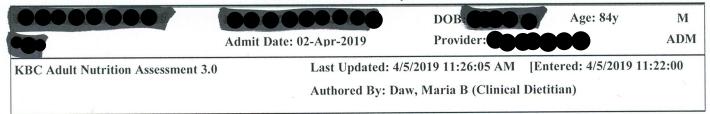
DeKalb Medical

Documents Review Report

Include Correction History: 0



Comment: RD

General Information

General Information

Reason for Admission/Chief Complaint: Rectal Bleed, Confusion

Diagnosis: PMH: CAD + AAA repair + CABG, HTN, T2DM, HTN, HLD, Prostate Cancer

Reason for Assessment: identified at risk by screening criteria; MST score of 4 with unintentional 14-23# wt loss

At Risk Screening Criteria: weight loss unintentional

Screen by Dietitian: Initial assessment

Current Diet: NPO

Anthropometrics

Height

Height (ft) Height (ft): 6 ft

Height (remainder in inches) Height (in): 3 inch(es)

Height (cm) Height (cm): 190.5 cm

Current Weight

Weight (kg) Weight (kg): 68.1 kg Weight (lbs) Weight (lbs): 150.1 lb

IBW (Ideal Body Weight)

Ideal Body Weight (kg) Ideal Body Weight (kg): 89.1 Ideal Body Weight (lbs) Ideal Body Weight (lbs): 196 % of Ideal Body Weight % of Ideal Body Weight: 76

UBW (Usual Body Weight)

Usual Body Weight (kg) Usual Body Weight (kg): 83 Comment: UBW on 10/27/2018 per EMR Usual Body Weight (lbs) Usual Body Weight (lbs): 183 Usual Body Weight (%) % of Usual Body Weight: 82

BMI (Body Mass Index)

BMI (kg/m2) BMI (kg/m2): 18.7

Body Mass Index BMI Grade: 18.5 - 24.9 - Normal Percent of Weight Change Weight Change (%): 17.95

Unintentional Weight Change: yes

Time Period Related to Weight Change: 5 months

Diagnostic Tests/Procedures

Requested By: Daw. Maria B (Student) Printed From: DK P Nut Svcs (DKGNSRP3)

Apr-05-2019 16:25

Page: 1 of 3

DeKalb Medical **Documents Review Report**

Include Correction History: 0

MRN:
Admit Date: 02-Apr-2019

By DOB Age: 84y

ADM

ADM

KBC Adult Nutrition Assessment 3.0

Last Updated: 4/5/2019 11:26:05 AM [Entered: 4/5/2019 11:22:00]

Authored By: Daw, Maria B (Clinical Dietitian)

Lab Results

Lab Results Reviewed: yes Lab Results: POC 175; (4/3) BUN 26, Ca 8.1

Medications

Medications

Reviewed: yes Medication Comments: Pepcid, NS@125mL/hr. PRN: Dulcolax, Tums, SSI, Zofran

Physical Assessment

Physical Assessment

Gastrointestinal: pt c/o sore throat; LMN x1/incontinent (4/5)
Physical Findings: NFPE findings: severe fat loss (triceps/biceps, thoracic); severe muscle loss (temples, clavicle/pectoralis, clavicle/acromion)

Calorie Requirements

Mifflin-St. Jeor Equation

Comments: 2043-2384 kcal/day (30-35 kcal/kg ABW, cancer/malnutrition)

Protein Requirements

Protein Recommendations: 82-102 g/day (1.2-1.5 g/kg ABW, cancer/malnutrition)

Fluid Requirements

Fluid Recommendations: 1 mL/kcal/d or per MD

Carbohydrate

Carbohydrate Recommendations: 45-55%

Feeding/Nutrition Therapy

Feeding/Nutrition Therapy Analysis

Kcal and Protein Intake: not meeting kcal needs; not meeting protein needs

Fluid Intake: not meeting assessed needs

Requested By: Apr-05-2019 16:25 Daw. Maria B (Student)

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Page: 2 of 3

DeKalb Medical

Documents Review Report

Include Correction History: 0

MRN: DOB DOB Age: 84y M
Admit Date: 02-Apr-2019 Provider: ADM

KBC Adult Nutrition Assessment 3.0 Last Updated: 4/5/2019 11:26:05 AM [Entered: 4/5/2019 11:22:00

Authored By: Daw, Maria B (Clinical Dietitian)

Tolerance: n/a

Nutrition Diagnosis

Malnutrition Diagnosis: E43-Unspecified severe-protein-calorie malnutrition

Nutrition

Nutrition Diagnosis: Severe protein-calorie malnutrition

Related to: chronic illness (cancer, CAD)

Sign(s) & Symptom(s): 18% unintentional weight loss over 5 months; severe fat loss (triceps/biceps, thoracic);

severe muscle loss (temples, clavicle/pectoralis, clavicle/acromion)

Interventions: advance diet to consistent CHO/Diabetic ADA Diet as medically feasible and tolerated or per MD

Nutrition Services - Acuity: At Risk

Nutrition Services - Next Visit: 4/8-4/9 - Maria

Monitoring/Evaluation: advancement of diet, weight, labs, POC

Goal Communication

Mutually agreed upon goal(s): Pt will not lose any additional weight during LOS.Pt will advance to PO diet as tolerated within 3 days.

Outcome Summary

Outcome Summary (Overall): Nutriton assessment for MST score of 4 with unintentional weight loss. Patient states he has been continuously losing wt over several months, but was found to be a poor historian; reported UBW indicates a weight gain that is not consistent with EMR weight history. Patient c/o sore throat and was difficult to understand. Patient states PTA to admit, he had someone cooking 3 meals/day for him for 4 days/week; PO intake PTA is uncertain. Patient received NGT yesterday for possible future TF. NFPE revealed severe muscle and fat loss. Patient meets criteria for severe protein calorie malnutrition per ASPEN guidelines. Dietetic Intern will continue to monitor patient per protocol. Assessed by: Maria Daw, Dietetic Intern. Approved by

Requested By: Daw. Maria B (Student) Printed From: DK P Nut Svcs (DKGNSRP3)

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