

# Nutritional assessment for health development



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The primary purpose of this paper is to perform an in-depth analysis of a patient's diet, detailing the different components and how they may correlate with said patient's medical diagnoses. The information contained herein was gathered by the author, a student nurse, by way of a verbal interview and extensive information gathering surrounding the patient's admittance to a hospital. Afterwards, this paper will explore how alterations in the patient's diet may help improve the patient's overall health, whether it be through diminishing symptoms of disease or preventing further disease development.

### **Typical Day's Diet**

Starting with breakfast, the patient states he typically eats a large meal consisting of plain black coffee (no cream or sugar) with an occasional single 12 milligram packet of artificial sweetener such as sucralose, two to three homemade waffles approximately seven inches in diameter at 75 grams each, totaling 150 grams for two or 225 grams for three, topped with a total of two tablespoons of butter and three tablespoons of reduced sugar syrup. During lunch, the patient stated they enjoy eating a homemade sandwich consisting of two slices of whole wheat bread totaling 56 grams, four slices of turkey at 51 grams total, a single large tomato slice for 16 grams, two tablespoons of low-fat mayonnaise, and one tablespoon of yellow mustard. On the side, the patient often includes one cup of potato salad for 250 grams or a serving of potato chips at one ounce for a smaller side. The patient stated that he oftentimes does not eat dinner due to eating lunch later in the day, but if he did, he prefers going to a nearby restaurant to eat. He stated that he usually orders a five-ounce breaded and fried chicken breast, with a

green side salad between two and three cups, topped with one tablespoon of ranch dressing. When asked about snacks, the patient stated he is partial to a small portion of mixed nuts totaling one ounce, or fruits such as apples, navel oranges and strawberries. Previously, the patient regularly drank eight ounces of sweet tea as well as other sugary drinks such as soda and orange juice, but shortly before his hospitalization he began to back due to medical advice. Besides that, the patient drinks anywhere from 32 to 48 ounces of water per day.

### **Nutritional Components of Diet**

The combined nutrition of the patient's typical daily breakfast can be measured as approximately 565. 2 calories, 34 grams of fat (11. 7 grams saturated fat, 22. 3 grams unsaturated fat), 104 grams of cholesterol, 766 milligrams of sodium, 238. 4 milligrams of potassium, 55. 8 grams of carbohydrates (5. 4 grams of sugar), 12. 6 grams of protein, and 30% of the daily recommended intake of calcium. For lunch, the patient eats an average 682 calories, 34 grams of fat (5. 9 grams saturated fat, 28. 1 grams unsaturated fat), 216 milligrams of cholesterol, 1. 7 grams of sodium, 869 milligrams of potassium, 57 grams of carbohydrates (3. 8 grams of sugar), 27. 7 grams of protein, and 10. 9% of the daily recommended intake of calcium. If the patient chooses to eat dinner, he may consume around 448. 5 calories, 24. 7 grams of fat (6 grams saturated fat, 18. 7 grams unsaturated), 123 milligrams of cholesterol, 551 milligrams of sodium, 531. 5 milligrams of potassium, 18. 1 grams of carbohydrates (2. 5 grams of sugar), 36. 4 grams of protein, and 5. 4% of the daily recommended intake of calcium. Finally, the sugary drinks the patient has claimed he regularly ingests contribute a

significant portion of sugar to his daily diet. If he drinks one eight-ounce glass of orange juice and one 12-ounce can of soda in a day he will increase his daily sugar intake by 60 grams.

### **Medical Diagnoses/Diet**

The patient being interviewed is a diagnosed diabetic and as such he has been encouraged by his physician to eat a diet with decreased levels of sugar when compared to an average adult male diet. The patient has also been diagnosed with hypertension, meaning his heart health is at risk if he does not maintain a proper diet. The patient was admitted to the hospital due to complaints of vertigo and was subsequently diagnosed with a subdural hematoma. Upon drawing labs, it was found that the patient had an elevated blood glucose level averaging 155mg/dL over a 24-hour period. The patient was subsequently placed on a sugar-restricted diet and stated his desire to continue on said diet once released. The patient is underweight with a BMI of 16.6 and stated that he has been unintentionally losing weight leading up to his hospitalization, which he attributes to a decreasing appetite causing him to eat less compared to his average diet. Despite being underweight, the elevated blood glucose levels of the patient suggest that he is ingesting well over the daily amount of sugar recommended for someone with diabetes. With these factors in mind, the student nurse recommends a continued decrease in the amount of sugar in the patient's daily diet, even upon returning home. Substituting his regular sugary drinks (soda and juice) for water or other non-sugary drinks may help significantly. Continuing to eat foods low in sugar and regular self-monitoring of his blood glucose levels may help prevent further complications from diabetes. Aside

from decreasing and maintaining a low sugar intake, the student nurse also recommends the patient to decrease their sodium intake in the interest of cardiovascular health. According to the American Heart Association, the maximum recommended intake of sodium per day is 2300 milligrams, with an ideal level of no more than 1500 milligrams (American Heart Association, 2018). Adding up the sodium content of the patient's diet, he is ingesting more than 3000 milligrams per day, well over the recommended amount. The student nurse recommends the patient look for ways to decrease sodium intake by looking for reduced sodium substitutes for everyday foods.

#### **Compare/Contrast**

A side-by-side comparison of the patient's diet and what is recommended for an elderly male with diabetes would show several major differences. As mentioned previously, a large change that should be made is the removal of sugary drinks in an effort to become compliant with a diabetic health plan. This means the removal of soda entirely, and avoiding fruit juices with added sugar. In a diabetic patient, even too much fruit or fruit juice can contribute to hyperglycemia. If the patient has trouble removing soda from his diet, unsweetened or lightly sweetened carbonated water is an option. Soft drinks that are considered diet beverages (those with artificial sweeteners) are also a possible alternative. Research into the full effects of these sweeteners is still ongoing, but the scientific consensus is that "nonnutritive sweeteners approved for use by the U. S. Food and Drug Administration (FDA), such as saccharin, aspartame, and acesulfame K, are considered safe for consumption by individuals with diabetes" (Grodner, Escott-Stump, & Dorner, 2016, p. 333). Next, the reduction of sodium in the patient's diet is highly encouraged. Recipes, even those for waffles and potato salad, often call for

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the use of salt. Looking for recipes that reduce or remove added salt entirely will help maintain a dietary sodium budget. Many processed foods are laden with added salt for its preservative and flavoring properties. Reading nutrition labels while grocery shopping will help the patient highlight foods they may need to avoid, and choosing low-sodium alternatives that are available in grocery stores nationwide is the suggested substitution. This is not to say that all of his dietary choices must be modified. The patient's protein-intake is well within defined parameters as "the Recommended Dietary Allowance (RDA) for protein is a modest 0.8 grams of protein per kilogram of body weight" (Pendick, 2015). This means foods like chicken, tuna, and cottage cheese would be a welcome part of the patient's diet.

#### Modifications

Given the information above, the patient should adhere to a strict, heart-healthy, and nutritious diet which avoids several foods and drinks that he previously made part of his everyday routine, namely those high in sodium or sugar. The student nurse believes it may be beneficial to the patient to visit a physician regularly and form a permanent diet plan in order to best facilitate the transition into a healthier lifestyle. With some modifications, many of the patient's favorite foods will still be able to be enjoyed. Many foods, including snacks such as mixed nuts, come in 'no salt added' options. Because tree nuts are rich in several nutrients, this would be a good component to keep around in the patient's diet. Some of the other snacks the patient enjoys, like potato chips, should be cut back on or eliminated entirely. Most potato chips are laden with salt, although low-sodium alternatives do exist. Grilled chicken as opposed to fried chicken will help decrease saturated fat and sodium content in the patient's diet, removing

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seasoning salt and high fat oils used to fry and flavor the chicken. Many companies have strived to create low or no-sugar carbonated alternatives to soda, and these are available in almost any grocery store. The patient should continue to enjoy nutrient-rich fruits, as it is important not to completely remove sugars because this can lead to hypoglycemia. Vegetables, such as those found in side salads, should also remain a regular part of the diet, perhaps becoming an even more common component of the patient's meals as opposed to potato chips or other snack-like items.

## Conclusion

With all of this in mind, the patient will be well on his way to leading a healthier lifestyle and doing what he can to prevent further complications from his diagnoses. Armed with the knowledge required to make proper choices and with continuous support from his doctor, his family, and himself, the patient's dietary health can only improve. As is the case with many diabetics who have struggled with their diet, the patient should consult with a dietician in order to ensure he is keeping up with his regimen, and that any questions he has regarding his diet can be properly answered. These dietary changes may take time to adapt to, but will be well worth it in the end.

## References

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