

I. Identifying data

- A. First name: Talia
- B. Description of the child : Healthy, blonde hair, brown eyes, discolored front teeth due to trauma, strong skeletal development, skin and muscle turgor are good.
- C. Economics environment, interaction with siblings and parents, time with babysitters or in day care: She is full of energy! She spends most of her time playing with her 2 older brothers when they aren't in school and she helps entertain her baby brother. She has a fairly big house/yard to play in and her parents are financially stable. She doesn't go to day care and they rarely have babysitters.

II. Health history

- A. Sex of child: Female
- B. Age of child: 4 years 3 months
- C. Birth anthropometrics (of child):
 - (1) Birth weight was 8 lbs, between the 75th and 90th percentile
 - (2) Birth length was 19 in, between the 25th and 50th percentile
- D. Current anthropometrics (of child):
 - (1) Currently 35 lbs, right on the 50th percentile
 - (2) Currently 40 in, between the 50th and 75th percentile
- E. Number of siblings and their ages: 3 brothers; 8 years, 6 years, and 12 months
- F. Mother's obstetrical history - weight gain, term, parity: She was delivered 8 days late. The mother had 2 previous deliveries and experienced normal weight gain during pregnancy.
- G. Child's history of illnesses (including any chronic diseases): None
- H. Child's current use of medications, fluoride treatments?: Just toothpaste
- I. Child's dental history: No dental visits
- J. Child's allergies, other food intolerances: None

III. Developmental skills assessment

- A. Summarize your findings from the DDST using the following format
 - (1) "No opportunity" items: Define 7 words, Define 5 words
 - (2) "Caution" items: None identified
 - (3) "Delayed" items: None identified
 - (4) Interpretation of test: Talia passed nearly every test given. Her development would be categorized as "normal." There are no concerns with the child's development.

IV. Nutritional assessment

A. 24 hour recall:

Breakfast: ½ cup 1% milk

Lunch: ½ ham sandwich with provolone cheese, ham, lettuce & mayonnaise on whole wheat bread. ½ apple

Dinner: Grilled cheese sandwich with cheddar cheese, ½ cup carrots and 1 cup tomato soup

Snacks: 1 Granola bar, 2 Graham crackers, 1 cup milk, 2 laffy taffy candies

B. **SUMMARIZE:**

1. Macronutrient distributions:

- Carbohydrate: 46% (OK)
- Fat: 38% (Over)
- Protein: 18% (OK)

2. Food group equivalents:

- Grains: 5 ½ oz (OK)
- Vegetables: 1 ¼ c (OK)
- Fruits: 1 c (Under)
- Dairy: 3 cups (Over)
- Protein: 2 oz (Under)
- Oils: 2 teaspoon (Under)

3. Vitamins & minerals:

- Low in Fiber, potassium, folate, choline, and vitamins D, E, and K

C. Parental description of food habits: She is not picky at all, salad is the only thing she doesn't like very much but she will eat it. She would rather snack throughout the day instead of eating a lot during mealtimes, but her mother works to prevent that as best she can. Quesadillas are a favorite food and are easy for the mother to make.

D. Parental description of typical family meal times: They sit down at the table together for family dinner at least 6 nights a week. Breakfast and lunch are not as structured; they generally eat around the same time but might not all be together.

E. Child's intake of vitamin/mineral supplements: She takes a multivitamin every few days

F. Use of food assistance programs like WIC, SNAP, food bank, church resources, etc.: None

V. Nutritional care plan and implementation

- A. The 24 hour recall showed that she was eating fewer calories than recommended. The day recorded may have been an irregular day or the mother may have forgotten something, but it came to 100 calories fewer than recommended. The child's growth is normal so this isn't a big concern. The child only consumed half the amount of recommended protein sources and oil sources. Fruit consumed was slightly less than recommended, and dairy was slightly more than recommended. Fiber was low by 10 grams, which is a concern because fiber is an important element in digestion. Not getting enough fiber can lead to poor blood sugar control and digestion problems such as constipation, diverticular disease and hemorrhoids. She was also low in potassium, folate, choline, and vitamins D, E, and K which are all important in growth and can cause problems if deficient for long periods of time.
- B. I will explain the importance of fiber and recommend sources to increase such as incorporating more fruits, vegetables, and whole grains. Beans and nuts are also good sources of fiber, and could also increase her amount of foods from the protein group. Her multivitamin is good for incorporating vitamins and minerals that she is low on, but I would tell the mother to make sure that these at-risk nutrients are included. I would explain the importance of each vitamin/mineral and list food sources of each. Broccoli, spinach, and kale are great sources of vitamin K. Eggs, meat, and fish are good sources of choline and salmon, tuna, milk, and eggs are good sources of vitamin D. Beet greens, beans, sweet potatoes, and avocados are sources of potassium. Green leafy vegetables are the best sources of folate. Nuts, seeds, and vegetable oils are among the best sources for vitamin E, and could also increase foods from the oils group. Quesadillas are made often, and beans or chicken could be added to increase protein sources. Avocado can be added to sandwiches to increase oil sources. Dairy could be decreased slightly to avoid the intake of excess saturated fat.

I. Education

I told the mother that the 24 hour recall showed that she was eating 100 fewer calories than recommended. The day recorded may have been an irregular day or the mother may have forgotten something, the child's growth is normal so this isn't a big concern. I explained that the child only consumed half the amount of recommended protein sources and oil sources. Fruit consumed was slightly less than recommended, and dairy was slightly more than recommended. Fiber was low by 10 grams, which is a concern because fiber is an important element in digestion. I explained that not getting enough fiber can lead to poor blood sugar control and digestion problems such as constipation, diverticular disease and hemorrhoids. I told her that Talia was also low in potassium, folate, choline, and vitamins D, E, and K which are all important in growth and can cause problems if deficient for long periods of time.

I recommended sources to increase fiber such as incorporating more fruits and whole grains. I said that beans and nuts are also good sources of fiber and could also increase her amount of foods from the

protein foods group. Her multivitamin is good for incorporating vitamins and minerals that she is low on, but I told the mother to make sure that these at-risk nutrients are included. I provided food sources of each nutrient that she was low on. I mentioned that quesadillas are made often, and beans or chicken could be added to increase protein sources. Avocado can be added to sandwiches to increase oil sources. Dairy was only ½ cup over the recommendation, but I recommended the substitution of milk instead of so much cheese to avoid the intake of excess saturated fat.