



## CLINICAL PRACTICE 5 (CLN 452) 1437-1438H

### A- COURSE INFORMATION:

Course Code	Course Title	Credit Units			Study Level	Pre-requisites
		Total	Theory	Practical		
452	Clinical Practice 5	2	-	2	8th	None
Course Coordinator		Extension		Email Address		
Prof: Sahar Ali Ibrahim Hammouda		8690		sahammouda@taibahu.edu.sa		

### B- COURSE DESCRIPTION:

This hospital practice provides experience in assessing the nutritional needs and providing nutrition therapy for patients under severe metabolic stress

### C- COURSE OBJECTIVES:

1. To Apply the knowledge acquired during the theoretical part of clinical nutrition in a hospital setting
2. To Practice the provision of medical nutrition therapy to patients with different diseases
3. To Demonstrate skills in extracting the needed data from hospital records and consider the necessary investigations when planning dietary therapy.

The student will include information as a case study for each clinical case seen on the nutrition care process and document it in a log book.

### E- PRACTICAL SESSIONS:

Week	Practical Session	Hours
All weeks	Shadow students on how to assess nutritional status, dietary intake, address nutritional deficiencies and diagnose malnutrition in trauma ICU patients	12
	Shadow students in completing hospital records, prescription of products and documentation in medical notes Followed by supervised practice and demonstration of these skills	6
	Target patient cases are: ICU patients critically ill patients with organ failure patients with tracheotomy, pressure ulcer and major surgery Cancer patients Organ transplantation. Burn patients Patients with respiratory system diseases	60



	Terminal patients at the End of Life	
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**F- ASSESSMENT TASKS:**

#	Type of assessment task	Week	Total Grades
1	Attendance and patient communication & application of NCP	All	30%
2	Discussion of cases & General evaluation by clinical supervisor	All	30%
3	Completion of log book including written 4 cases.	16th	40%

**G- LEARNING RESOURCES:**

<p>1- Required textbook:</p> <p>Nutrition Care Manual and Pediatric Nutrition Care Manual (<a href="http://www.nutritioncaremanual.org">www.nutritioncaremanual.org</a>)</p> <p><i>Clinical Dietitian's Essential Pocket Guide, The: Essential Pocket Guide</i>, Authors: Width, Mary; Reinhard, Tonia 1st Edition. 2009 Lippincott Williams &amp; Wilkins</p> <p>2- Essential references:</p> <p>Estcott-Stump, S. 2012. Nutrition and Diagnosis Related Care 7th ed. Wolters Kluter/Lippincott, Williams and Wilkinson, Baltimore</p>
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**Notes:**

- You will submit 4 cases as a final individual evaluation therefore group work in this final task is not allowed, you can refer to your notes during discussion and the reference books . Cases include cancer, ICU patients & burn). Grade distribution for each case will be as follows:

#	NCP	Total Grades
	Introduction of the case with brief medical history and diagnosis in few lines e.g A 56 years old man with 2 month history of coughing, sore throat, and progressive difficulty swallowing first to solid food (and then to liquids. He is currently complaining of nausea and early satiety. A biopsy revealed adenocarcinoma of the distal esophagus.	.5
	comprehensive assessment of nutrition status and risks and includes the following major categories of data collection:	
	Patient history: Medication and supplement history, personal history, e.g He was prescribed chemotherapy with 5-fluorouracil and cisplastin, along with chest irradiation over the lower esophagus and the stomach and an esophagectomy is planned. ....etc	.5
	Food and nutrition history (diet history), which includes food consumption, nutrition and health awareness, physical activity and exercise, and food availability. Analysis of diet using special program or food composition tables is required with comments on the diet e.g diet is high in simple sugar and trans fat, iron intake is less than 50% of requirements.....etc	.5
	Nutrition-focused physical examination: Review of systems, including general conditions and physical appearance, gastrointestinal, musculoskeletal, skin,	.5



	extremities, and other systems e.g severe pallor, loss of subcutaneous muscles over the chest and abdomen, ...etc negative signs should be included when relevant e.g no edema (in cases of malnutrition and hypoalbuminemia)	
	Anthropometric measurements: Height, weight, body mass index (BMI), weight change,...etc with interpretations e.g loss of 30% of body weight over the last 4 months =severe malnutrition	.5
	Biochemical data: Laboratory data with interpretation e.g albumen 1.5mg/dl = severe hypoalbuminemia	.5
	Nutrition Diagnosis (PES statement) should be Clear, concise, Specific, Related to one problem, Accurate – related to one etiology, Based on reliable, accurate assessment data. address all nutrition problems and clearly differentiate medical diagnosis from nutrition diagnosis (it is not allowed to write medical problems in place of nutritional problems)	1.5
	Nutrition Intervention: put objective for each category . Food and/or nutrient delivery (ND): including clear objectives for each of: Meals and snacks with complete diet planning and analysis Enteral/parenteral nutrition Medical food supplements Vitamin and mineral supplement Bioactive substance supplement Feeding assistance Feeding environment Nutrition-related medication management . Nutrition education (E) . Nutrition counseling (C) . Coordination of nutrition care (RC)	4
	Prioritization of the nutrition diagnoses as to each problem's severity or importance	.5
	<u>Interventions</u> should be specific: —What? —When?—Where?—How? e.g increase HB level to a minimum of 12 g/dl in 6 weeks iron supplements 60 mg once /day with fruit juice	.5
	Nutrition Monitoring and Evaluation	.5

- you are expected to critically think in the following ways:
  1. Determine appropriate data to collect
  2. Determine the needs for additional information
  3. Select assessment tool that match the situation
  4. Apply assessment in valid and reliable way
  5. Distinguish relevant from irrelevant
  6. Distinguish important from non important
  7. Validate the data