

# NUTRITION PROGRESS NOTES

Type 1 Diabetes Mellitus

Client's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Medical Record #: \_\_\_\_\_

Initial  Conventional  Intensive  (circle one)

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_

Other Diagnosis: \_\_\_\_\_ Ethnic Background (Optional): \_\_\_\_\_ Referring Physician: \_\_\_\_\_

Expected outcome	Intervention provided to meet goal (Intervention = self-management training plus client verbalizes/demonstrates)				Outcomes of Medical Nutrition Therapy (MNT) Goal reached (✓ indicates goal reached; **Behavioral Outcomes and Overall Compliance Potential: Circle number 1 to 5)			
	1 (60-90 min)	2 (30-45 min)	3 (30-45 min)	4 (30-45 min)	Date: _____	Date: _____	Date: _____	Date: _____
<b>Clinical Outcomes</b>					Value	Value	Value	Value
Preprandial blood glucose (mg/dL)								
Bedtime blood glucose (mg/dL)								
A1C (%)								
SMBG, % in target range								
LDL-C (mg/dL)								
HDL-C (mg/dL)								
Triglycerides (mg/dL)								
Ketone								
Microalbumin (mcg/24 hr)								
Blood pressure					/	/	/	/
Height _____ Weight/BMI _____								
Hypo/hyperglycemic episodes					x/mo	x/mo	x/mo	x/mo
MNT Goal: _____ kcal _____ g CHO total _____ g CHO/meal _____ % Fat Adhere to appropriate meal pattern, exercise, and medication treatment, plan to maintain blood glucose and lipids within normal limits					_____ kcal _____ g CHO meals _____ g CHO snacks _____ % fat	_____ kcal _____ g CHO meals _____ g CHO snacks _____ % fat	_____ kcal _____ g CHO meals _____ g CHO snacks _____ % fat	_____ kcal _____ g CHO meals _____ g CHO snacks _____ % fat
<b>Behavioral Outcomes</b>								
• Eats meals/snacks at appropriate times					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Chooses food and amounts per meal plan					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Verbalizes sick-day management skills					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Manages signs and symptoms of hypoglycemia					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Accurately uses information from food labels in meal planning					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Modifies recipes to ↓ total fat/saturated fat/sodium					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Uses healthy cooking techniques					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Selects appropriately from restaurant menu					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Participates in aerobic activity per exercise recommendation					1 2 3 4 5 _____ x/wk _____ min	1 2 3 4 5 _____ x/wk _____ min	1 2 3 4 5 _____ x/wk _____ min	1 2 3 4 5 _____ x/wk _____ min
• Limits occasional alcohol use to <2 per day					1 2 3 4 5 _____ svg	1 2 3 4 5 _____ svg	1 2 3 4 5 _____ svg	1 2 3 4 5 _____ svg
• Verbalizes importance of smoking cessation					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Modifies insulin/food for activity/lifestyle					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Verbalizes potential food/drug interaction Drug _____ _____					1 2 3 4 5 _____ dose _____ dose	1 2 3 4 5 _____ dose _____ dose	1 2 3 4 5 _____ dose _____ dose	1 2 3 4 5 _____ dose _____ dose
<b>Overall Compliance Potential*</b>								
• Comprehension					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Receptivity					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
• Adherence					1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

**Intervention:** D-Discussed, R-Reinforced/Reviewed, ≠ Not reviewed, ✓ Outcome achieved, N/A Not applicable.

\*\*Key for Behavioral outcomes and Compliance Potential and Overall Adherence Potential: 1=Never demonstrated, 2=Rarely demonstrated, 3=Sometimes demonstrated, 4=Often demonstrated, 5=Consistently demonstrated

Copy form for more encounters.