Nutrition in Healthcare: Resource Guide

# Name of Disease: *HIV*

## Researcher: *Your Name*

**\*\*\*\*ONLY document by exception, thus if an area does not apply, please remove from document. Replace the ‘XX’ text for each section.\*\*\*\***

## Subjective Documentation

**Upon review of Medical Documentation what are important findings to look for.**

Constitutional: XX

#### Cardiovascular: XX

#### HEENT: XX

**Eyes -** XX

**Ears -** XX

**Nose -** XX

**Throat -** XX

#### Genitalia: XX

#### Neurologic: XX

#### Extremities: XX

#### Skin: XX

#### Chest/lungs: XX

#### Abdomen: XX

#### Vital Signs: XX

#### Labs: XX

**Other coinciding disease states and/or symptoms common with your disease -** XX

**Common Food and/or Drug Allergies with this disease -** XX

**Common Drugs (and their class) prescribed for this disease -** XX

**How is this disease acquired?**

XX

**Commonality of disease?**

XX

## Nutritional Needs

#### Food/Drug interactions

XX

#### Side effects of medications affecting eating (po intake)

XX

#### Side effects of medication affecting metabolism

XX

#### Side effects of disease affecting eating (po intake)

XX

#### Side effects of disease affecting metabolism and nutritional needs

XX

#### Does the patient need to be fed artificially? If so, how?

XX

#### Can patients feed themself? If not, how will the patient eat?

XX

#### What are common therapeutic diets prescribed for this disease state?

XX

#### What are common dysphagia diets prescribed for this disease state?

XX

#### Is it common for this patient to need increased oral nutrition supplementation? If so, what are some examples of what would be used in a healthcare setting?

XX

#### What food(s) can the patient NOT eat?

XX

#### What food(s) are offered in limited quantities?

XX

#### What foods are the patients encouraged to eat?

XX

#### Is it common for a patient with this disease state to be able to be independent and then eventually be dependent for nutrition? For example as the disease progresses.

XX

## Nursing Application

**Summarize ALL your findings in one paragraph and three action points below.**

#### Summary-

XX

#### Action Points-

1. XX
2. XX
3. XX

## References

1. XX
2. XX
3. XX
4. XX
5. XX