

## Progress Report Overview

<b>Student:</b>	<b>Reem Dasa</b>
<b>Activity:</b>	Hiram Figgins
<b>Start Time:</b>	08/02/2025 00:03:09
<b>End Time:</b>	08/02/2025 00:23:20
<b>Total Time:</b>	00:20:11

### Actions

Note at 08/02/2025 00:23:15

# Hiram Figgins Documentation



**Student:** Reem Dasa  
**Activity Start:** 08/02/2025 00:03:09  
**Activity Completion:** 08/02/2025 00:23:20  
**Activity Completion:** 00:20:11

## Patient Data



**Patient:** Hiram Figgins

**DOB:** 05/02/1972

**Age/Sex:** 53 yo M

**MR#:** MR18900

**Location:** Valley View Therapy Center

## Notes

Note at 08/02/2025 00:07:38

## Educational ADIME

### Basic Information

**Date:**

08/02/2025 00:07:38

**Author:**

Reem Dasa

**Location:**

General Hospital

### Nutrition Assessment

**Client history:**

Living situation: Lives alone, recently divorced

Medical history: Type 2 diabetes (5 years, insulin-dependent for 4), obesity, elevated BP, long-term tobacco use (1.5 PPD since age 14)

Psychosocial: Expresses low confidence in weight loss; previously tried multiple diets unsuccessfully

Medications: Lantus insulin

Allergies: NKDA

**Biochemical data, medical tests and procedures:**

Poorly controlled blood glucose (partial diary, sporadic readings)

No recent labs provided, but elevated BP and suboptimal glycemic control confirmed by provider

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**Anthropometric measurements:**

Height: 70 in (1.78 m)

Weight: 110 kg

BMI: 34.7 kg/m<sup>2</sup> ...Obese (Class I)

IBW (Hamwi):  $106 + 6 \times (70-60) = 166$  lbs (75.5 kg)

Excess weight: =67 lbs above IBW

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**Physical exam finding (nutrition focused):**

Well-nourished but obese

No edema or skin breakdown

Alert and oriented

Normal gait and grossly intact musculoskeletal and neurological systems

Reports finger numbness (possible diabetic neuropathy)

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**Food and nutrition history:**

Diet high in processed, fast food, sugary beverages, and saturated fats

24-hour recall reflects high calories high sodium, and high added sugar

No home cooking skills beyond basic fried foods and eggs

Heavy caffeine use (4-8 cups coffee/day with 8 Tbsp half & half)

Minimal physical activity

Smoking

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**Total energy estimated needs:**

estimated energy needs = 2750-3300 kcal/day

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**Total protein estimated needs:**

88-110 g/day

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**Total fluid estimated needs:**

3300 mL/day

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**Nutrition Diagnosis**

**(P) Problem:**

Excessive energy intake

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**(E) Etiology (r/t):**

related to high intake of energy dense snacks and beverages

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**(S) S/S (aeb):**

as evidenced by BMI of 34.7, , and diagnosis of poorly controlled type 2 diabetes

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**Nutrition Intervention**

Food and/or Nutrition Intake ND, Nutrition Education E, Nutrition Counseling C, Coordination of Nutrition Care RC, Population Based Nutrition Action P

**Nutrition prescription:**

Moderate calorie-restricted diet (1800–2000 kcal/day)

Emphasis on nutrient-dense, low-sodium, high-fiber foods

Carbohydrate-controlled meal pattern

Encourage cooking basics, portion control, and hydration

Reduce saturated fats, added sugars, and processed foods

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**Intervention:**

Initial education on balanced meals, carbohydrate counting, and label reading

Meal planning using simple recipes

Behavioral counseling

Recommend physical activity goals (walking 10–15 min after meals)

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**Goal:**

Reduce total body weight by 5-10% over 3-6 months (5.5-11 kg)  
Improve glycemic control: A1c target <7.5%  
Adopt consistent meal schedule with fewer processed meals  
Reduce soda and high fat snack consumption by 50% in 2 months

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### Nutrition Monitoring and Evaluation

**Indicator:**

decrease by 5-10% in 3-6 months  
decrease fasting blood sugar and HBA1c to 7

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**Criteria:**

decrease energy intake to 2000 kcal,  
improved quality of food and take  $\geq 5$  meals/week and try to cook at home  
decrease processed food and snacks to 1 / day

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**Signed:**

Reem Dasa

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**Date:**

8/1/2025

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**Time:**

12:30

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