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Dietary Recall Nutrition Screening and Balanced Meal Planning

Practical 01 / Clinical case or record exercise

Aim

Record a dietary recall and prepare a practical balanced menu for a fictional patient.

Principle

Usual intake, food access, weight trend and relevant clinical needs help identify priorities and guide meals.

Articles and Materials

- Food models and portion guide
- Dietary recall, nutrition screening and food composition tables

Procedure

1. Verify age, measurements, recent weight changes, appetite, food preferences and restrictions. Ask who prepares meals and which foods are available locally.
2. Ask for a chronological 24-hour account covering food, drinks, oils, snacks and supplements. Clarify portion sizes with models or household measures.
3. Convert reported portions to edible weights as instructed and distinguish an estimated quantity from a measurement. Note whether the day was typical.

Continue with step 4 on the next page.

Procedure Continued

Dietary Recall Nutrition Screening and Balanced Meal Planning

4. Use the supplied composition table to estimate selected nutrients and energy for representative meals, showing units and assumptions.
5. Check the nutrition screening indicators and compare the recorded pattern with age and case needs. Identify one practical gap or referral concern.
6. Design a menu with balanced food groups, safe preparation and realistic portions and substitutions. Verify authorised restrictions with the clinical team.
7. Present the menu in plain language and ask the person to explain one change they could make. Discuss financial or preparation barriers.
8. Record measurements, estimates, plan and review time. Arrange qualified nutrition assessment for clinically concerning findings.

Precautions

- Check allergies and diet orders.
- Treat one day’s recall as an estimate of intake.

Observations and Record

Dietary Recall Nutrition Screening and Balanced Meal Planning

Documentation

Item	What to record	Why it matters
Intake	Foods, portions and limitations	Establishes usual pattern
Screening	Weight, appetite and risks	Identifies further need
Menu	Changes and feasibility	Supports practical care

Worked Example

The recall shows small meals after a recent illness and documented weight loss. The student discusses easy-to-prepare foods and asks the team to review nutrition risk.

Result and Evaluation

Produce a clear recall, risk summary and realistic balanced meal plan.

Viva Questions and Answers

Why ask whether the day was typical?

Intake varies and atypical days affect interpretation.

What helps make a substitution feasible?

Similar nutritional purpose, local availability and acceptability.

Therapeutic Diet Modification and Food Safety

Practical 02 / Clinical case or record exercise

Aim

Adapt a meal plan to an authorised therapeutic requirement and explain safe preparation.

Principle

Diet modification works best when it addresses the clinical goal while maintaining adequate intake and patient preferences.

Articles and Materials

- Fictional diet orders, sample meal plans and food labels
- Portion measures and preparation checklist

Procedure

1. Verify the patient's medical context and authorised diet order. Check allergies, swallowing or texture requirements, intake restrictions and need for a dietitian.
2. Review a representative meal and identify ingredients relevant to the goal, such as added salt, nutrient density or meal consistency.
3. Compare label servings and actual portions. Estimate the relevant nutrient for the proposed amount using matching units.

Continue with step 4 on the next page.

Procedure Continued

Therapeutic Diet Modification and Food Safety

4. Select realistic substitutions and plan meals and snacks with adequate variety. Use approved guidance for specialised restrictions or therapeutic textures.
5. Demonstrate safe handling, clean preparation, separation of raw and cooked foods and storage instructions for the chosen meal.
6. Check the plan against the case order and important nutrient needs. Discuss who will prepare it and how barriers will be addressed.
7. Use teach-back with one simple meal example and note warning signs or poor intake that require review.
8. Document the agreed menu, nutritional objective, changes and how the team will assess intake and progress.

Precautions

- Obtain dietitian or team review for complex dietary restriction.
- Record the specific order and avoid unsafe assumptions about foods or textures.

Observations and Record

Therapeutic Diet Modification and Food Safety

Documentation

Item	What to record	Why it matters
Order	Therapeutic goal, limits and allergy	Defines plan
Food choice	Portion, substitution and preparation	Supports feasibility
Review	Intake, understanding and planned check	Evaluates effect

Worked Example

A menu change uses a locally available alternative to a high-salt packaged item. The student checks that it also fits the person's texture and intake plan.

Result and Evaluation

Prepare a realistic, hygienic therapeutic menu and verify the authorised requirements.

Viva Questions and Answers

Why compare serving size with the portion eaten?

Total nutrient intake depends on the actual portion.

What is important for an ordered texture?

Use the approved texture criteria and verify swallowing instructions.

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