ADIME Note: Hypertension

Assessment:

The patient is an African-American male. He presented to his family physician with elevated blood pressure and heartburn. He has a family history of hypertension, obesity, and heart disease. He has steadily gained weight over the past 15 years and does not exercise regularly, despite being an athlete when he was younger. The 24-hour recall reveals that the patient consumes fast food for breakfast and lunch. His wife prepares his dinner, and he occasionally consumes snacks after dinner. He consumes one beer per day. Based on the 24-hour recall, his energy intake was 3000 kcal.

36 y.o. male

Dx: Pre-hypertension

Ht. 5'10" (70 in. or 178 cm), Wt. 248 lbs. (112.7 kg)

Labs:

BP: 140/92 mmHg (High)

FBS: 99 (Normal)

Chol: 210 mg/dL (Borderline high)

HDL: 41 mg/dL (Normal)

LDL: 134 mg/dL (Borderline high)

Triglycerides: 175 mg/dL (Borderline high)

EER: 2,685 kcal

EPR: 90 g

Fluid needs: 2,685 mL/day = 2.7 L/day

BMI: **35.6** IBW: **166 lbs.**

Diagnosis:

- 1. Excessive energy intake **R/T** consumption of fast food for breakfast and lunch **AEB** intake of 3,000 kcal on 24-hour recall.
- 2. Excessive sodium intake **R/T** consumption of fast food for breakfast and lunch **AEB** blood pressure of 140/92.
- 3. Excessive fat intake **R/T** consumption of fast food for breakfast and lunch **AEB** blood LDL levels of 134 mg/dL and blood triglyceride levels of 175 mg/dL.
- 4. Obese, class I **R/T** nutrition-related knowledge deficit and physical inactivity **AEB** BMI of 35.6.
- 5. Food and nutrition-related knowledge deficit **R/T** calorie-dense, but nutrient-poor food choices **AEB** 24-hour recall.

Intervention:

- 1. Recommend that the patient consume 2,185 kcal per day to lose up to 1 lb. per week.
- 2. Recommend that the patient consume no more than 1,500 mg of sodium per day.
- 3. Educate the patient and his wife on identifying high-sodium and high-fat food items by understanding food labels. Explain how excessive intake of sodium and fat can worsen hypertension and increase the risk of heart disease and obesity. Also, explain how consumption of meals that are high in fat can worsen heartburn.
- 4. Provide handouts and online resources that the patient and his wife can use to identify spice substitutions for salt and to get ideas for low-calorie, portable meals and snacks.

- 5. Refer the patient and his wife to a community class on healthy food preparation to increase food preparation skills and healthy meal ideas.
- 6. Recommend that the patient exercise by playing basketball with his son or going for a walk with his wife for 30 minutes three times per week.

Monitoring/Evaluation:

- 1. The patient will lose 1 lb. per week.
- 2. The 24-hour recall or food diary will show that the patient is following the low-sodium, reduced-calorie diet plan.
- 3. The patient will state an understanding on which foods are high in sodium and fat, as well as how to read food labels.
- 4. The patient will state an understanding of low-sodium, low-fat food preparation, particularly in meals that can be packed and consumed at work.
- 5. The patient's blood pressure will decrease, nearing normal range (less than 120/80 mmHg).
- 6. The patient will exercise for 30 minutes three times per week.

Follow up in 2 weeks.

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