**The nutrition care process was established by the ADA as:**

1. An easy process to help dietitians.
2. A detailed process for the health care team.
3. A standardized process for the provision of nutrition care.
4. A nutritional process to determine health status.
5. A document to educate the patient about his/her condition

**Blood Urea Nitrogen (BUN) is usually increased in:**

1. Patients with hypertension.
2. Patients with gout
3. Patients with renal disorders
4. Patients with liver disease
5. Pregnant women

**Blood Urea Nitrogen (BUN) is usually decreased in:**

1. Pregnant women
2. Patients with liver disease
3. Patients with sinusitis
4. 1 and 3
5. 1 and 2

**Which of the following is considered a significant weight loss:**

1. %5 loss in 6 months
2. %1 loss in one month
3. % 10 loss in two years
4. %10 loss in 6 months
5. %3 loss in 3 months

**One problem with usual body weight is**:

1. It is not in kilograms
2. It depends on the patient’s memory
3. It is taken by paramedics
4. It is always higher than IBW or DBW
5. It is always lower than IBW or DBW

The patient is a 55 years old Saudi gentleman who has a history of type 2 diabetes mellitus, asthma attacks and hypertension. He suffered from rectal bleeding therefore, he went under sigmoscopy, which resulted in the detection of rectal ulcer, and there are no surgical intervention done for this matter yet. His son reported that the patient used to be consuming a lot of dates, Arabic coffee, legumes and cooked rice. In addition, the patient consumption of water, fruits & veggies was significantly limited. The patient consumes his food normally with no significant swallowing, chewing or appetite problems. Pt wt= 115 kg, ht= 168cm, pt usual body wt (3 months ago) = 100 kg.

***Drug Management:***

Significant medications:

* Ventolin 25 mg.
* Zinc oxide.
* Metformin 2500 mg

***Current laboratory results***

|  |  |  |
| --- | --- | --- |
| Serum | Current level | Normal range |
| Urea  Creatinine  Total protein  Albumin  FPG | 7.8 umol/l  54 umol/l  62 g/l  29 g/l  147 mg/dl | (4.2 – 7.2) high  (80– 133) low  (66 – 87) low  (35 – 50) low  ≤ 110 mg/dl |

**Requirements:**

1. Write a SOAP note according to the method of your textbook.
2. What do you propose for the diet order?
3. Extra credit: What two vitamins could the drug metformin interfere with during absorption?

Case II:

The patient is a 50 years old Saudi gentleman who has a history of hepatitis C, ischemic heart disease, and hypertension. The patient reported that he used to be consuming plenty of red meats, dairy products, and fast foods. In addition, the patient consumption of water, and dietary fibers was significantly limited. The patient consumes his food normally with no significant swallowing, chewing or appetite problems. Pt wt= 95 kg, ht= 170cm, pt usual body wt (3 months ago) = 100 kg. He is on Klacid 500 mg PO BD, Lasix 40 mg OD and Warfarin 5 mg OD

***Recent laboratory results***

|  |  |  |
| --- | --- | --- |
| Serum | Result | Normal range |
| Total protein  RBC  HCT  MCV  Anti HCV | 6 g/l  3.79 x10 e.12/L  37.1%  97.8 fl  Positive | (0 – 2) g/l (high)  (4.2 – 5.5) (Low)  (42 – 52) % (low)  (80 – 94) (High)  Negative |

**Requirements:**

1. Write a SOAP note according to the method of your textbook.
2. What do you propose for the diet order?
3. Extra credit: What vitamin could the drug warfarin interfere with during absorption and how?