

# **Well-Child Project**

**Sydney Hunter**

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NDFS 424

**PART I (Complete Sections I – V):**

**I. Identifying data (1 point)**

- A. First name **ONLY: Ellie**
- B. Description of the child - general appearance, hair, skin, skeletal development, eyes, muscle turgor, teeth: **Brown eye, brown hair, medium skin, occasional dry skin, good teeth**
- C. Economics environment, interaction with siblings and parents, time with babysitters or in day care: **Cute personality, father supports family, friendly and loves to help her three older siblings**

**II. Health history (10 points)**

- A. Sex of child: **F**
- B. Age of child (years, months): **5 years 11 months**
- C. Birth anthropometrics (of child):
  - (1) Birth weight (lbs or kg) and percentile range (i.e. between 10<sup>th</sup> and 25<sup>th</sup> percentile): **8 lbs 11oz. (Between the 90<sup>th</sup> and 95<sup>th</sup> percentile)**
  - (2) Birth length (in or cm) and percentile range (i.e. between 25<sup>th</sup> and 50<sup>th</sup> percentile): **21 inches (Above the 98<sup>th</sup> percentile)**
  - (3) **ATTACH PLOTTED GROWTH CHARTS**
- D. Current anthropometrics (of child):
  - (1) Current weight (lbs or kg) and percentile range (i.e. between 50<sup>th</sup> and 75<sup>th</sup> percentile): **60 lbs. (At the 95<sup>th</sup> percentile)**
  - (2) Current length or height (in or cm) and percentile range (i.e. above the 98<sup>th</sup> percentile): **4'2" (Above the 95<sup>th</sup> percentile)**
  - (3) **ATTACH PLOTTED GROWTH CHARTS**
- E. Number of siblings and their ages: **Three siblings: ages 13, 11, 8**
- F. Mother's obstetrical history - weight gain, term, parity (with your subject): **Ellie was born 5 days late. Her mother gained 50 lbs during the entire pregnancy. Ellie was her mother's fourth pregnancy.**
- G. Child's history of illnesses (including any chronic diseases): **hydronephrosis (water inside the kidneys) after birth**
- H. Child's current use of medications, fluoride treatments? **N/A; receives fluoride treatments at the dentist**
- I. Child's dental history: **No dental caries**
- J. Child's allergies, other food intolerances: **N/A**

**III. Developmental skills assessment (6 points)**

- A. Developmental skills – perform the Denver Developmental Screening Test (DDST) using the screening form handed out in class - **ATTACH THE COMPLETED SCREENING FORM**

- B. Summarize your findings from the DDST using the following format (refer to PowerPoint instructions on BYU Learning Suite):
- (1) “No opportunity” items (if none, list “none identified”): **None identified**
  - (2) “Caution” items (if none, list “none identified”): **None identified**
  - (3) “Delayed” items (if none, list “none identified”): **None identified**
  - (4) Discuss your interpretation of the test, including if the child’s development would be categorized as “normal”, “suspect”, or “untestable” and any concerns you have with the child’s development.  
**Ellie’s development is considered normal according to the Denver Developmental Screening. She passed all the activities she was asked to perform.**

#### IV. Nutritional assessment (8 points)

- A. Obtain a 24-hour recall from your subject. Most likely you will need to obtain this from the child’s caregiver(s). Enter his/her diet using USDA’s *ChooseMyPlate’s Super Tracker*. For this section, **ATTACH 3 PRINTOUTS FROM *SuperTracker* TO PROJECT:**
- (1) “Food Group and Calories” Report
  - (2) “Nutrients” Report
  - (3) “Meal Summary” Report.

Please print your reports as PDF documents and attach to your completed project (see the printing instructions on p. 5).

B. **SUMMARIZE:**

(1) Your subject’s macronutrient distributions (%) and whether the percentages are appropriate for his/her age based on macronutrient recommendations:

**Ellie is within the recommended range for carbohydrate intake. It is recommended that Ellie should eat between 45-65% carbohydrates in her diet and based on Ellie’s 24 hour recall, she has an intake about 55%. Ellie is within the recommended range from protein distribution as well. It is recommended that Ellie intakes 10-30% of her calories from protein. She has approximately 13% of her calories coming from protein. Ellie’s fat distribution is also within the recommended range. However, she is at 34% of her calories coming from fat which is leaning towards the upper range of the recommended levels (25-35%).**

(2) The number of MyPlate food group equivalents your subject consumed based on his/her actual intake and how he/she is meeting (or not meeting) his/her personalized *MyPlate* food group recommended levels. **Ellie is under her whole grain recommendation and over her refined grain intake. Overall, Ellie is over her target amount of grains. On the other side, Ellie’s intake of vegetables is  $\frac{3}{4}$  cup away from her goal of 1  $\frac{1}{2}$  cups a day. Ellie’s intake of fruits is excellent. She eats almost 1 cup more than what she needs to. Ellie’s dairy intake could be improved. She is 1 cup of dairy short her goal. Ellie’s intake of protein is also low, in order to meet her personalized myPlate requirements, she needs 2 more ounces to reach her goal. Her oil intake was higher than the recommended amount. Overall, her total calorie intake is over the recommended amount by approximately 200 calories.**

(3) Your subject’s actual vitamin and mineral intake and how it compares to vitamin and mineral DRIs for his/her age (i.e. is his/her diet high or low in any vitamins and minerals).

**According to Ellie’s 24 hour intake, Ellie has a lower intake of calcium and potassium in terms of minerals. The rest of the major vitamins are within the recommended level for Ellie’s needs except for sodium which is at an increased level. As for vitamins, Ellie has a low intake of Choline. Ellie has a high intake of folate, but the rest of the major vitamins are within the recommended range.**

- C. Parental description of food habits - likes, dislikes, snacks, jags, pica.: **Ellie is a great eater. She eats almost everything. Her only dislikes include onions and spicy things.**

- D. Parental description of typical family meal times (do they sit at a table or in front of the TV or does everyone eat at different times, etc). **Their family time is meal time. They almost always eat together for dinner, except during busy soccer seasons. Breakfast is on the run usually.**
- E. Child's intake of vitamin/mineral supplements? **Ellie takes Children's gummy multi vitamins each day.**
- F. Use of food assistance programs like WIC, SNAP, food bank, church resources, etc. **N/A**

**V. Nutritional care plan and implementation (15 points)**

- A. Summarize (1-2 paragraphs) what you think are the most significant nutritional risk factors to this child and how the child's diet can be altered to reduce this risk.  
**Ellie's intake of sodium is higher than the recommendations. Even though Ellie's sodium intake is better than most children her age, Ellie and her parents should make strives to lower this level as best as they can to prevent later complications. With Ellie's intake of dairy, protein, and vegetables being low, growth impairment can potentially result. These can be easily adjusted to Ellie's needs by adding one more side in each instead of high salt or high fat options. Ellie is on the higher range of the growth charts for weight for age and length for age. However, Ellie's BMI is within a recommended level (75-85<sup>th</sup> percentile) so her growth is appropriate and she may be genetically taller and stronger than other girls her age.**
- B. Explain (1-2 paragraphs) any recommendations, suggestions, or education you plan to give the child's caregiver(s) and the rationale.  
**I would teach myPlate to Ellie's mother and address the recommended amounts for Ellie's needs. I would explain that Ellie's intake of grains, fruit, overall calories are excellent. Ellie and her parents should keep up this good work. I would then continue to explain that Ellie's levels of protein, dairy, and vegetables are barely below the recommended levels. I would provide examples that would boost Ellie's intake in these categories. For example, an extra side of vegetables at lunch, dinner, or for a snack would boost Ellie up to the appropriate levels she needs. This will provide Ellie with all the vitamins and minerals she needs in order to reach her optimal growth and maintain a healthy life.**

**PART II (Complete Section I – II):**

- I. **Education (5 points):** Provide the child's caregiver(s) with the recommendations/advice you suggested in Part I (*after you review the instructor's comments*). Ideally, this should be done in-person. Summarize (1-2 paragraphs) what you discussed with the child's caregiver(s).

**I felt Ellie's overall diet was adequate and I am not overly concerned with her intake. However, there were a few major points I wanted to contact Ellie's mother about in order to give helpful hints for Ellie's growth to be at her optimal level. First, I addressed the grain food group and explained how half of Ellie's intake of grains should be whole. I explained how Ellie should focus on increasing her whole grains and decreasing her intake of refined grains. Another point of possible improvement for Ellie would be to keep in mind to slightly increase her intake of protein, dairy, and vegetables. This can be easily done by substituting a food group she is over consuming (grains) with a delicious snack of carrots, beans, peanut butter, and more. I explained that Ellie does not need to add more snacks into her day, but rather she needs to replace grains with some other food groups that are on the verge of being too low. This will also slowly lower her caloric intake for the day that is just barely too high for her needs. I wanted Ellie's mother to understand that**

**she should keep up the good work with feeding Ellie. Ellie appears to be a healthy girl with a healthy appetite for nutritious foods.**

- II. **Reflection:** Write 1-2 paragraphs about your overall impression of how the child's caregiver(s) received your advice (i.e. do you think the caregiver[s] will follow your advice? Why or why not?). Also describe how you could have improved the education you gave.

**I was excited about the advice I gave Ellie's mother. Their family is very active and her mom loves coming up with nutritious meals for her children. Ellie's mother was very open to the advice I gave and seemed excited about the information I provided her. I think Ellie's mother will listen to my advice and especially think about adding more whole grains to their family meals. I gave examples of whole grains such as pasta or bread that can be an easy substitute and she seems willing to give them a try. I also think Ellie's mother will try to substitute foods in the grain group for other foods that are of lower intake (protein, dairy, vegetables) for Ellie.**

**I feel I did a good job informing Ellie's mother about possible changes in Ellie's diet. One point of improvement that could be was to provide even more examples of foods in various food groups so that Ellie and her mother can receive help thinking of new meals and snacks to consume. It never hurts to provide examples of nutritious foods for people to eat!**