

Nutritional Status Examination

Introduction

- **W**ash hands, **I**ntroduce self, ask **P**atients name & DOB & what they like to be called, **E**xplain examination and get consent

General Inspection

- **Patient:** stable, BMI, alert, breathlessness, fever, portals of infection/wounds/drains
- **Around bed** (if present look at quantity of fluids in/out)
 - In: NG tube/TPN, IV fluids, nutritional supplements, food/drink/NBM notes
 - Out: catheter, stoma, NG tube, vomit/sputum bowels
 - Charts: observations, fluid balance, drug chart (diuretics)

Hands and arms

- **Nails:** clubbing (**cirrhosis, IBD, coeliacs**), leukonychia (**hypoalbuminemia**), koilonychia (**iron deficiency anaemia**)
- **Palms:** temperature, xanthomata (**hypercholesterolaemia**)
- **Pulse:** volume and rate, collapsing pulse (**fluid depleted**)
- Blood pressure sitting and standing

Head and Neck

- **Eyes:** sunken, corneal arcus/ xanthelasma (**hypercholesterolaemia**), conjunctiva for pallor (**anaemia e.g. bleeding, malabsorption**)
- **Mouth/ tongue:** glossitis/ stomatitis (**iron/B12 deficiency anaemia**), apathous ulcers (**IBD**), breath odor (**e.g. faeculent in obstruction; ketotic in ketoacidosis; alcohol**), dry mucous membranes, gingivitis (**scurvy**)
- JVP
- Goitre (**iodine deficiency**)

Chest

- Sternum: capillary refill, skin turgor

Abdomen

- Ascites (**hypoalbuminemia**)
- Adiposity
- Loose skin (**rapid weight loss**)

Legs

- Peripheral oedema (**hypoalbuminemia**)
- Bowed legs (**rickets/osteomalacia**)

To Complete exam

- Thank patient and cover them
- "To complete my nutritional status assessment, I would take a full history, calculate BMI, look at U&Es, observations and the food and fluid balance charts"
- Summarise and suggest further investigations