

nutritionDay in Primary Care

Questionnaire

Healthcare Practitioner/Doctor

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Center code: Doctor code: (for all health care professions) Patient number: Visit date (dd.mm.yy): Home visit: Patient consent: 1. What is the main reason for the visit? ICD-10 DIAGNOSIS Nervous system Mental health Eye and adnexa Ear and mastoid process Circulatory system Respiratory system Respiratory system Genitourinary system Musculoskeletal system and connective tissue Skin and subcutaneous tissue Infectious and parasitic diseases Neoplasms Blood and bloodforming organs and the immune mechanism Symptoms, signs, abnormal clinical/lab findings External causes of morbidity and mortality (e.g. transport accidents, assaults) Pregnancy, childbirth and the puerperium Conditions originating in the perinatal period Congenital/chromosomal abnormalities Injury, poisoning Factors influencing health status and contact with health services None of the above	Last visit within: <2 weeks 2-4 weeks 1-3 months >1 year * 2. Which con	This patient came for:* First visit/new patient Short term problems Long term problems Vaccination Regular visit for chronic diseases Health check-up Other reasons ditions/comorbidities does the patient have?* SPECIFIC COMORBIDITIES Cerebral vascular disease Dementia Major depressive disorder Chronic mental disorder Myocardial infarction Cardiac insufficiency Chronic lung disease Chronic kidney disease Chronic kidney disease Gl disease/problems Urological disease/problems Urological disease/problems Britist Skin problems Peripheral vascular disease GENERAL COMORBIDITIES Pain Fatigue Infection Diabetes Hypertension Hyperlipidaemia Endocrinal disease Cancer (active) History of cancer Other chronic disease OTHER COMORBIDITIES NO COMO
3. Nutrition therapy Ongoing F	Planned 4. Next steps pla	anned today*
Normal food Fortified food Protein/energy supplements (e.g. ONS) Enteral nutrition (EN) Parenteral nutrition (PN) Special diet Dietetic counselling	☐ Take sick leav ☐ Send to speci ☐ Send to dietet ☐ Send to physi ☐ Send to hospi ☐ Plan long-terr	alist tic counselling otherapy ital m care s, special tests blanned t Admission to long-term care Health problem solved No follow up necessary
Thank you for participating	2023 V1 ENGLISH	MEDICAL UNIVERSITY

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