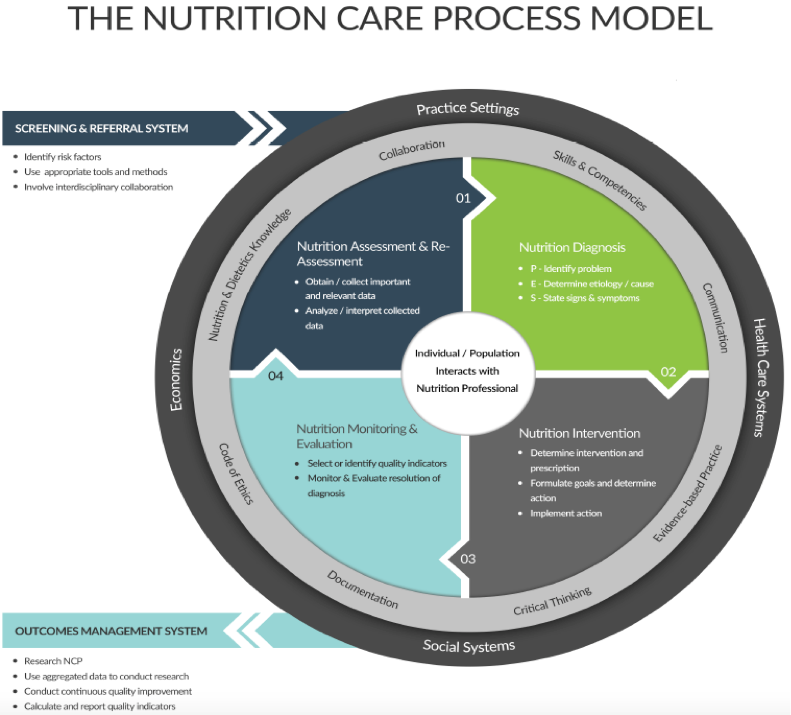
**PES Statements**

\*PES Statements are part of the Nutrition Care Process

* It is a standard of practice for RDNs to have a PES statement included as part of nutrition documentation.
* **Nutrition Care Process**: Standardized approach to providing nutrition care created by the Academy of Nutrition and Dietetics in 2002.
* The Nutrition Care process consists of 4 steps:

1. **“Nutrition Assessment and Reassessment**: The RDN collects and documents evidence such as food or nutrition-related history; biochemical data, medical tests and procedures; anthropometric measurements, nutrition-focused physical findings and client history.
2. **Nutrition Diagnosis**: Data collected during the nutrition assessment guides the RDN in selection of the appropriate nutrition diagnosis(es) (i.e., naming specific problems) terms.
3. **Nutrition Intervention**: The RDN then selects the nutrition intervention(s) that will be directed to the root cause (or etiology) of the nutrition problem(s) and/or aimed at alleviating the signs and symptoms of each diagnosis.
4. **Nutrition Monitoring/Evaluation**: The final step of the process is monitoring and evaluation, which the RDN uses to determine if the client has achieved, or is making progress toward, the planned goals.” (1)

2

**Step 2: The nutrition diagnosis or nutrition problem is summarized into a structured sentence called a PES statement. (1)**

* PES Statements have 3 parts
  + P: Problem
  + E: Etiology
  + S: Signs and Symptoms
* Format for PES Statements
  + **Problem *related to* Etiology *as evidence by* signs and symptoms**

**Graphical user interface, text, application, email

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(3)

**P: Problem**

* Nutrition Diagnosis
  + Most important or urgent nutritional problem identified by the RDN
  + Use data collected during the Nutrition Assessment to identify the nutrition diagnosis
  + Uses specific terminology from the Academy of Nutrition and Dietetics
    - 3 Classifications of Nutrition Diagnosis
      * Intake
      * Clinical
      * Behavioral

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**E: Etiology**

* Root cause of the problem
* Nutrition interventions should address etiology

**S: Signs and Symptoms**

* Signs and symptoms that support the problem

After assessing the patient, if they do not meet the criteria for a nutrition diagnosis, it is appropriate to document “ No Nutriiton Diagnosis at this time.”

**PES Statement Examples from the Academy of Nutrition and Dietetics (1)**

* Excessive Fat Intake related to limited access to healthful options – frequent consumption of high-fat, fast-food meals as evidenced by serum cholesterol level of 230 mg/dL and patient report of 10 meals per week of hamburgers and fries
* Excessive Energy Intake related to unchanged dietary intake and restricted mobility while fracture heals as evidenced by 5 lb weight gain during last 3 weeks due to patient report of consumption of 500 kcal/day more than estimated needs
* Swallowing Difficulty related to post stroke complications as evidenced by results of swallowing tests and reports of choking during mealtimes

**PES Statement Examples from S & S RDs**

* Severe malnutrition r/t chronic illness (dementia and cancer) as evidence by po intake meets less than 75% of estimated energy requirements for a month or longer, weight loss over 5% in less than one month, and fat loss noted in orbital area
* Obesity r/t suspect years of sedentary lifestyle combined with hypercaloric intake AEB BMI 67.1
* Undesirable food choices r/t non-compliance with therapeutic diet AEB A1c 11% and BMI of 28 indicating he is slightly overweight.
* Inadequate oral intake r/t poor appetite AEB hx of poor PO intake, self-reporting of 3-6 16 oz beers/day, and low BMI
* Altered nutrition related laboratory values related to CKD as evidenced by elevated BUN, creat, and K+ values

1. <https://www.eatrightpro.org/practice/quality-management/nutrition-care-process>
2. <https://www.andeal.org/vault/2440/web/files/EAL/NCP_EAL_201711.pdf>
3. [https://eal.webauthor.com/go/view/presentation.cfm?uuid=5E185C78-3E80-4B66-B741-3DFA9F6D9960#](file:///C:\Users\Leslie%20Bell\AppData\Local\Temp\3)https:\eal.webauthor.com\go\view\presentation.cfm%3fuuid=5E185C78-3E80-4B66-B741-3DFA9F6D9960)
4. <https://www.jrnjournal.org/article/S1051-2276(12)00048-9/fulltext>