

PREGNANCY PROJECT

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PART I (I-V):

I. Identifying data

- A. First name: Aija
- B. Description of the individual: Aija is the wife of a gamer who works at Blizzard entertainment in the customer service department from 2pm-12am. Her typical schedule is off as a result. She wakes up at 12pm with him, sees him off to work and stays at home the rest of the day either playing video games, reading, or occasionally going on walks. She typically goes to sleep at 2-4 in the morning. They live in a rented apartment and barely make enough to make ends meet without a baby.

II. Health history

- A. Age: 26
- B. Previous obstetrical history: This is Aija's first pregnancy
- C. Estimated delivery date: September 23, 2013
- D. Laboratory data (hematocrit, hemoglobin): Aija does not know any of her laboratory data.
- E. Any illnesses/sicknesses/chronic conditions: Aija has a mild mitral regurgitation and also is diagnosed with Asperger's syndrome.
- F. Cigarette, drug, alcohol use: none
- G. Previous nutritional deficiencies (prior to pregnancy): No previous nutritional deficiencies
- H. Use of medications or supplements (prior to pregnancy): Aija took Seroxin, St. John's Wort, a Prenatal supplement, a Folic acid supplement, Ibuprofen occasionally, and an Omega-3 fish oil capsule prior to pregnancy.
- I. Exercise/activity (prior to pregnancy and currently): Aija sporadically walked before pregnancy and has continued this pattern in pregnancy. She estimates that she walks two miles about 1-2 times a week.
- J. Allergies, other food intolerances: none

III. Nutritional assessment

- A. Obtain a 24-hour recall from your subject.
 - Breakfast: 6 oz peach Yoplait yogurt
 - AM Snack: 4 gummy worms
1 cup water
 - Lunch: 2 slices supreme pizza
Small juice popsicle
1 cup water
 - Dinner: 1 cup Eggdrop soup (3/4 c chicken broth, 1 egg, spices)
Aija describes this as a typical daily intake
- B. Assessment based on MyPlate analysis: According to the USDA Choose MyPlate Supertracker website, Aija's macronutrient distribution is surprisingly balanced. However, she is not consuming enough total calories, protein, carbohydrate, and dietary fiber. She is also consuming too much saturated fat. She is not consuming enough calcium, potassium, copper, iron, magnesium, zinc, vitamin A, vitamin B6, vitamin C, vitamin D, vitamin E, vitamin K, folate, thiamin, riboflavin, niacin, or choline in her diet but is getting enough in her prenatal supplement. Finally, she is under consuming every food group according to her food group report.
**see attached tables for the nutrient analysis from the Choose MyPlate Supertracker website:
<http://www.choosemyplate.gov/supertracker-tools/supertracker.html>**
- C. Use of food assistance programs: none
- D. Current use of prenatal or vitamin/mineral supplements: Currently takes a prenatal supplement, folic acid supplement, and an omega-3 fish oil capsule
- E. Estimated percentage of income spent on food: Aija estimates she spends about 6-6.5% of her husband's annual income on food for herself and 10% on food for her and her husband.
- F. What are your subject's cooking and eating habits: Aija is not open to new flavors as she frequently experiences morning sickness. She typically cooks about once a week and eats that dish throughout the week but rarely cooks more than once or twice a week. She typically consumes a lot of yogurt as this does not seem to make her sick.

IV. **Weight graphed**

A. **Weight History:**

Pre-pregnancy weight- 133 pounds (60.5 kg)

Height- 5'3" (1.6 m)

BMI- 23.6 (60.5/1.62)

3 weeks= 140 pounds

2 months= 129 pounds

11 weeks= 129 pounds

B. *See attached chart of pregnancy weight gain*

C. Compare actual weight gain to expected weight gain according to prepregnancy BMI: Aija is clearly not gaining enough weight. She is well below the curve and seems to be not gaining any weight whatsoever.

V. **Nutritional care plan**

A. The most significant nutritional risk factor I see for this pregnancy is Aija's simple lack of weight gain. She has lost weight since being pregnant and her typical intake does not include almost any protein, grains, or dairy and is insufficient to promote healthy formation of the fetus. She is taking a prenatal supplement and an omega-3 fish oil supplement and so is probably getting her baby the minerals and vitamins it needs to grow but needs to increase her macronutrient consumption. Her typical intake is far too little to support weight maintenance, let alone weight gain. She could change her diet to consuming more of almost all food groups, particularly grains, protein, vegetables, and dairy to promote weight gain.

The second most significant nutrition risk I see is the nausea and vomiting that Aija experiences. She says that she does not go near the fridge because the smells make her gag and that she is not open to new flavors or eating when she is nauseous. This is very dangerous because as she skips meals, she is likely to feel more nauseous later and obviously misses out on the food and nutrition she could have consumed during that period. To better manage her symptoms, she could eat before she gets up in the morning, keep bland snacks close by for when she is hungry, and never skip meals. She also could consider taking a ginger pill supplement.

B. Aija has a lot of components in her diet that need to be could be addressed like her lack of scheduled meal times, imbalanced consumption of food groups according to Choose MyPlate, and simple lack of consumption of some food groups. However, I plan to focus in the first counseling session on symptom management. This is of paramount importance because she will not eat until her nausea is controlled. I will recommend that she consume ginger pills to help with the nausea and that she always keep bland snacks nearby for when she feels up to eating. I will also recommend that she eat a bland, grain-based snack before she gets up in the morning to settle her stomach for the upcoming day. Finally, I will counsel her to never skip meals as this will make her more nauseous later.

PART II: Follow-up

When I visited with Aija, the first thing that I addressed was her nausea and vomiting. I counseled her to eat small meals throughout the day and to never skip a meal as this might increase nausea at the next meal. I suggested trying some bland grains when she was feeling nauseous and eating before she got out of bed in the morning. I also noticed while I was doing the first part of this project that Aija seems to put a lot of faith in herbal supplements and so I suggested that she try ginger pills or vitamin B6. This took care of both her nausea and vomiting and would hopefully help with her primary nutrition risk factor of a lack of weight gain.

Upon follow-up a week later, Aija seemed to be doing better! She said she was eating more and would typically eat a small meal every two hours. I was very happy to hear this and would like to think that this is in part due to my education. She said that some foods were still making her nauseous, such as grease products, but that she overall was feeling better throughout the day. She did not take ginger pills or B6 but pointed out that there was B6 in the prenatal vitamin she was taking. However, I think that her decrease in nausea was more a result of the natural progression of pregnancy as her body got used to being pregnant more than my education. However, if I could go back in time, I would still give her those recommendations because how she feels is the biggest factor in how much she eats and therefore her weight gain. The next step would be to reassess her intake and see that it is balanced and will provide all the nutrients her baby and her body needs now that her intake is up and her nausea is down.

Aija's Nutrients Report 03/07/13 - 03/07/13

Your plan is based on a **2000 Calorie** allowance during your 1st trimester of pregnancy.

Nutrients	Target	Average Eaten	Status
Total Calories	2000 Calories	1106 Calories	Under
Protein (g)***	71 g	46 g	Under
Protein (% Calories)***	10 - 35% Calories	17% Calories	OK
Carbohydrate (g)***	175 g	137 g	Under
Carbohydrate (% Calories)***	45 - 65% Calories	50% Calories	OK
Dietary Fiber	28 g	7 g	Under
Total Fat	20 - 35% Calories	34% Calories	OK
Saturated Fat	< 10% Calories	12% Calories	Over
Monounsaturated Fat	No Daily Target or Limit	13% Calories	No Daily Target or Limit
Polyunsaturated Fat	No Daily Target or Limit	6% Calories	No Daily Target or Limit
Linoleic Acid (g)***	13 g	7 g	Under
Linoleic Acid (% Calories)***	5 - 10% Calories	5% Calories	OK
α-Linolenic Acid (g)***	1.4 g	0.5 g	Under
α-Linolenic Acid (% Calories)***	0.6 - 1.2% Calories	0.4% Calories	Under
Omega 3 - EPA	No Daily Target or Limit	3 mg	No Daily Target or Limit
Omega 3 - DHA	No Daily Target or Limit	25 mg	No Daily Target or Limit
Cholesterol	< 300 mg	346 mg	Over
Minerals	Target	Average Eaten	Status
Calcium	1000 mg	647 mg	Under
Potassium	4700 mg	1123 mg	Under
Sodium**	< 2300 mg	2080 mg	OK
Copper	1000 μ g	538 μ g	Under
Iron	27 mg	6 mg	Under
Magnesium	350 mg	106 mg	Under
Phosphorus	700 mg	813 mg	OK
Selenium	60 μ g	83 μ g	OK
Zinc	11 mg	5 mg	Under

Vitamins	Target	Average Eaten	Status
Vitamin A	770 µg RAE	321 µg RAE	Under
Vitamin B6	1.9 mg	0.5 mg	Under
Vitamin B12	2.6 µg	3.1 µg	OK
Vitamin C	85 mg	25 mg	Under
Vitamin D	15 µg	3 µg	Under
Vitamin E	15 mg AT	3 mg AT	Under
Vitamin K	90 µg	17 µg	Under
Folate	600 µg DFE	261 µg DFE	Under
Thiamin	1.4 mg	0.8 mg	Under
Riboflavin	1.4 mg	1.5 mg	OK
Niacin	18 mg	10 mg	Under
Choline	450 mg	242 mg	Under

Aija's Food Groups and Calories Report 03/07/13 - 03/07/13

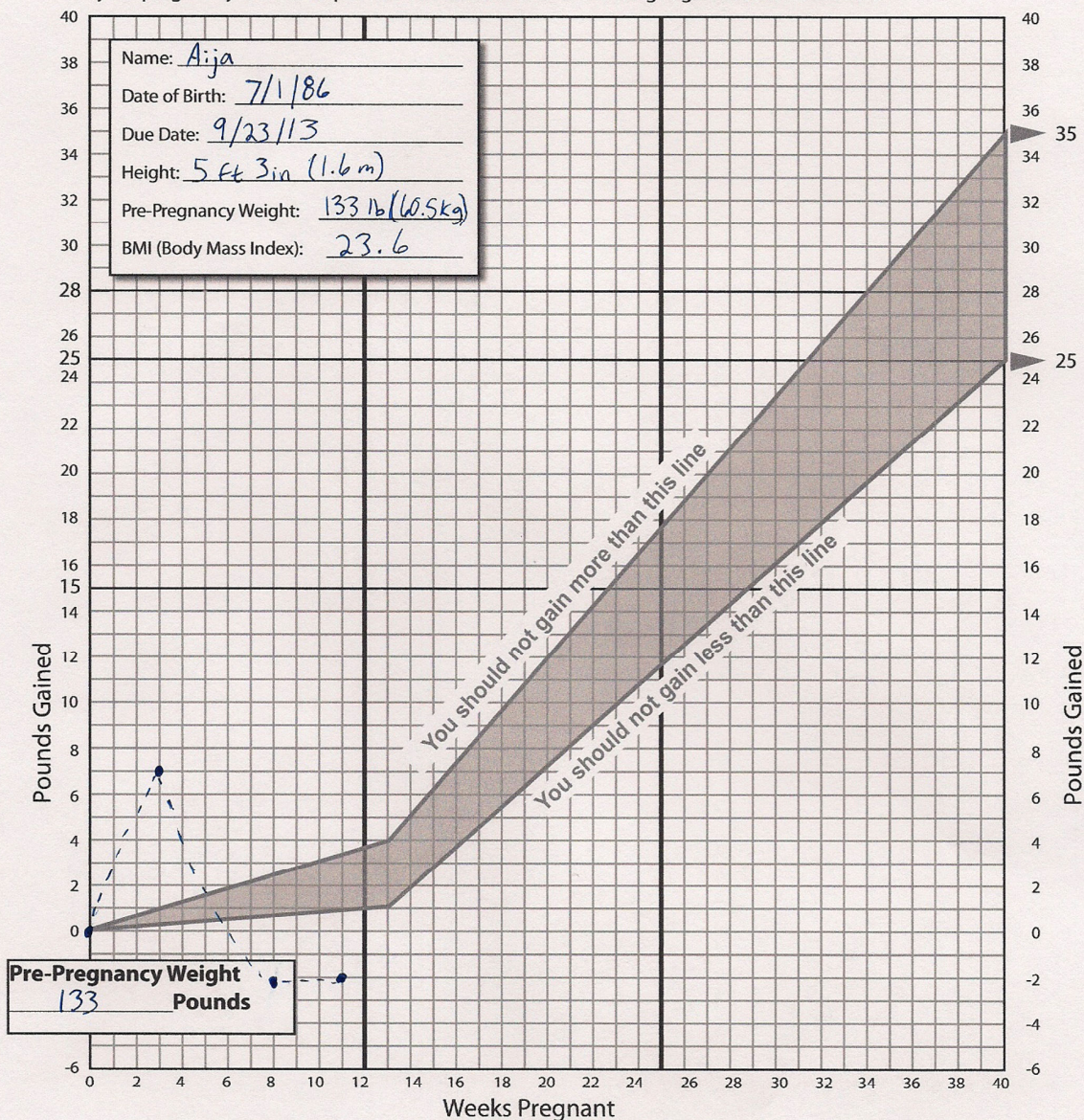
Your plan is based on a **2000 Calorie** allowance during your 1st trimester of pregnancy.

Food Groups	Target	Average Eaten	Status
Grains	6 ounce(s)	4 ounce(s)	Under
Whole Grains	≥ 3 ounce(s)	0 ounce(s)	Under
Refined Grains	≤ 3 ounce(s)	4 ounce(s)	Over
Vegetables	2½ cup(s)	½ cup(s)	Under
Dark Green	1½ cup(s)/week	0 cup(s)	Under
Red & Orange	5½ cup(s)/week	¼ cup(s)	Under
Beans & Peas	1½ cup(s)/week	0 cup(s)	Under
Starchy	5 cup(s)/week	0 cup(s)	Under
Other	4 cup(s)/week	¼ cup(s)	Under
Fruits	2 cup(s)	¾ cup(s)	Under
Fruit Juice	No Specific Target	¾ cup(s)	No Specific Target
Whole Fruit	No Specific Target	¼ cup(s)	No Specific Target
Dairy	3 cup(s)	2¼ cup(s)	Under
Milk & Yogurt	No Specific Target	1 cup(s)	No Specific Target
Cheese	No Specific Target	1¼ cup(s)	No Specific Target
Protein Foods	5½ ounce(s)	2 ounce(s)	Under
Seafood	8 ounce(s)/week	0 ounce(s)	Under
Meat, Poultry & Eggs	No Specific Target	2 ounce(s)	No Specific Target
Nuts, Seeds & Soy	No Specific Target	0 ounce(s)	No Specific Target
Oils	6 teaspoon	0 teaspoon	Under
Limits	Allowance	Average Eaten	Status
Total Calories	2000 Calories	1106 Calories	Under
Empty Calories*	≤ 258 Calories	349 Calories	Over
Solid Fats	*	244 Calories	*
Added Sugars	*	106 Calories	*

Pregnancy Weight Gain Chart in Pounds

Pre-pregnancy BMI 18.5-24.9, 25-35 pounds

If your pre-pregnancy BMI is between 18.5 and 24.9, then the recommended weight gain range for your pregnancy is 25 to 35 pounds. The red area shows the weight gain recommendation.



You have gained too little weight if:

- Your weight gain is below the red area of the chart OR
- You weigh less during your first trimester of pregnancy (from conception through week 13 of pregnancy) than you did before you became pregnant OR You have lost more than 2 pounds between week 13 of your pregnancy and delivery

You have gained too much weight if:

- Your weight gain is above the red area on the chart OR
- You have gained more than 7 pounds per month (1 month equals 4 weeks)

Talk to your health care provider if you fall above or below the recommended weight

