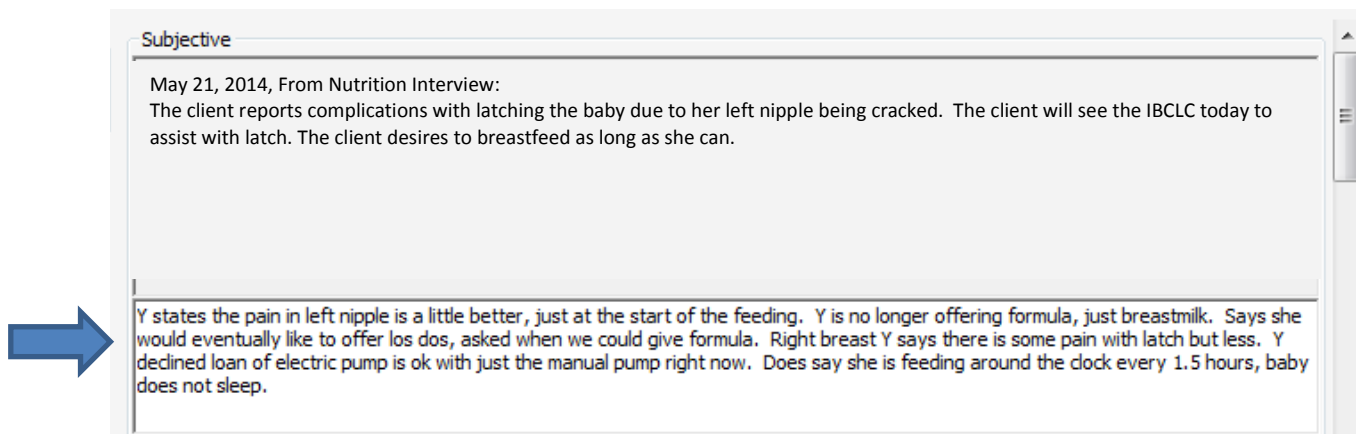


Compass Note Documentation Example Using the NCP Model

1. In the open white text box field below the *Subjective* field, enter any additional information gathered through your nutrition assessment with the WIC participant/endorser that was not included in the Nutrition Interview. Nutrition assessment involves gathering relevant health history, dietary intake, social, functional and behavioral issues, current knowledge and readiness to change.

According to the Nutrition Care Process (NCP) collecting relevant participant information is **Nutrition Assessment, step 1**. The nutrition assessment in conjunction with anthropometric measurements and client history will form the basis to determine whether a nutrition diagnosis/problem exists.



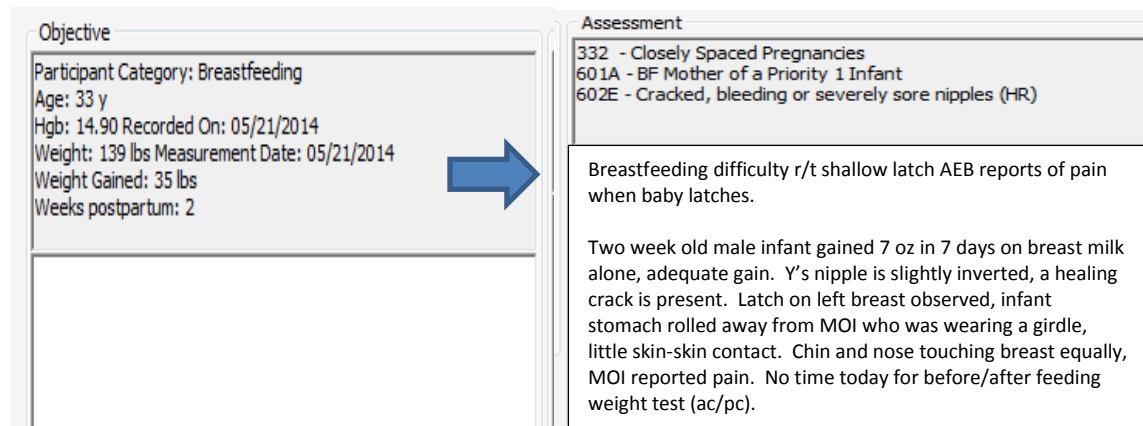
Subjective

May 21, 2014, From Nutrition Interview:
The client reports complications with latching the baby due to her left nipple being cracked. The client will see the IBCLC today to assist with latch. The client desires to breastfeed as long as she can.

Y states the pain in left nipple is a little better, just at the start of the feeding. Y is no longer offering formula, just breastmilk. Says she would eventually like to offer los dos, asked when we could give formula. Right breast Y says there is some pain with latch but less. Y declined loan of electric pump is ok with just the manual pump right now. Does say she is feeding around the clock every 1.5 hours, baby does not sleep.

2. In the open white text box field under the *Assessment* field, a nutrition diagnosis (PES) statement should be included first. The PES statement can be followed by any additional supporting information if necessary. This is **Nutrition Diagnosis, step 2** of the NCP.

If this is a follow-up visit (nutrition re-assessment) then document progress of the previous PES statement using terminology “resolved, improved, no improvement or no longer appropriate.” If a new nutrition diagnosis/problem is identified it is appropriate to write a new PES statement.



Objective	Assessment
Participant Category: Breastfeeding Age: 33 y Hgb: 14.90 Recorded On: 05/21/2014 Weight: 139 lbs Measurement Date: 05/21/2014 Weight Gained: 35 lbs Weeks postpartum: 2	332 - Closely Spaced Pregnancies 601A - BF Mother of a Priority 1 Infant 602E - Cracked, bleeding or severely sore nipples (HR) Breastfeeding difficulty r/t shallow latch AEB reports of pain when baby latches. Two week old male infant gained 7 oz in 7 days on breast milk alone, adequate gain. Y's nipple is slightly inverted, a healing crack is present. Latch on left breast observed, infant stomach rolled away from MOI who was wearing a girdle, little skin-skin contact. Chin and nose touching breast equally, MOI reported pain. No time today for before/after feeding weight test (ac/pc).

3. In the open white text box field titled *Counseling/Education*, document counseling and nutrition education information discussed with the participant/endorser. This is **Nutrition Intervention, step 3** of the NCP. At this time NCP standardized language is not used in TCHD documentation for this step. Nutrition Intervention should be driven by participant interest and readiness for change. Nutrition Education Goal setting in WIC is important to assist the family/individual to achieve positive health behaviors. This is also part of step 3, Nutrition Intervention. This may or may not link the Nutrition Intervention step (counseling) with the goals, since the goal(s) should be participant-led.

The screenshot shows a software interface for documenting a Nutrition Intervention. It features three main sections: 'Goals', 'Referrals', and 'Counseling/Education'. The 'Goals' section contains three text boxes for goal entry. The 'Referrals' section is an empty text box. The 'Counseling/Education' section is a larger text box for detailed notes. A blue arrow points to the 'Goals' section, and another points to the 'Counseling/Education' text box.

Goals	Referrals
*Goal 1 Y will try all techniques discussed in counseling	
Goal 2 tummy-tummy, infant flank in close, & wide gape	
Goal 3	

Counseling/Education

Discussed tummy-tummy, pulling flank of baby in close. Had Y try these techniques with cross cradle hold and wait for wide gape like a yawn. Deeper latch achieved with moi reporting no pain. Discussed baby's weight gain, adequate in the past week. Encouraged to call for help if pain on left side does not improve. Gave peer counselor's phone# in case assistance needed before next appointment. Discussed general policy to offer no formula in the first month when breastfeeding desired to establish milk supply.

4. Lastly, **step 4, Nutrition Monitoring and Evaluation** is included in the *Plan* text box field. Record information to follow-up at the subsequent visit, if applicable. Include criteria relevant to the nutrition diagnosis (PES) statement to determine progress and when a high risk participant should be referred back to the High Risk Counselor. At this time NCP standardized language is not used in TCHD documentation for nutrition monitoring and evaluation.

The screenshot shows the 'Plan' section of the TCHD documentation interface. It is a single text box for recording follow-up information. A blue arrow points to the 'Plan' text box.

Plan

F/u with IBCLC RD June 4th. Ask about pain with latch, ac/pc, latch evaluation, follow up on moi's breastfeeding goals and plans.