
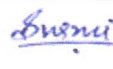

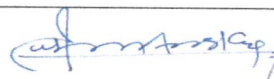
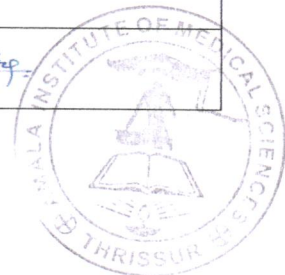



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<b>Document Name:</b>		<b>NUTRITION CLINIC DEPARTMENTAL MANUAL</b>
<b>Document No.</b>		<b>AIMS / DM / NUT -62</b>
<b>Version No.</b>		<b>02</b>
<b>Revision No.</b>		<b>04</b>
<b>Revision Date.</b>		<b>03/10/2025</b>
<b>Effective Till</b>		<b>09/04/2026</b>
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	<b>Signature</b>	
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	<b>Signature</b>	
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	<b>Designation</b>	<b>Director</b>
	<b>Signature</b>	

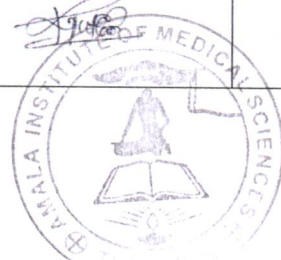


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### ADDENDUM

Sl. No.	Section No. & Page No.	Details of the Addendum	Reasons	Signature of the preparatory authority	Signature of the approval authority
1.					
2.					
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16.					

Prepared By	Verified By	Approved By	Issued By
Ms. Reena Jijo HOD Dietary Department	Ms. Susmi Alphonsa Kurian Quality Coordinator	Fr. Deljo Puthoor CMI Accreditation Coordinator	Fr. Julious Arakkal CMI Director
			





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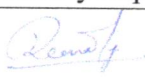
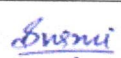
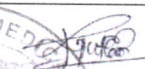
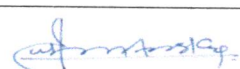
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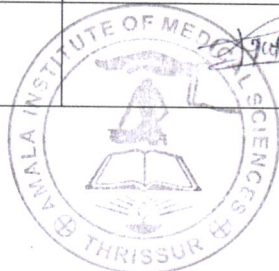
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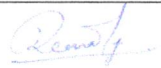
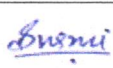
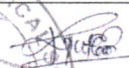
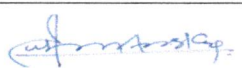


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If amendment regarding any point is required, the person who prepared the manual should contact the Quality Coordinator, prepare the amendment and get approval from approval authority. It should be attached to the Master copy and details to be entered in its amendment sheet. Quality Coordinator is responsible for issuing copy of amendment(s) to the controlled copyholder and he/she should acknowledge the same. Quality Coordinator should also enter the amendment details in the amendment sheets provided in the controlled copy.

The manual is reviewed once a year and is updated as relevant to the hospital policies and procedures. Review and amendment can happen also as corrective actions to the non-conformities raised during the self-assessment or assessment audits by NABH.

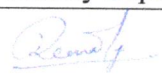
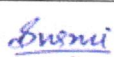
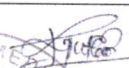
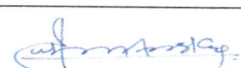
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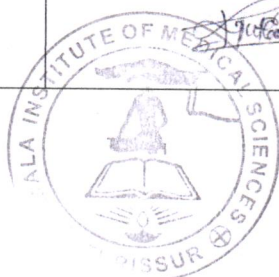


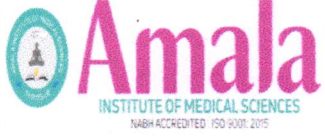
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## INTRODUCTION

Dietetics is the combined science and art of feeding individuals or groups under different economic and health condition, according to the principle of nutrition management. Dietitians are professionally educated persons who has a college degree and advanced education of qualifying experience in nutrition management in the application of the principles of that science to feeding individuals or groups. It includes planning of meals for the healthy and sick together with selection, storage, preparation and serving of foods with due emphasis on economic, social and psychological factors. The nutrition clinic department plays a crucial role in the functioning of a hospital.

Nutrition clinic in Amala was started in 2003. In Amala hospital Nutrition and Dietary department takes care of the nutritional needs of the patients provides food as per the recommendation of doctors, under the guidance of dietitian and requirements of the patients and their family members, who accompany them. It is functioning very well with the help of dietitian and other facilities.

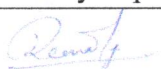
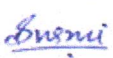
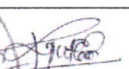
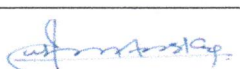
The department situated at the ground floor in the Chavara block. There are 10 dietitians in the department viz; there are trainees and interns too. In the dietary kitchen for preparing and distributing food, there are around 42 people are working. Their good coordination and sincerity help to meet the needs of the patients. The summary of total quality of food prepared for the patient is given to the dietitian for verification. The dietitian ensures that the meals are served in the proper time in the proper manner. The working hours of the clinic are 8.30am – 4.30pm.

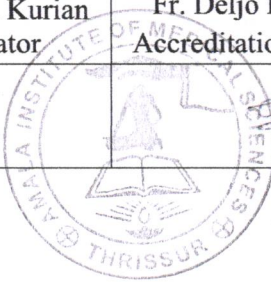
## PURPOSE

- To plan a diet for patients within the frame work of clinician's treatment plan and with consideration patient's choice with regard to social, religious and personnel factors.
- To ensure prompt and timely supply of diets and food as ordered by the patients.
- To ensure the quality of patient food achieves high level of satisfaction of patients and guests regarding the food beverage services of the hospital.

## SCOPE

- This procedure is applicable for the therapeutic and normal diet planning for all the patients under in patient care at Amala Medical College Hospital.
- It is applicable to the supply and quality assurance of inpatient food and room services.

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**1. DEFINITIONS**

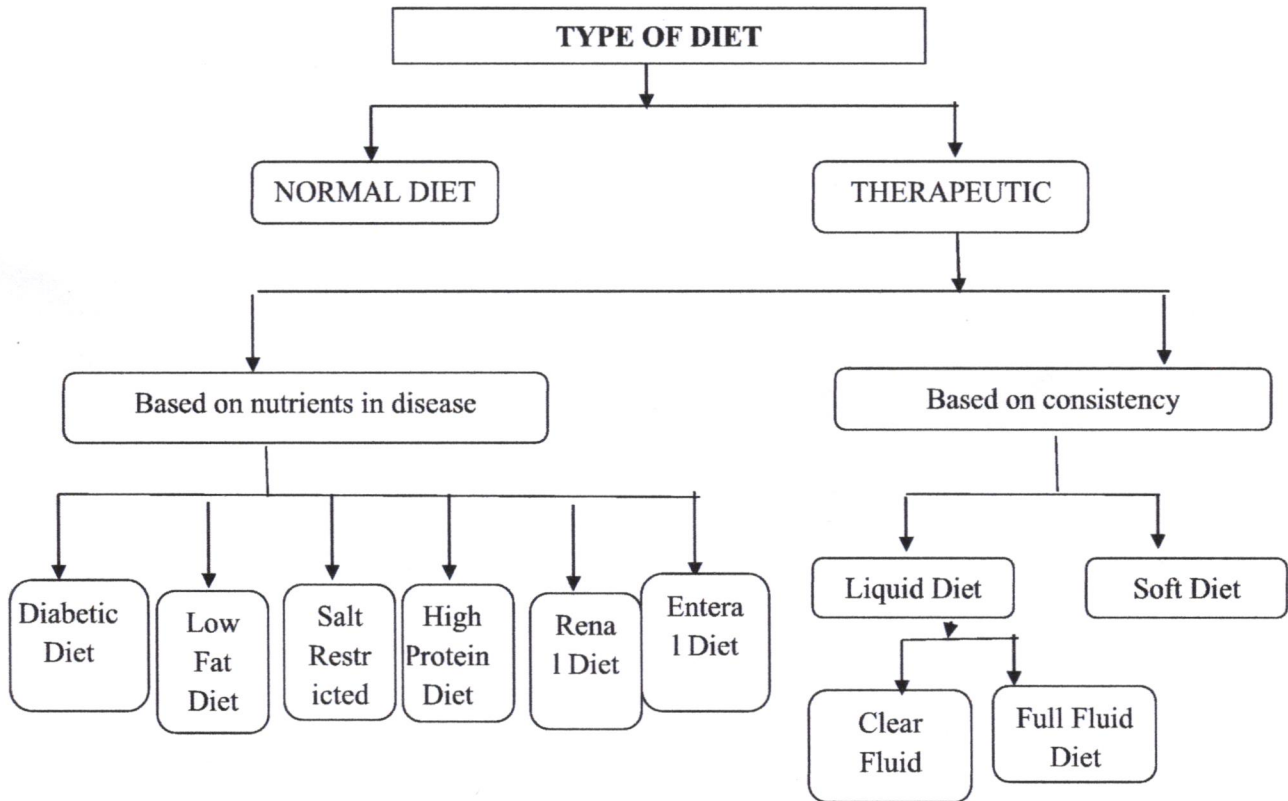
**DIET PLANNING**

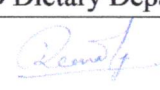
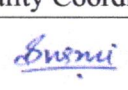
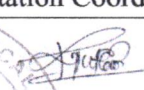
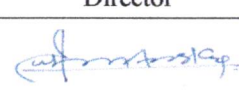
Implementation of the principle of nutrition in one's daily according to the disease conditions diet planning.

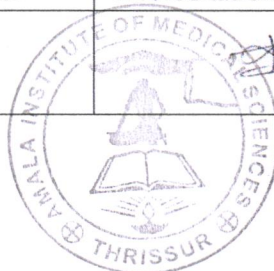
**DIET PRESCRIPTION**


Diet prescription designates the type, amount and frequency of feeding based on the individual's disease process and disease management along with the calorie level(or) other restrictions to be implemented. It may also limit or increase various components of the diet such as carbohydrate, protein, fat, vitamins, minerals, fiber, phytonutrients and water.

**TYPE OF DIET**



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**LIST OF SERVICES PROVIDED:**

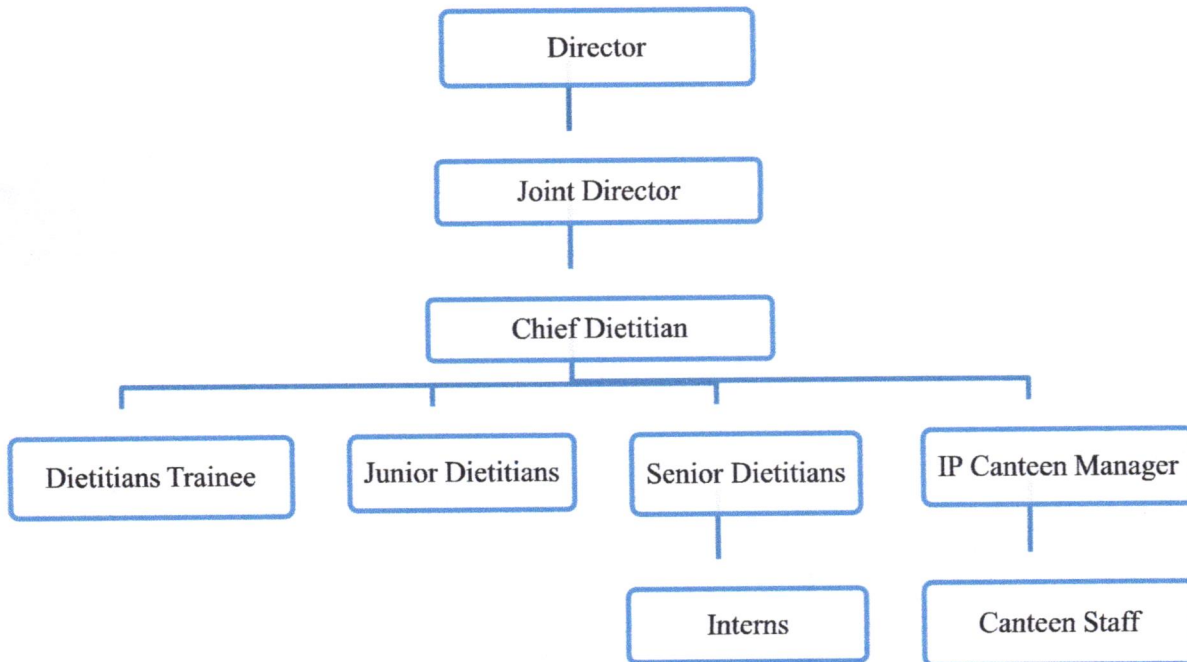
The services provided by the department of nutrition and dietetics are:

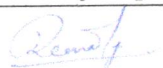
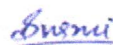
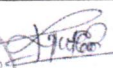

**1. DIET COUNSELLING**

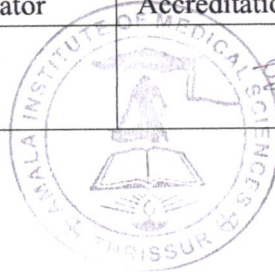
- 1.1 IP patient counseling
- 1.2 OP patient counseling


**2. DIETARY SUPERVISION**

**DEPARTMENTAL HIERARCHY:**



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Ms. Reena Jijo HOD Dietary Department	Ms. Susmi Alphonsa Kurian Quality Coordinator	Fr. Deljo Puthoor CMI Accreditation Coordinator	Fr. Julious Arakkal CMI Director
			




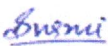
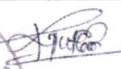

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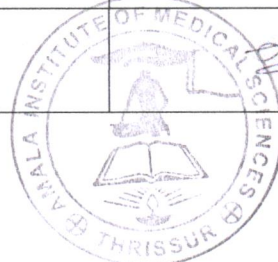
**COMPETENCY MATRIX:**


Sl. No.	Name	Designation	Qualification	Experience
1	Dr.Reena K.Chittilappilly	Chief Dietitian	PhD, MSc.	22yrs
2.	July C.J.	Senior Dietitian	PGDND	10yrs
3.	Merin Jose P.	Dietitian	MSc	9yrs
4.	Jomol O.J.	Dietitian	MSc	4yrs
5.	Geethu Mohandas	Jr. Dietitian	PGDND	3yrs
6.	Gopika k	Jr. Dietitian	MSc	2yrs
7.	Helen Maria Stanley	Jr. Dietitian	MSc	2yrs
8.	Angel Maria V.J.	Jr. Dietitian	MSc	2yrs
9.	Sreelakshmi K.S.	Jr. Dietitian (T)	MSc	10 months
10.	Sneha Saju P.	Jr. Dietitian (T)	MSc	4 months
11.	Joshiya P.J	Jr. Dietitian (T)	MSc	1 month

**STAFFING PATTERN:**

Sl.No.	Designation	Working Hours	Number of Staff
1	Chief Dietitian	8 hours	1
2	Senior Dietitian	8 hours	1
3	Dietitian and Trainee	8 hours	9

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Ms. Reena Jijo HOD Dietary Department	Ms. Susmi Alphonsa Kurian Quality Coordinator	Fr. Deljo Puthoor CMI Accreditation Coordinator	Fr. Julious Arakkal CMI Director
			



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## DUTIES AND RESPONSIBILITIES:

### Chief Dietitian:

- Assign duties to the dietitians and trainee students in the hospital.
- To perform the duties assigned by the superiors.
- Give diet advice and counseling to patients.
- To manage and control all the staff in dietary department.

### Senior Dietitian:

- Performs all the duties assigned by the chief dietitian.
- Conduct ward rounds and check whether the in-patients are meeting the diet requirements.
- To plan diet for the patients according to the individual requirement and disease condition.
- To give diet counseling to the patients in the diet clinic.
- To provide diet sheet to the patient and explain them on the diet follow up at the time of discharge.

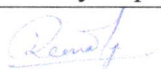
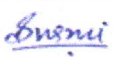


## POLICIES AND PROCEDURES:

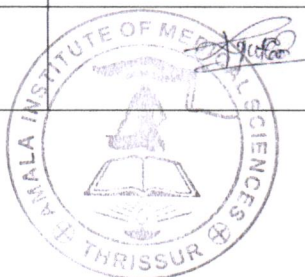
### Diet Counseling:


The major objectives of diet counseling shall be to educate the patients regarding the nature of the disease, how they can be identified and prevented and specific therapy.

### In-patient counseling:

- Dietitian collects the patient's admission data from the local area network (LAN) and starts ward rounds according to the duty schedule.
- Admitted patients will undergo nutritional screening and assessment within 24 hours of admission and the same will be recorded in the patient's chart.
- Dietitian gives diet counseling according to the patient's present condition, diagnosis, biochemical values and doctor's suggestions if any.

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- Calculation of calorie, protein, and fat is done using the patient's anthropometric data or as RDA for Indians suggested by ICMR 2010 or according to the disease condition
- A diet sheet which consists of dietary guidelines is provided for all patients after counseling and a sample menu is given for the necessary patients.
- A menu is prepared for therapeutic diet according to the patient's disease condition and enters it in the kitchen diet order for necessary patients.
- Patient review will be taken and noted in chart daily for therapeutic cases and for non-therapeutic cases review is done once in two days.

**Outpatient counseling:**

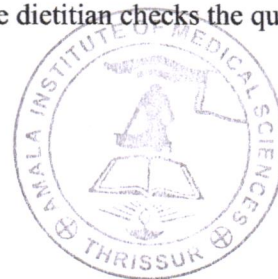
- Diet counseling for the outpatient is given by the dietitian in the OPD (Nutrition clinic).
- The patient consults the dietitian on their own interest or through reference by the doctors.
- Diet counseling is given as per the patient's diagnosis
- Anthropometric data, diet history, 24-hour recall, food intake pattern, likes and dislikes, exercise pattern etc. are noted and thereafter diet advice is given.
- Diet advice and diet sheet is provided accordingly.
- In certain cases, if a review is required, (for example, weight reducing diets) the patient is advised to visit dietitian after one month.

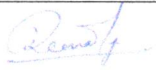



**Dietary supervision:**


- The dietitian is also responsible for the supervision of the canteen. The dietitian checks the quality of the food supplied.

The diet charts provided from the department are the following:

- Diabetic Diet Chart
- Renal Diet Chart
- Low Fat Low Cholesterol Diet Sheet




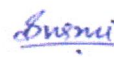
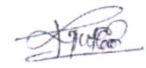

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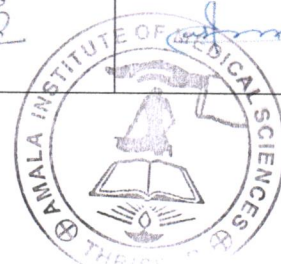
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- Pregnancy And Lactation Diet Sheet
- Tube Feed Menu Plan

**QUALITY ASPECTS**

- **Obstetric patient’s assessment also includes maternal nutrition by dietitian**
- **Patients admitted to the hospital are screened for nutritional risk.**
- All IP patients screened by staff nurses during initial nursing assessment
- Nutritional screening is done by a staff nurse
- Based on the clinical assessment, nutritional screening may also be done by the dietitian by using a validated tool
- **Nutritional assessment is done for patients found at risk during nutritional screening.**
  - A dietitian to be done assessment for all patients at risk during nutritional screening by using a validated tool
  - Assessment shall include at minimum planning, preparation, & distribution of diet to the patient
- **The therapeutic diet is planned and provided collaboratively.**
  - Nutritional assessment should result in the formulation of therapeutic diet into regard the food allergies, food habit (veg/ non veg) & likes and dislikes.
  - The process ensures the patient receives food as per the diet order
- **Patients receive food according to the written order for the diet.**
  - Receive food as per the clinical need, written order to be normal/ therapeutic.
  - Order is written in the diet chart (pink color) in the patient file.
  - In case of therapeutic diet, dietitian shall prepare this in the form of a diet sheet & patient shall receive food accordingly eg diabetic diet, Total Parenteral nutrition, high protein diet
- **When family provides food, they are educated about the patient’s diet limitations.**
  - Dietitian/ nurse shall ensure education during planning.
  - Diet education to be documented in the patient education sheet attached in the case sheet
  - When family provides food monitor the compliance with prescribed diet
- An integrated care plan, including professional, nursing, nutritional, supportive care, should be developed & implemented appropriately by the representatives of various disciplines & specialties in **multidisciplinary & multi-specialty care of a patient**
- **Patient and/ or family are educated about their specific disease process, complications and prevention strategies.**

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- Dietary plan to be educated & documented in the diet sheet.
- **Patient and/ or family are educated about food- drug interaction.**
  - List of such drugs and accordingly educate patient and family about their diet during medication. E.g: no alcohol when taking metronidazole.
- **Patient and/ or family are educated about diet and nutrition.**
  - Education includes relationships between various foods and supplements and specific health conditions.
  - Incorporate general recommendations for following a healthy diet.
- **Patient and/ or family are educated about their specific disease process, complications and prevention strategies.**
  - Include life style modifications (stress management, physical exercise, cessation of smoking and substance abuse), diet changes and immunizations.
  - Use Booklets/ leaflets/ videos etc.
- ✓ The staffs are made aware of the system of appraisal at the time of induction - Awareness could be done in the service booklet.
- ✓ Performance is evaluated based on the pre- determined criteria- Based on KPI/key result areas derived from Job Description.
- ✓ The appraisal system is used as a tool for further development- By identifying training requirements and provides the same, Key result areas are identified for each staff and provide training. The organization should have written guidance for management of underperformance effectively.

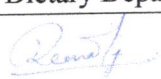
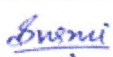
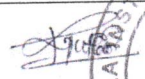

Performance appraisal is carried out at defined intervals and is documented- Done at least once a year.

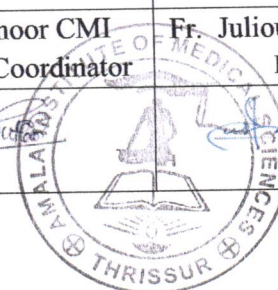
### Health needs of the employees


Every employee shall be subjected to medical examination either at the time of appointment or any time prior thereto and such medical examination shall be carried out by the medical Officer.

All employees undergo regular health check-up once a year and the results are documented.

**Aware about the fire and occupation safety aspects (refer HIC and Safety manual)**

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### GENERAL POLICIES

One Amala → Hospital → Updates → Quality Updates → **Employee Guidebook**

### LIST OF REGISTERS

Sl. No	Name of Register
1	IP counseling register
2	OP Counseling register
3	Dietary evaluation register

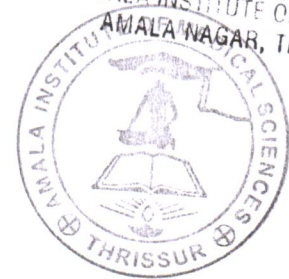
### LIST OF FORMS

Sl. No	Name of Forms
1	Nutritional screening form.
2	Subjective Global Assessment.

### LIST OF EQUIPMENT

Sl. No	Name of Equipment
1	Stadiometer with weighing machine

*Betsy*  
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