

### Therapeutic and Modified Diets Cheat Sheet by harpieee via cheatography.com/71374/cs/18471/

(avoid cereals, beans, fruits, & veggies)

Gastric or duodenal ulcers

Transition from liquid to

Oral/facial

Consists of products that are liquid at room temperature:	Indications:
Primarily water	Resting the GI tract
Tea	Maintaining fluid balance
Coffee	Immediate postoperative period
Broth	Nausea, vomiting, diarrhea
Carbonated beverages	Preparation for diagnostic testing
Clear juices	
Gelatin	

Full-Liquid Diet	
Consists of:	Indications:
Clear liquids	Advance to this if tolerates clear liquids
Milk products: milk, custard, pudding, creamed soups, ice cream/sherbert	Intolerance to solid foods
Strained fruits, vegetables, & cereal	Febrile illness
	Acute gastritis

Short term basis only; nutritionally inadequate

Pureed Diet	
Consists of:	Indications:
Food and fluids that have been pureed to a thick liquid form	Transition from full liquid to regular diet
Scrambled eggs	Swallowing or chewing difficulties

	Pureed Diet (c	ont)	
ns:	Pureed meats, vegetables, fruits		Oral/fa
	Consistency va	ries with clien	t needs
ne GI			
	Soft Diet (Blan	d or Low-Fib	er)
ng	Consists of:	Indications	s:
e ative	Low fiber	Transition f	rom liqui
	Lightly seasoned	Acute infec	tions
	Easily digested	Chewing di	fficulties
on for	Smooth & creamy	Gastric or d	uodena
- 1	Non-gas-formin	g	

Mechanical Soft Diet		
Foods to exclude:	Indications :	Consists of foods that require minimal chewing:
Dried fruits	Chewing or swallowing difficulty	•
Most raw fruits & veggies	Head, neck, or mouth surgery	Canned fruits
Nuts and food with seeds		Softly cooked veggies
	Following CVA	Cheese
		Rice
		Light bread

Low-Protein Diet	
Limit high protein foods	Indications:
Meats	Hepatic encephalopathy
Eggs	Hepatic coma

Low-Protein Diet (cont)			
Milk & milk products Renal impairment			
Beans			
Other dietary considerations:			
Increase carbohydrates to meet nutritional			
needs			
Limit sodium in presence of edema or ascites			

High-Protein Diet	
Encourage high biological value (HBV protein)	Indications:
Egg whites (gold standard)	Tissue repair and building
Soy products	Burns
Milk products	Malabsorption syndromes
Fish & fowl	Pregnancy
Organ and meat sources	

Encourage oral fluids to decrease damage to renal capillaries as a result of increased protein.

Diet for	Alteration	in .	Amino-Acid	
Metabol	lism			

Use for phenylketonuria (PKU), galactosemia, and lactose intolerance

Dietary restrictions are aimed at reducing or eliminating the offending enzyme

Avoid milk & milk products for all three diets; include soy-based supplements

Supplement calcium and vitamin D in those who have lactose restricted or eliminated diets

PKU:	Avoid high protein foods (meats, dairy products, eggs)
	Avoid aspartame (because it contains phenylalanine)
Galactos emia:	The simple sugar in lactose must be avoided

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## Cheatography

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Low-Chol	esterol Diet	
Indicati ons:	Limit animal products that are high in low- density lipoproteins, saturated fats, and trans fats:	Encourage HDLs, omega-3 fatty acids, and unsaturated fats:
Cardiova scular disease	Egg yolks	Sardines
Diabetes mellitus	Organ meats	Salmon
Hyperlipi demia	Fatty meats (such as bacon)	Olive & flaxseed oils
	Whole milk	Shellfish
	Butter	Walnuts
		Fruits & veggies
		Lean meats
		Skinless fowl

Modified-Fat Diet		
Indications:	Foods allowed:	Foods to avoid:
Gallbladder disease	Two to three eggs per week	Whole milk products
Hepatic disorders	Lean meat, fowl, fish	Gravies, creams
Cystic fibrosis	Fruits & veggies	Fatty meat & fish
Malabsorption syndrome	Bread & cereal	Nuts & chocolate
		Polyunsatur ated oils

Potassium-Modified Diets		
Low-potassium foods:	High-potassium foods:	
Breads	Bananas	
Cereals	Oranges	
Asparagus	Milk	
Cabbage	Spinach	
Cherries	Apricots & prunes	
Blackberries & blueberries	Soy, lima, and kidney beans	
	Baked potatoes (white and sweet)	

Sodium-Restricted Diets		
Indications:	High-sodium foods:	
Hypertension	Salty snack foods (such as potato chips)	
Heart failure	Canned soups & veggies	
Myocardial infarction	Baked goods that contain baking powder or baking soda	
Adrenal cortical diseases	Processed meats (bologna, ham, bacon)	
Kidney disease	Dairy products, especially cheese	
Liver cirrhosis	Pickles, olives	
Pre- eclampsia	Soy sauce, steak sauce	
	Salad dressings	

### Iron Alterations

Increased iron intake is indicated for correction or prevention of iron deficiency anemia, which is most likely to occur in infants, adolescents, and pregnant clients

Iron Alterations (cont)

Food sources high in iron: fish, meats (particularly organ meats), green leafy vegetables, enriched breads, cereals and macaroni products, whole grain products, dried fruits (raisins, apricots), and egg yolks

Vitamin C enhances absorption of iron from the GI tract

Oral iron supplementation can cause constipation and GI distress, so adequate iron intake through foods is ideal

#### **Calcium Alterations**

Increased calcium intake is indicated for growing children and adolescents, pregnant and lactating clients, and postmenopausal clients (to help prevent osteoporosis and osteopenia)

Food sources high in calcium: milk, milk products (yogurt, cheese); dark green vegetables (collard greens, kale, broccoli); dried beans and peas; shellfish and canned salmon; and antacids

No more than 600 mg calcium can be absorbed at one time, so supplements should be taken three times daily.

No more than 2,500 mg of calcium should be consumed per day.

Vitamin D is required for absorption of calcium from the GI tract.



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