

When you have questions, this list may help direct you.

Any KSHC questions: Sharon Aronoff, 818-677-6328, sharon.aronoff@csun.edu
Marianne Link, 818-677-3690, marianne.link@csun.edu
Susan Krikorian 818 677-6128, susan.krikorian@csun.edu

Nutrition questions: Ellen Bauersfeld, RD, ellen.bauersfeld@csun.edu

Point 'n Click questions: Lynne Landeta, 818-677-3660, lynne.landeta@csun.edu

Grade/class related questions Dr. Terri Lisagor, terri.lisagor@csun.edu

If you are going to be late/or not coming in:

First, call 818 677-3669 (note time and person you spoke with),
Second, Call Marianne or Sharon
Third, Send an e-mail to Dr. Lisagor

The PNC program is a collaboration with FCS, the KSHC, and the Health Promotion (HP) Department. We provide counseling space, materials and supplies, and the scheduling and staff support you will need to be successful. We are **not** involved in classroom issues or grading.

In addition to counseling appointments, there will be opportunities for outreach/tabling and speaking engagements at campus programs and events. Tabling events are a great way to market your services!

Please note: This information for the Klotz Student Health Center only. **The Oasis is a separate placement and their protocols may not be the same as those of the health center. You will have a separate orientation for Oasis, different trainings to complete and separate forms to fill out, and different supervision.**

Health Center Hours

Monday-Wednesday: 8:00a.m.-5:00p.m.

Thursday: 9:00am-5:00pm

Friday: 8:00am-5:00pm

Appointment Line: 818 677-3666

Online Appointments: myhealth.csun.edu

www.csun.edu/shc

Safety and Security

Personal safety of SHC employees and students is paramount. If, for any reason, you are uncomfortable meeting with a patient, inform a staff member immediately--- before or during an appointment.

Belongings: If you bring personal items to the SHC, keep them out of sight. Do not leave them unattended or in the office beyond your hours. Most often, theft is a crime of opportunity.

Security Access Code: Security doors are located throughout the SHC to limit access to clinical areas. Use your access code for second floor clinic access. Patients must always be escorted into the clinic. Please do not let anyone else through the door. Public restrooms are located on the 1st floor next to the lab.

Emergency Evacuation: The SHC conducts emergency evacuation drills periodically. Drills will be announced over the intercom. Leave the office with your patient, close the door behind you, and proceed to the nearest exit or stairway. Do not take time to gather belongings or turn off equipment. A building warden will conduct a room-to-room search to be sure the entire building is evacuated before the drill can be completed.

Confidentiality

Maintain a professional relationship with patients. Never share personal information including your cell or home phone number, CSUN or personal e-mail address. You may not e-mail a client for any reason. If you need to call a client, you may use the phone at the SHC. If a client needs to reschedule with you, they can do so online (myhealth.csun.edu) or by phone (818 677-3666). Please let them know **your** hours at the SHC, if they wish to see *you* for follow-up. **No information that can identify a patient may leave the SHC in any form: hard copy, email, CD, flash drive, etc.!!!**

HIPAA: HIPAA stands for the Health Insurance Portability and Accountability Act of 1996. This is a law to protect patients' privacy in the health care field. The legislation made sure there were standards to safeguard the privacy of personally identifiable health information, and that there is enough security for the systems that store and maintain the information. We must ensure that patient information is not left on someone's desk or that we do not have conversations about patients that might jeopardize their confidentiality. For example, discuss patients only with HP professionals, your instructor, and in the PNC class. Do not discuss a patient with anyone who does not have a need.

Scope of Work

PNC appointments are free for all CSUN students, staff, and faculty. Students can schedule appointments online or by calling the SHC appointment line. Faculty/staff must make an appointment by phone. Typical clients are seeking information for weight management, healthy eating, vegetarianism, eating on a budget, etc. Patients may be seen once or multiple times.

Patients dealing with more complex health issues (i.e., eating disorders, pregnancy, diabetes) should be referred to Ellen Bauersfeld, RD. Ellen can provide services beyond the semester you are here. If you are unsure if you should make that referral, please consult with Ellen or your professor for guidance.

Services are not available for community members and you may not provide counseling for your family or friends.

Professional Attire

Please wear a clean, wrinkle-free lab coat when counseling patients. Lab coats should not have identification from another institution or program. PNCs will be issued nametags that are to be worn while you are working in the SHC. Please keep the nametag secure. At the end of the semester we ask that you turn in your nametag.

PNC Counseling Room

Equipment and supplies including food models and an Omron body fat analyzer are available for your use while counseling. The Omron should be kept in the desk or cabinet when not in use. Please do not remove models or supplies without contacting Sharon or Marianne.

Be prepared to leave *the office a few minutes early so that the next PNC can start on time*. This means, a new appointment (60-minutes) lasts approximately 50 minutes and follow-ups (30 minutes) are about 25 minutes. Log off the computer and put supplies back in place.

If you wish to use the PNC office outside your hours, you may, when available. Please notify an HP staff member first. Priority for use will always be given for the completion of ADIME notes. Because confidentiality and privacy are of the highest concern, friends and personal business do not belong here.

Educational and Marketing Materials

The SHC has standards for marketing and educational materials. The only marketing material to be used is the FCS flyer. There are approved educational materials available that will provide a range of basic information that is useful for clients and outreach/tabling. If there are additional materials you would like to use, please have it approved for use by your professor and then by Sharon. Please do not use materials without prior approval.

Media Requests

Please refer all media requests including Daily Sundial interviews, journalism class projects, broadcast journalism and any other media requests to Sharon at x6328 **before** proceeding with the appointment.

Patient arrival

Patients must check in at the first-floor reception desk, where they will be directed to the second floor waiting area. When your patient checks in, the bar on the appointment box in Point 'n Click will turn red. Walk out to the waiting room and call out the patient's first name only, introduce yourself by first name only and title (e.g., Sally, Peer Nutrition Counselor) and escort them to the office.

Point 'N Click Electronic Health Record (PnC)

Point and Click is the computer program that manages/stores patient information at the Klotz Student Health Center. Per health center policy, PNCs are to write chart notes within 24 hours of seeing a patient. All patient notes are to be input into Point 'N Click within 72 hours of patient visits. Although the PNC has 24 hours to write the ADIME note, the Word document should be prepared immediately after the visit (or as soon as possible) A delay in posting a chart note into Point 'N Click is against SHC policy and can result in citations by the AAAHC accrediting agency.

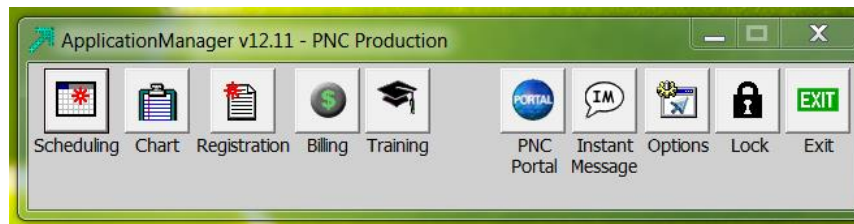
First, you will need to log onto Windows. The Windows logon screen is the first screen you will see on the computer. If you cannot remember your ID or password, contact the CSUN ITR Help Desk at 818-677-1400. (This is the ID you use to log on to any CSUN computer.)



Then, select the turquoise arrow icon to open the Point n Click program.

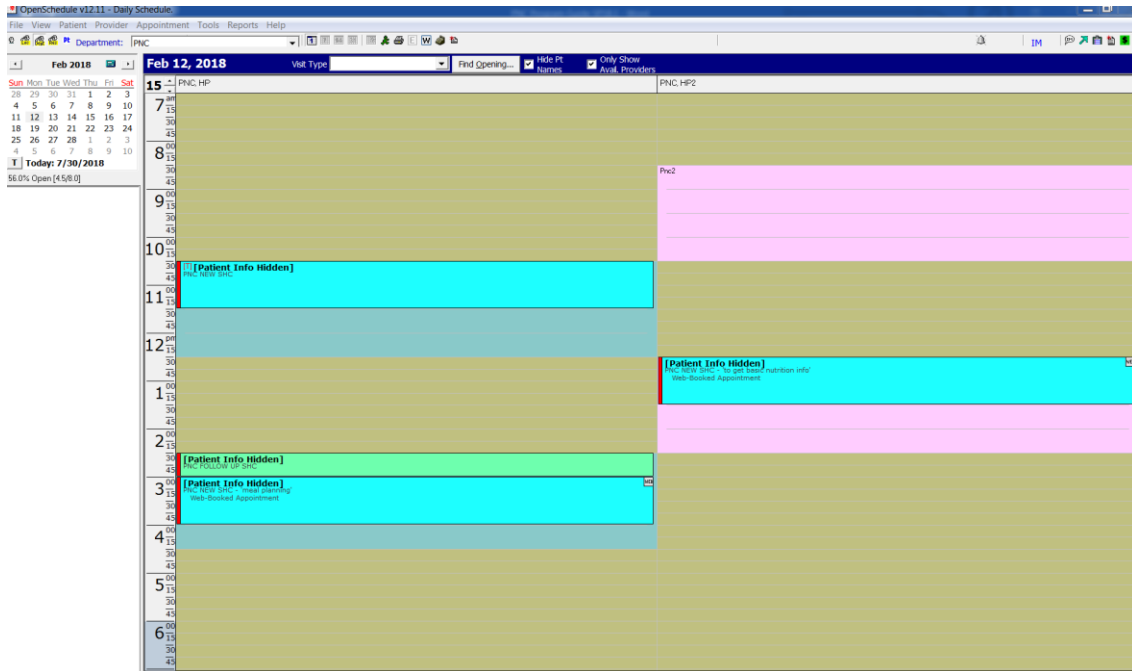
You will use your CSUN Login Name to access PnC. Enter your Login Name and password. This login information is case sensitive. .

Single click on "Enter." You will see a horizontal bar with icons. Click on the Scheduling icon. This will take you to the Open Schedule screen.

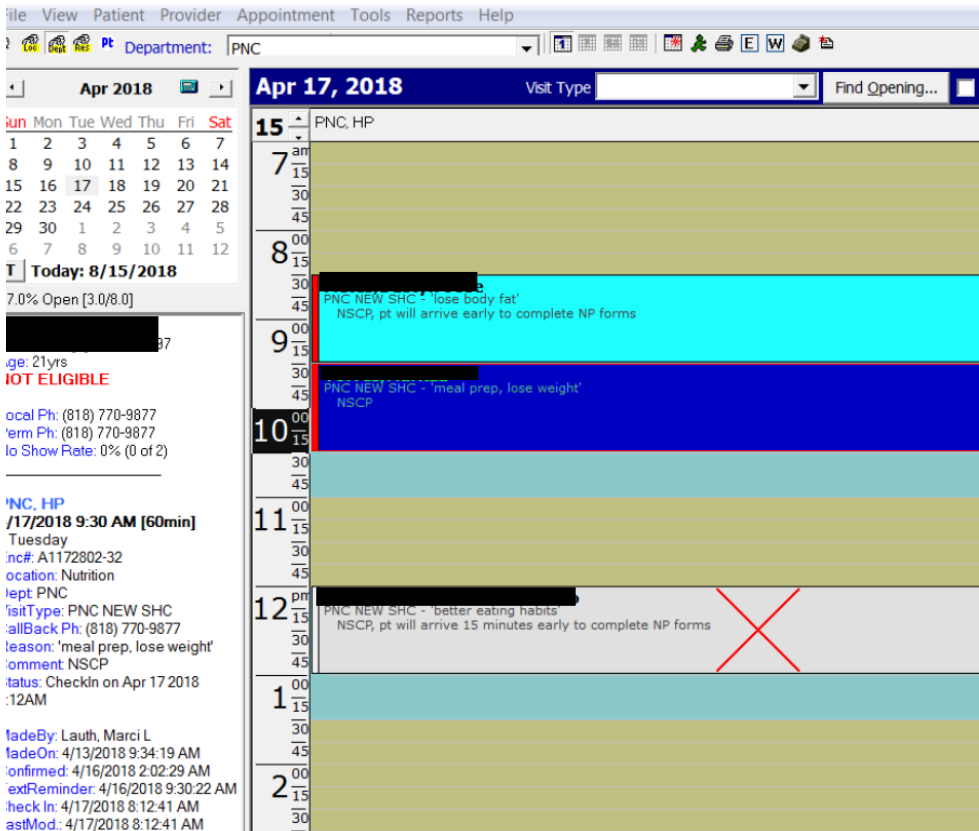


1. Look to the top left corner of this page. Click on the yellow icon labeled Dept.
2. In the drop-down box located to the right of the yellow icons, select PNC or Oasis/PNC You will see PNC in the box next to "Pt Department:" The calendar defaults to the current date.

When PNC schedules have been entered into the system, you will see two columns on this screen: PNC, HP1 and HP2. To view appointment details, double click on an appointment



In Open Schedule on the left side of the screen, under the calendar, you can view the history on a specific appointment. You will see visit type, date and time of the appointment, and who created the appointment.



Scheduling a follow-up appointment.

Right click on your patient appointment. Select new appointment from the dropdown box. Click Visit Type: New
Select date and time for new appointment. Follow-ups will default to 30 minutes.

View a Reason in the “Reason” box (e.g., Weight Management).

Save appointment (bottom right)

The screenshot shows the 'OpenSchedule v12.11 - New Appointment' window. The 'Patient' field is highlighted in yellow. The 'Appointment Details' section includes 'Provider(s)' set to 'PNC, HP2', 'Visit Type' set to 'New', 'Location' set to 'Nutribon', and 'Dept.' set to 'PNC'. The 'Date/Time' field shows 'Mon 2/12/2018' at '09:00 AM'. The 'Reason Code' is set to '(none)'. The 'Cal Back #' field is empty. The window has a menu bar with 'Appointment Type', 'Patient', 'Meeting', 'Projects', 'Group', and 'Outreach'. The bottom right corner has buttons for 'Help', 'Save Appt', and 'Cancel'.

If your PnC session is complete, click on the X in the upper-right portion of the screen or select File Exit to log out. Exit in the same way from the horizontal bar that appears.

CHARTING YOUR PATIENT VISIT NOTES

1. While you are seeing your client, take detailed notes using the ADIME template. Create your alphanumeric code. This goes at the top of the ADIME note. The code is: the four-digit appointment date, patient initials, four-digit appointment time (military time), and your first name. Ex: John Doe's appointment was 9:30 on February 15th. The code is: **0215jd0930yourfirstname**. Make sure all sections of the template are complete. If there is no information applicable, indicate with N/A.
2. Within 24 hours, PNC prepares an ADIME note as a Word document. ***It is critical that no identifying patient information be included in the note (or leave the SHC).*** Identifying information includes first or last names, student/staff identification numbers, phone number, or email address.

The following table illustrates the timeline for documenting ADIME notes. Note: If a circumstance arises where a PNC cannot meet the above timeline, the PNC must inform an HP staff member.

	Word Doc emailed to Professor by: (24 hours)	Final document approved by professor: (72 hours)
Monday	Tuesday	Thursday
Tuesday	Wednesday	Friday
Wednesday	Thursday	Monday
Thursday	Friday	Tuesday
Friday	Monday	Wednesday

3. Using your CSUN email address **only**, PNC emails the ADIME note to the PNC Professor.
4. Your professor will make recommendations/revisions to the ADIME note, if needed.
5. Your professor will email the revised ADIME note back to you. You will make changes and resubmit the note to your professor. This will continue until you receive final approval.
6. When your professor determines the ADIME note is complete, the instructor will approve the note and forward it to the SHC to be scanned into the Point 'n Click electronic health record.

Creating your Word Document Notes

Enter the ICD 10 code. You can find the ICD 10 code at <http://www.icd10data.com/ICD10CM/Codes>. These codes identify diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases based on the patient's complaint/reason for the visit.

- Recent unplanned weight loss likely due to medical problem: abnormal weight loss
- Recent unplanned weight gain – cause not specified: abnormal weight gain
- Client has BMI 30-39: obesity
- Client has BMI >39: morbid obesity
- Client states has anorexia nervosa
- Client has a lack of appetite and does not want to eat: anorexia
- Client appears to eat a variety of nutritious foods in needed quantities (based on MyPlate): healthy eating
- Client needs to improve nutritive content of diet for sports performance: sports nutrition
- Client is vegetarian and needs to change food intake to obtain nutritious diet: vegetarian
- Client states has high cholesterol, triglycerides, LDL: hyperlipidemia mixed
- Client states has high cholesterol: hyperlipidemia
- Client states is anemic or has iron deficiency: iron deficiency
- Client states has high blood pressure: hypertension, unspecified
- Client states has heartburn or gastric ulcer: heartburn
- Client states has lactose intolerance: lactose intolerance
- Client states has Type 2 diabetes: diabetes with no complications

Enter the Complaint (reason why client made appointment for PNC):

- Client is member of athletic team on campus: sports nutrition
- Client wants to eat healthy diet but does not want to follow vegetarian diet: healthy eating
- Client wants to change weight – gain or lose: weight loss/gain
- Client wants to prevent further weight gain or weight loss: weight management
- Client concerned about his/her high blood pressure: high blood pressure
- Client is concerned about decreased frequency of stools: constipation

ADIME Note**Assessment**

Document information that is relevant to the current visit that you obtain by talking to the patient. This may include food/nutrition related history, food allergies/intolerances, pertinent medications, knowledge/belief, food and supplies, physical activity, anthropometric measurements, biochemical data, nutrition focused physical findings, and client history (Personal hx, medical/health family hx, treatments, including complementary/alternative, & social history).

Diagnosis

1. Determine which domain the nutrition issue falls into. Is this an intake issue (excessive calorie intake), a clinical issue (swallowing difficulty) or behavioral-environmental issue (food- and nutrition-related knowledge deficit)? Estimate kcal needs and create a PES statement.
2. Enter the Stage of Change at which you assess your patient to be.

Intervention

Formulate a plan including what you will do to improve the nutrition problem. As you plan the nutrition intervention determine patient goals for improvement and expected outcomes. Choose the intervention that relates back best to the etiology of the nutrition problem. Interventions will be related to one of the following domains:

- Food / nutrition delivery → *Ordered Ensure BID; recommended increase tube feeding to goal of 60 cc/hr*
- Nutrition Education → *Reviewed and gave pamphlet for 2gm Na diet; provided list of high fiber foods*
- Nutrition Counseling → *Goal set for pt to consume bacon only twice per month; pt to keep food and exercise log for f/u in 1 week*
- Coordination of Care → *Discussed insulin regimen with physician; advised RN to administer 2.0 kcal/ml supplement with med pass; talked to RD at nursing home about pt transferring there, referral to speech therapist for swallow eval*

Your recommendations are suggestions on *how* the patient can carry out the intervention.

- If your intervention was for the patient to cut down on the consumption of bacon, you may recommend alternatives such as turkey bacon.

Monitoring and Evaluation

Ask → what are some of the parameters you would look at or follow to monitor progress with your intervention?

Examples – weight, BMI, lab values, wound healing progress, intake

Monitoring: Review & measure status at scheduled times – MUST INCLUDE A TIME FRAME!!!!

Data you follow related to nutrition diagnosis. What are you going to monitor or review?

Evaluation: Compare current findings with previous status, intervention, goals, and/or reference standards. Did the outcome meet, partially meet, or not meet the goals?

Patient Code Number: mmdd(patient initials)(time)(PNC first name)

ICD 10 Code:

Date patient was seen:

Complaint/Reason patient stated for visit:

Pt. Visit: (New or Follow Up)

Site of Visit: (HP, OASIS, MC, PC, Other)

ASSESSMENT

Food/Nutrition-Related Hx:

Food Allergies/Intolerances:

Pertinent Meds, include complementary/alternative medicine use:

Knowledge/beliefs, food and supplies availability:

Physical activity/exercise:

Anthropometric measurements:

Patient age:

Gender:

Date of birth:

Height: ft. in. cm

Weight: lbs. kg

Weight History:

UBW:

IBW:

BMI:

BF:

Pt Wt Goal:

Biochemical Data (e.g., electrolytes, glucose), Medical Tests, & Procedures (only if lab work is provided)

Nutrition-Focused Physical Findings (physical appearance, muscle and fat wasting, appetite, and affect):

Self-Reported Client Hx (Personal hx, medical/health family hx, treatments, including complementary/alternative, & social hx):

Additional notes: Any thoughts, observations that will help you with your diagnosis [next step]

DIAGNOSIS [To help here, go to our class website, "NCP Planning".]

Intake

Clinical

Behavioral-Environmental

Which domain does this fall into?

Estimated caloric needs: Based on Mifflin St Jeor Equation: (You MUST show your work.)

- BMR female: $(10 \times \text{weight [kg]}) + (6.25 \times \text{height cm}) - (5 \times \text{age in years}) - 161$

E.g. $(10 \times 58 \text{ kg}) + (6.25 \times 163 \text{ cm}) - (5 \times 53 \text{ yrs}) - 161$
 $(580) + (1019) - (265) - 161 = 1173 \text{ calories}$

- TEE: $1173 \text{ BMR} \times 1.5 \text{ Activity Factor} = 1760 \text{ calories}$

[The formula for a the BMR male is: $(10 \times \text{weight [kg]}) + (6.25 \times \text{height cm}) - (5 \times \text{age in years}) + 5$]

PES Statement

Problem:

Etiology:

Signs/Symptoms:

Patient is in the (what stage of change?)

INTERVENTION

Treatment Goals/Expected Outcomes to Address Nutrition Diagnosis

Patient agrees to try to:

✓

✓

✓

Interventions:

Recommendations:

Educational material provided:

Coordination of Nutrition Care:

MONITORING & EVALUATION

RDN Follow-up plan: