

**Nutritional Risk Assessment (WAASP) Information Standards Specification**

User Interface Name	Field Identifier	Definition	Data Display Format	Data Value Format (code or other value)
Complete assessment within 24hours of admission to hospital Assess risk depending on score and take appropriate action Reassess weekly				
Admission Date	Assessment_Date	This is the date the actual risk assessment (or review) was carried out with the patient	Short Date Format In all instances of clinical usage affecting patient treatment, including patient identification, NHS applications must display dates as short dates in the form DD-MMM-YYYY, where: DD is the two-digit day MMM is the correctly abbreviated month name YYYY is the four-digit year  Exact times display both hours and minutes, but may optionally also display seconds. The required format is HH:mm:ss (this notation follows the .NET Framework Standard DateTime Format Strings specification).	8 digit numeric, CCYYMMDD 6 digit numeric: hh:mm:ss
Measured,Reported, Estimated or Unable to weigh				
Measured,Reported, Estimated or Unable to weigh	Weight_Est_Act	This is to indicate whether the patients weight is measured, reported, estimated or unable to weigh	Radio Button (Multiple Options)	n1
Measured,Reported, Estimated or Unable to weigh	Height_measured_reported	This is to indicate whether the patients height is measured, reported, estimated or unable to weigh	Radio Button (Multiple Options)	n1
Weight	Weight_Loss	This is to allow the assessor to describe the patients weight loss within the last 6 months.	Radio Button (Multiple Options)	n1
Appetite (current)	Appetite	This is to allow the assessor to describe the patients current appetite outlining their food and fluid intake.	Radio Button (Multiple Options)	n1
Ability to eat (current)	Eating_Ability	This is to allow the assessor to describe the patients current ability to eat.	Radio Button (Multiple Options)	n1

<p>Stress Factor (for CURRENT condition. If clinical condition is not listed, choose a similar condition)</p>	<p>Stress_Factor</p>	<p>This is to allow the assessor to describe other conditions that can impact on the patients nutrition.</p>	<p>Radio Button (Multiple Options)</p>	<p>n1</p>
<p>Pressure Ulcer / Wound (if ungradable, choose higher grade/score)</p>	<p>Pressure_Ulcer_Wound</p>	<p>This is to allow the assessor to identify the condition of the patients skin or wounds.</p>	<p>Radio Button (Multiple Options)</p>	<p>n1</p>

**Categories of Nutritional Risk:**

**0-2 Low Risk**  
Repeat Screening in one week or sooner if patients condition changes

**3-6 Moderate Risk**  
Assist with meal choice  
Encourage eating and drinking and assist if required  
Encourage milky drinks and snacks between meals  
Monitor intake on the All Wales Food Record Chart  
Complete / initiate local care plans - refer to local policy  
Repeat screening in one week or sooner if patient condition changes

**7+ High Risk**  
Refer to the Dietitian & follow actions as per Moderate risk  
Monitor intake on the All Wales Food Record Chart  
Complete / initiate local care plans - refer to local policy  
Repeat screening in one week or sooner if patient condition changes

**Referral to the Dietitian should be made irrespective of WAAASP score if the patient:**  
Requires or is receiving any form of Enteral or Parenteral nutrition support  
Reports the use of prescribed nutritional supplements on admission  
Newly diagnosed therapeutic diet e.g. gluten free, Type 1 Diabetic

**If the patient requires a therapeutic diet** e.g. texture modified diet, potassium restriction, food allergy or intolerance - inform catering of the specific dietary need and refer to the Dietitian if the patient requires additional support

Value Sets	Business Rules	Additional Information/definitions/formats	Source	SNOMED CT
	Will be pulled through from Measurements section			
1 - Patients weight measured 2 - Patients weight reported 3 - Patients weight estimated 4 - Unable to weigh patient	Will be pulled through from Measurements section			
1 - Patients height measured 2 - Patients height reported 3 - Patients height estimated 4 - Unable to measure patient	Will be pulled through from Measurements section			
1 - <b>Unintentional Weight loss</b> of 6 kg or more (1 stone) within last 6 months, <b>extremely thin or cachexic</b> , BMI < 18.5 kg/m2 = 7 2 - <b>Unintentional weight loss</b> 3kg (7lb) within last 6 months = 2 3 - No weight loss = 0	PROMPT: Consider fluid retention when assessing weight history			816160009  Measured weight loss (observable entity)  89362005  Weight loss (finding)
1 - <b>Little or no appetite</b> or refuses meals and drinks = 4 2 - <b>Poor</b> – eating less than a quarter (1/4) of meals and drinks = 3 3 - <b>Reduced</b> – eating half of meals = 1 4 - <b>Good</b> – eats 3 meals/day or is fully established on tube feed = 0				79890006  Loss of appetite (finding)  64379006  Decrease in appetite (finding)  Poor appetite 64379006  Decrease in appetite (finding) Reduced appetite 161825005  Appetite normal (finding)
1 - <b>NBM</b> for more than 5 days = 7 2 - <b>Unable to tolerate food</b> via gastrointestinal tract due to nausea or vomiting, constipation or diarrhoea, difficulty chewing/swallowing due to dysphagia or mucositis = 4 3 - <b>Requires prompting</b> , encouragement or assistance to eat and drink = 1 4 - <b>No difficulties</b> - able to eat and drink normally and independently = 0				288883002  Ability to eat (observable entity)  182923009  Nil by mouth (regime/therapy)  288885009  Unable to eat (finding)  289149001  Eating normal (finding)

<p>1 - <b>Upper GI cancer</b> - pre/post surgery, <b>extensive</b> bowel resection/<b>high output</b> stoma / fistula. <b>Head &amp; neck</b> cancer/surgery, both kidney &amp; pancreatic or bone marrow transplants, mixed depth burns (&gt;20%) = 7</p> <p>2 - <b>Moderate surgery</b> e.g. cardiothoracic, kidney transplant, vascular <b>Malignant disease</b> with complication e.g. infection. <b>Recent multiple injuries</b> e.g. spinal injury/trauma, head injury, <b>GBS</b>, <b>bowel surgery</b> (uncomplicated), <b>liver disease</b> (decompensated). <b>Kidney</b> e.g. Acute kidney injury, renal replacement therapy (HD/PD). Severe infection e.g. sepsis, endocarditis, pneumonia, peritonitis. <b>Pancreatitis</b> (Acute and chronic); <b>HIV</b>, <b>Burns</b> (15-20% mixed depth) = 4</p> <p>3 - <b>Progressive disorders</b> e.g. MND, MS, Parkinson's, dementia, heart failure, COPD, <b>Stroke</b>, Fractured neck of femur, inflammatory bowel disease. Uncomplicated/stable malignant disease, 10-15% mixed depth burn = 2</p> <p>4 - Uncomplicated condition with no interruption in food intake e.g. MI = 0</p>				<p>Would you want each condition recorded in SNOMED?</p>
<p>1 - <b>Cat 4</b> pressure ulcer or open abdomen = 7</p> <p>2 - <b>Cat 3</b> pressure ulcer or dehisced/infected/moderate exudate wound = 4</p> <p>3 - <b>Cat 1-2</b> pressure ulcer or non-healing/low level exudate wound = 2</p> <p>4 - Pressure areas intact, healing or healthy wound = 0</p>				<p>Would you want each level of the pressure ulcer to be recorded in SNOMED?</p> <p>421076008  Pressure ulcer stage 1 (disorder) </p> <p>420324007  Pressure ulcer stage 2 (disorder) </p> <p>421927004  Pressure ulcer stage 3 (disorder) </p> <p>420597008  Pressure ulcer stage 4 (disorder) </p> <p>733371004  Open wound of abdomen (disorder) </p> <p>225553008  Wound dehiscence (finding) </p>