

# OC COUNTY COMPREHENSIVE PERINATAL SERVICES PROGRAM (CPSP)

## PERINATAL FOOD GROUP RECALL INSTRUCTIONS

The *Perinatal Food Group Recall* asks questions about a woman's usual daily diet; it does not ask about her specific intake for one day. Shading on the form's boxes indicates a nutritional concern to address with the client. The "Advise Patient to" column provides brief nutrition guidance for each food group. Whatever dietary assessment is used, the most important thing is to help a woman make healthy food selections.

### Using the Perinatal Food Group Recall Form

1. Explain to the woman that you will ask her questions about her usual eating habits in order to determine if she is eating the kinds of and amounts of foods that her body needs for a healthy pregnancy.
2. To introduce each food group you can use *MyPlate for Moms*. Follow the form and explain to the woman what the food group is and how much counts as a serving.

**For Example, You Can Say:**

The first group is the vegetable group and it includes fresh, canned, or frozen vegetables. Most pregnant and lactating women need at least 3 servings of vegetables each day. A serving is one cup of raw or cooked vegetables or 2 cups of raw leafy greens.

3. Determine approximately how many servings of each food group the woman eats on a typical day. It is important she eats at least the minimum number of servings daily to get the nutrients needed. Use the *MyPlate* website, pictures, measuring cups and spoons, food models, etc. to help women identify the number of servings eaten in each food group.

**For Example, You Can Say:**

On a typical day how many cups of raw leafy greens do you eat? How many cups of other vegetables do you eat each day?

4. For most questions, you will indicate the number of food group servings eaten each day by checking the appropriate box such as:
  - Never
  - Fewer than three servings per day, etc. in the appropriate column such as Initial, 2nd Trimester, 3rd Trimester or Postpartum
5. For questions 4 and 7, you will check either  Yes or  No
6. For question 8, write the total number of cups the woman drinks of each of the types of beverages on a typical day. Sugary drinks are "sometimes foods" and avoiding caffeine is the prudent choice during pregnancy. Twelve ounces equal 1½ cups, 16 ounces equal 2 cups and 20-ounce drinks equal 2½ cups.

7. For question 9, check “Yes” if the woman eats extra foods from each of the categories. Leave blank if she does not eat these foods. If she does eat these extra foods, ask how much and how often she eats them (e.g., several times a day, once daily, two to three times a week, etc.).
8. Review all of her responses. If the woman’s response falls in a shaded box, such as she never eats vegetables or fewer than three servings on a typical day, give her the advice and check off the box:  Aim for three or more servings per day.

	Initial	2 <sup>nd</sup> Tri	3 <sup>rd</sup> Tri	Post
Never	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fewer than three servings per day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Three or more servings per day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If the woman’s response falls in an unshaded box, such as she eats four servings of vegetables on a typical day, tell her that she has made good choices and check off the box:  Aim for three or more servings per day.

9. Check other “advice boxes” as needed. For example if the only vegetables she eats are starchy vegetables like corn, advise her to eat more dark green and orange vegetables.
10. For questions 7, 8, and 9, help the woman make healthy substitutions for her usual unhealthy choices if needed such as:
  - If the patient uses lard in her cooking, ask her which of the healthy plant oils she might try using instead.
  - If the patient eats donuts and chips, ask her which healthy snack foods she might eat instead.
11. Write the healthy choice on the line provided and check the appropriate “advice boxes” such as:
  - Avoid foods high in fat and sugar
  - Choose fruits, vegetables, nuts, and seeds as snacks
12. After the last question, review the woman’s strengths and risks with her.
13. In the Advice section, circle and date one or more items that the woman is willing to improve/change by her next visit. Include these action items in her individualized care plan.
14. At the bottom of the form, clearly sign your name, including your CPSP job title, and date.
15. Since the dietary assessment is done at the same time as rest of the woman’s nutrition assessment, the time spent on filling out the PFGR should be included in total nutrition assessment minutes. For example, if it took 10 minutes to complete the dietary assessment and 25 minutes to fill out the initial nutrition assessment form and plot the weight gain grid, add the numbers together to get 35 minutes. Write 35 minutes on the bottom of the initial nutrition assessment form.
16. Patient takes home a copy of *MyPlate for Moms* and *My Nutrition Plan for Moms* to reinforce the healthy eating messages.