

Inclusion of the Nutrition Care Process Terminology in SNOMED CT

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Dietitians from all over the world, including Australia, Brazil, Canada, China, Denmark, Greece, Iceland, India, Ireland, Israel, Italy, Jordan, Mexico, New Zealand, Norway, Saudia Arabia, Singapore, South Africa, Sudan, Sweden, Switzerland, Taiwan, United Arab Emirates, United Kingdom and the U.S. have worked in collaboration to ease electronic health record (EHR) documentation and exchange of nutrition care data by creating a list or reference set of nutrition problems in the Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT), the largest clinical terminology in the world. The concepts in SNOMED CT are matched to defined concepts in the nutrition care process terminology (NCPT) a structured terminology created by an international volunteer committee of nutrition and dietetic professionals who maintain the nutrition care process (NCP).¹⁻² NCP is a person-centered nutrition care model that uses a consistent approach to providing care to improve nutrition care outcomes in settings, such as, hospitals, ambulatory care, home health, and long-term care to name a few.

In practical terms, this means that nutrition care, quality improvement, and research benefit in many ways. Examples include:

- If a person is diagnosed with malnutrition and unintended weight loss in one hospital, when the numerical reference set codes are sent to another setting for continued care, which may be in another country, in English or another language, the meaning and diagnoses remain consistent as malnutrition and unintended weight loss.
- Quality improvement initiatives, such as the Malnutrition Care Score (MCS, <https://www.eatrightpro.org/practice/quality-care/malnutrition-care-score>), stewarded by Academy of Nutrition and Dietetics to identify optimal nutrition care, are possible because the data can be mined using the electronic codes. While MCS is a U.S. based clinical quality measure that can be self-selected by inpatient hospitals, any nutrition professional in the world can utilize the value sets of coded terms for quality improvement initiatives in their setting.³
- A group of renal dietitians in Canada express interest in collaborating with New Zealand renal dietitians on researching the impact of kidney nutrition care in both countries. This is feasible with the use of the SNOMED CT NCPT reference set since the concepts share a common meaning between the countries.

With structured and coded terms from the SNOMED CT using NCPT concepts, barriers of country borders, languages, and/or differing electronic health record systems can be erased permitting meaningful exchange of nutrition data worldwide and bringing important recognition to the nutrition profession demonstrating its integral place in medical care.

[Frequently asked questions](#) are provided to address questions that professionals may have about the release. For further information on the NCP and NCPT, please visit <https://www.eatrightpro.org/practice/quality-care/malnutrition-care-score> and www.nutritioncareprocess.org.

References

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