

Domain 2. Nutrition

The activities of taking in, assimilating, and using nutrients for the purposes of tissue maintenance, tissue repair, and the production of energy

Class 1. Ingestion Taking food or nutrients into the body		
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Class 2. Digestion The physical and chemical activities that convert foodstuffs into substances suitable for absorption and assimilation		
Code	Diagnosis	Page
This class does not currently contain any diagnoses		

Class 3. Absorption

The act of taking up nutrients through body tissues

Code	Diagnosis	Page
This class does not currently contain any diagnoses		

Class 4. Metabolism

The chemical and physical processes occurring in living organisms and cells for the development and use of protoplasm, the production of waste and energy, with the release of energy for all vital processes

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Class 5. Hydration

The taking in and absorption of fluids and electrolytes

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Domain 2 • Class 1 • Diagnosis Code 00002

Imbalanced nutrition: less than body requirements

Focus of the diagnosis: balanced nutrition

Approved 1975 • Revised 2000, 2017, 2020 • Level of Evidence 2.1

Definition

Intake of nutrients insufficient to meet metabolic needs.

Defining characteristics

- Abdominal cramping
- Abdominal pain
- Body weight below ideal weight range for age and gender
- Capillary fragility
- Constipation
- Delayed wound healing
- Diarrhea
- Excessive hair loss
- Food intake less than recommended daily allowance (RDA)
- Hyperactive bowel sounds
- Hypoglycemia
- Inadequate head circumference growth for age and gender
- Inadequate height increase for age and gender
- Lethargy
- Muscle hypotonia
- Neonatal weight gain < 30 g per day
- Pale mucous membranes
- Weight loss with adequate food intake

Related factors

- Altered taste perception
- Depressive symptoms
- Difficulty swallowing
- Food aversion
- Inaccurate information
- Inadequate food supply
- Inadequate interest in food
- Inadequate knowledge of nutrient requirements
- Injured buccal cavity
- Insufficient breast milk production
- Interrupted breastfeeding
- Misperception about ability to ingest food
- Satiety immediately upon ingesting food
- Sore buccal cavity
- Weakened muscles required for swallowing
- Weakened of muscles required for mastication

At risk population

- Competitive athletes
- Displaced individuals
- Economically disadvantaged individuals
- Individuals with low educational level
- Premature infants

Associated conditions

- Body dysmorphic disorders
- Digestive system diseases
- Immunosuppression
- Kwashiorkor
- Malabsorption syndromes
- Mental disorders
- Neoplasms
- Neurocognitive disorders
- Parasitic disorders

Domain 2 • Class 1 • Diagnosis Code 00163

Readiness for enhanced nutrition

Focus of the diagnosis: nutrition

Approved 2002 • Revised 2013 • Level of Evidence 2.1

Definition

A pattern of nutrient intake, which can be strengthened.

2. Nutrition

Defining characteristics

- Expresses desire to enhance nutrition

Domain 2 • Class 1 • Diagnosis Code 00216

Insufficient breast milk production

Focus of the diagnosis: breast milk production

Approved 2010 • Revised 2017 • Level of Evidence 3.1

Definition

Inadequate supply of maternal breast milk to support nutritional state of an infant or child.

Defining characteristics

- Absence of milk production with nipple stimulation
- Breast milk expressed is less than prescribed volume for infant
- Delayed milk production
- Infant constipation
- Infant frequently crying
- Infant frequently seeks to suckle at breast
- Infant refuses to suckle at breast
- Infant voids small amounts of concentrated urine
- Infant weight gain < 500 g in a month
- Prolonged breastfeeding time
- Unsustained suckling at breast

Related factors

- Ineffective latching on to breast
- Ineffective sucking reflex
- Infant's refusal to breastfeed
- Insufficient maternal fluid volume
- Insufficient opportunity for suckling at breast
- Insufficient suckling time at breast
- Maternal alcohol consumption
- Maternal malnutrition
- Maternal smoking
- Maternal treatment regimen

At risk population

- Women who become pregnant while breastfeeding

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00104

Ineffective breastfeeding

Focus of the diagnosis: breastfeeding

Approved 1988 • Revised 2010, 2013, 2017 • Level of Evidence 3.1

Definition

Difficulty providing milk from the breast, which may compromise nutritional status of the infant/child.

Defining characteristics

Infant or Child

- Arching at breast
- Crying at breast
- Crying within one hour after breastfeeding
- Fussing within one hour after breastfeeding
- Inability to latch on to maternal breast correctly

- Inadequate stooling
- Inadequate weight gain
- Resisting latching on to breast
- Sustained weight loss
- Unresponsive to other comfort measures
- Unsustained suckling at breast

Mother

- Insufficient emptying of each breast during feeding
- Insufficient signs of oxytocin release

- Perceived inadequate milk supply
- Sore nipples persisting beyond first week

Related factors

- Delayed stage II lactogenesis
- Inadequate family support
- Inadequate parental knowledge regarding breastfeeding techniques
- Inadequate parental knowledge regarding importance of breastfeeding
- Ineffective infant suck-swallow response
- Insufficient breast milk production
- Insufficient opportunity for sucking at breast

- Interrupted breastfeeding
- Maternal ambivalence
- Maternal anxiety
- Maternal breast anomaly
- Maternal fatigue
- Maternal obesity
- Maternal pain
- Pacifier use
- Supplemental feedings with artificial nipple

At risk population

- Individuals with history of breast surgery
- Individuals with history of breast-feeding failure
- Mothers of premature infants
- Premature infants
- Women with short maternity leave

Associated conditions

- Oropharyngeal defect

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00105

Interrupted breastfeeding

Focus of the diagnosis: breastfeeding

Approved 1992 • Revised 2013, 2017 • Level of Evidence 2.2

Definition

Break in the continuity of feeding milk from the breasts, which may compromise breastfeeding success and/or nutritional status of the infant/child.

Defining characteristics

- Nonexclusive breastfeeding

Related factors

- Abrupt weaning of infant
- Maternal-infant separation

At risk population

- Employed mothers
- Hospitalized children
- Hospitalized infants
- Premature infants

Associated conditions

- Contraindications to breastfeeding
- Infant illness
- Maternal illness

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00106

Readiness for enhanced breastfeeding

Focus of the diagnosis: breastfeeding

Approved 1990 • Revised 2010, 2013, 2017 • Level of Evidence 2.2

Definition

A pattern of providing milk from the breasts to an infant or child, which can be strengthened.

Defining characteristics

- Expresses desire to enhance ability to exclusively breastfeed
- Expresses desire to enhance ability to provide breast milk for child's nutritional needs

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00269

Ineffective adolescent eating dynamics

Focus of the diagnosis: eating dynamics

Approved 2016 • Level of Evidence 2.1

Definition

Altered attitudes and behaviors resulting in over or under eating patterns that compromise nutritional health.

Defining characteristics

- Avoids participation in regular mealtimes
- Complains of hunger between meals
- Depressive symptoms
- Food refusal
- Frequent snacking
- Frequently consumes fast food
- Frequently eating processed food
- Frequently eats low quality food
- Inadequate appetite
- Overeating
- Undereating

Related factors

- Altered family relations
- Anxiety
- Changes to self-esteem upon entering puberty
- Eating disorder
- Eating in isolation
- Excessive family mealtime control
- Excessive stress
- Inadequate dietary habits
- Irregular mealtime
- Media influence on eating behaviors of high caloric unhealthy foods
- Media influence on knowledge of high caloric unhealthy foods
- Negative parental influences on eating behaviors
- Psychological neglect
- Stressful mealtimes
- Unaddressed abuse

Associated conditions

- Depression
- Parental psychiatric disorder
- Physical challenge with eating
- Physical challenge with feeding
- Physical health issue of parent
- Psychological health issue of parent

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00270

Ineffective child eating dynamics

Focus of the diagnosis: eating dynamics

Approved 2016 • Level of Evidence 2.1

Definition

Altered attitudes, behaviors, and influences on eating patterns resulting in compromised nutritional health.

Defining characteristics

- Avoids participation in regular mealtimes
- Complains of hunger between meals
- Food refusal
- Frequent snacking
- Frequently consumes fast food
- Frequently eating processed food
- Frequently eats low quality food
- Inadequate appetite
- Overeating
- Undereating

Related factors

Eating Habit

- Abnormal eating habit patterns
- Bribing child to eat
- Consumption of large volumes of food in a short period of time
- Eating in isolation
- Excessive parental control over child's eating experience
- Excessive parental control over family mealtime
- Forcing child to eat
- Inadequate dietary habits
- Lack of regular mealtimes
- Limiting child's eating
- Rewarding child to eat
- Stressful mealtimes
- Unpredictable eating patterns
- Unstructured eating of snacks between meals

Family Process

- Abusive interpersonal relations
- Anxious parent-child relations
- Disengaged parenting
- Hostile parent-child relations
- Insecure parent-child relations
- Intrusive parenting
- Tense parent-child relations
- Uninvolved parenting

Parental

- Anorexia
- Inability to divide eating responsibility between parent and child

- Inability to divide feeding responsibility between parent and child
- Inability to support healthy eating patterns
- Ineffective coping strategies
- Lack of confidence in child to develop healthy eating habits
- Lack of confidence in child to grow appropriately
- Substance misuse

Unmodified Environmental Factors

- Media influence on eating behaviors of high caloric unhealthy foods
- Media influence on knowledge of high caloric unhealthy foods

At risk population

- Children born to economically disadvantaged families
- Children experiencing homelessness
- Children experiencing life transition
- Children living in foster care
- Children whose parents are obese

Associated conditions

- Depression
- Parental psychiatric disorder
- Physical challenge with eating
- Physical challenge with feeding
- Physical health issue of parent
- Psychological health issue of parent

Domain 2 • Class 1 • Diagnosis Code 00271

Ineffective infant feeding dynamics

Focus of the diagnosis: feeding dynamics

Approved 2016 • Level of Evidence 2.1

Definition

Altered parental feeding behaviors resulting in over or under eating patterns.

Defining characteristics

- Food refusal
- Inadequate appetite
- Inappropriate transition to solid foods
- Overeating
- Undereating

Related factors

- Abusive interpersonal relations
- Attachment issues
- Disengaged parenting
- Intrusive parenting
- Lack of confidence in child to develop healthy eating habits
- Lack of confidence in child to grow appropriately
- Lack of knowledge of appropriate methods of feeding infant for each stage of development
- Lack of knowledge of infant's developmental stages
- Lack of knowledge of parent's responsibility in infant feeding
- Media influence on feeding infant high caloric unhealthy foods
- Media influence on knowledge of high caloric unhealthy foods
- Multiple caregivers
- Uninvolved parenting

At risk population

- Abandoned infants
- Infants born to economically disadvantaged families
- Infants experiencing homelessness
- Infants experiencing life transition
- Infants experiencing prolonged hospitalization
- Infants living in foster care
- Infants who are small for gestational age
- Infants with history of hospitalization in neonatal intensive care
- Infants with history of unsafe eating and feeding experiences
- Premature infants

Associated conditions

- Chromosomal disorders
- Cleft lip
- Cleft palate
- Congenital heart disease
- Inborn genetic diseases
- Neural tube defects

- Parental psychiatric disorder
- Physical challenge with eating
- Physical challenge with feeding
- Physical health issue of parent
- Prolonged enteral nutrition
- Psychological health issue of parent
- Sensory integration dysfunction

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Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 1 • Diagnosis Code 00232

Obesity

Focus of the diagnosis: obesity

Approved 2013 • Revised 2017 • Level of Evidence 3.2

Definition

A condition in which an individual accumulates excessive fat for age and gender that exceeds overweight.

Defining characteristics

- ADULT: Body mass index > 30 kg/m²
- CHILD 2-18 years: Body mass index > 95th percentile or 30 kg/m² for age and gender
- CHILD < 2 years: Term not used with children at this age

Related factors

- Abnormal eating behavior patterns
- Abnormal eating perception patterns
- Average daily physical activity is less than recommended for age and gender
- Consumption of sugar-sweetened beverages
- Dysmias
- Energy expenditure below energy intake based on standard assessment
- Excessive alcohol consumption
- Fear regarding lack of food supply
- Frequent snacking
- High frequency of restaurant or fried food
- Insufficient dietary calcium intake by children
- Portion sizes larger than recommended
- Sedentary behavior occurring for ≥ 2 hours/day
- Shortened sleep time
- Solid foods as major food source at < 5 months of age

At risk population

- Economically disadvantaged individuals
- Individuals who experienced premature pubarche
- Individuals who experienced rapid weight gain during childhood
- Individuals who experienced rapid weight gain during infancy
- Individuals who inherit interrelated factors
- Individuals who were not exclusively breastfed
- Individuals who were overweight during infancy
- Individuals whose mothers had gestational diabetes
- Individuals whose mothers have diabetes
- Individuals whose mothers smoke during childhood

- Individuals whose mothers smoke during pregnancy
- Individuals with high disinhibition and restraint eating behavior score
- Individuals with parents who are obese
- Neonates whose mothers had gestational diabetes

Associated conditions

- Inborn genetic diseases

Domain 2 • Class 1 • Diagnosis Code 00233

Overweight

Focus of the diagnosis: overweight

Approved 2013 • Revised 2017 • Level of Evidence 3.2

Definition

A condition in which an individual accumulates excessive fat for age and gender.

Defining characteristics

- ADULT: Body mass index $> 25 \text{ kg/m}^2$
- CHILD 2-18 years: Body mass index $> 85\text{th percentile or } 25 \text{ kg/m}^2$ but $< 95\text{th percentile or } 30 \text{ kg/m}^2$ for age and gender
- CHILD < 2 years: Weight-for-length $> 95\text{th percentile}$

Related factors

- Abnormal eating behavior patterns
- Abnormal eating perception patterns
- Average daily physical activity is less than recommended for age and gender
- Consumption of sugar-sweetened beverages
- Dysomnias
- Energy expenditure below energy intake based on standard assessment
- Excessive alcohol consumption
- Fear regarding lack of food supply
- Frequent snacking
- High frequency of restaurant or fried food
- Inadequate knowledge of modifiable factors
- Insufficient dietary calcium intake by children
- Portion sizes larger than recommended
- Sedentary behavior occurring for ≥ 2 hours/day
- Shortened sleep time
- Solid foods as major food source at < 5 months of age

At risk population

- ADULT: Body mass index approaching 25 kg/m^2
- CHILD 2-18 years: Body mass index approaching $85\text{th percentile or } 25 \text{ kg/m}^2$
- CHILD < 2 years: Weight-for-length approaching 95th percentile
- Children with body mass index crossing percentiles upward
- Children with high body mass index percentiles for age and gender
- Economically disadvantaged individuals
- Individuals who experienced premature pubarche
- Individuals who experienced rapid weight gain during childhood

- Individuals who experienced rapid weight gain during infancy
- Individuals who inherit interrelated factors
- Individuals who were not exclusively breastfed
- Individuals who were obese during childhood
- Individuals whose mothers have diabetes
- Individuals whose mothers smoke during childhood
- Individuals whose mothers smoke during pregnancy
- Individuals with high disinhibition and restraint eating behavior score
- Individuals with parents who are obese

Associated conditions

- Inborn genetic diseases

Domain 2 • Class 1 • Diagnosis Code 00234

Risk for overweight

Focus of the diagnosis: overweight

Approved 2013 • Revised 2017 • Level of Evidence 3.2

Definition

Susceptible to excessive fat accumulation for age and gender, which may compromise health.

Risk factors

- Abnormal eating behavior patterns
- Abnormal eating perception patterns
- Average daily physical activity is less than recommended for age and gender
- Consumption of sugar-sweetened beverages
- Dysomnias
- Energy expenditure below energy intake based on standard assessment
- Excessive alcohol consumption
- Fear regarding lack of food supply
- Frequent snacking
- High frequency of restaurant or fried food
- Inadequate knowledge of modifiable factors
- Insufficient dietary calcium intake by children
- Portion sizes larger than recommended
- Sedentary behavior occurring for ≥ 2 hours/day
- Shortened sleep time
- Solid foods as major food source at < 5 months of age

At risk population

- ADULT: Body mass index approaching 25 kg/m^2
- CHILD 2-18 years: Body mass index approaching 85th percentile or 25 kg/m^2
- CHILD < 2 years: Weight-for-length approaching 95th percentile
- Children with body mass index crossing percentiles upward
- Children with high body mass index percentiles for age and gender
- Economically disadvantaged individuals
- Individuals who experienced premature pubarche
- Individuals who experienced rapid weight gain during childhood
- Individuals who experienced rapid weight gain during infancy
- Individuals who inherit interrelated factors
- Individuals who were not exclusively breastfed
- Individuals who were obese during childhood
- Individuals whose mothers have diabetes
- Individuals whose mothers smoke during childhood
- Individuals whose mothers smoke during pregnancy

- Individuals with high disinhibition and restraint eating behavior score
- Individuals with parents who are obese

Associated conditions

- Inborn genetic diseases

Domain 2 • Class 1 • Diagnosis Code 00295

Ineffective infant suck-swallow response

Focus of the diagnosis: suck-swallow response

Approved 2020 • Level of Evidence 2.1

Definition

Impaired ability of an infant to suck or to coordinate the suck-swallow response.

Defining characteristics

- Arrhythmia
- Bradycardic events
- Choking
- Circumoral cyanosis
- Excessive coughing
- Finger splaying
- Flaccidity
- Gagging
- Hiccups
- Hyperextension of extremities
- Impaired ability to initiate an effective suck
- Impaired ability to sustain an effective suck
- Impaired motor tone
- Inability to coordinate sucking, swallowing, and breathing
- Irritability
- Nasal flaring
- Oxygen desaturation
- Pallor
- Subcostal retraction
- Time-out signals
- Use of accessory muscles of respiration

Related factors

- Hypoglycemia
- Hypothermia
- Hypotonia
- Inappropriate positioning
- Unsatisfactory sucking behavior

At risk population

- Infants born to mothers with substance misuse
- Infants delivered using obstetrical forceps
- Infants delivered using obstetrical vacuum extraction
- Infants experiencing prolonged hospitalization
- Premature infants

Associated conditions

- Convulsive episodes
- Gastroesophageal reflux
- High flow oxygen by nasal cannula
- Lacerations during delivery
- Low Appearance, Pulse, Grimace, Activity, & Respiration (APGAR) scores
- Neurological delay

- Neurological impairment
- Oral hypersensitivity

- Oropharyngeal deformity
- Prolonged enteral nutrition

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Domain 2 • Class 1 • Diagnosis Code 00103

Impaired swallowing

Focus of the diagnosis: swallowing

Approved 1986 • Revised 1998, 2017, 2020 • Level of Evidence 3.2

Definition

Abnormal functioning of the swallowing mechanism associated with deficits in oral, pharyngeal, or esophageal structure or function.

Defining characteristics

First Stage: Oral

- Abnormal oral phase of swallow study
- Bruxism
- Choking prior to swallowing
- Choking when swallowing cold water
- Coughing prior to swallowing
- Drooling
- Food falls from mouth
- Food pushed out of mouth
- Gagging prior to swallowing
- Impaired ability to clear oral cavity
- Inadequate consumption during prolonged meal time
- Inadequate lip closure
- Inadequate mastication
- Incidence of wet hoarseness twice within 30 seconds
- Inefficient nippling
- Inefficient suck
- Nasal reflux
- Piecemeal deglutition
- Pooling of bolus in lateral sulci
- Premature entry of bolus
- Prolonged bolus formation
- Tongue action ineffective in forming bolus

Second Stage: Pharyngeal

- Abnormal pharyngeal phase of swallow study
- Altered head position
- Choking
- Coughing
- Delayed swallowing
- Fevers of unknown etiology
- Food refusal
- Gagging sensation
- Gurgly voice quality
- Inadequate laryngeal elevation
- Nasal reflux
- Recurrent pulmonary infection
- Repetitive swallowing

Third Stage: Esophageal

- Abnormal esophageal phase of swallow study
- Acidic-smelling breath
- Difficulty swallowing
- Epigastric pain
- Food refusal
- Heartburn
- Hematemesis

- Hyperextension of head
- Nighttime awakening
- Nighttime coughing
- Odynophagia
- Regurgitation
- Repetitive swallowing

- Reports "something stuck"
- Unexplained irritability surrounding mealtimes
- Volume limiting
- Vomiting
- Vomitus on pillow

Related factors

- Altered attention
- Behavioral feeding problem
- Protein-energy malnutrition
- Self-injurious behavior

At risk population

- Individuals with history of enteral nutrition
- Older adults
- Premature infants

Associated conditions

- Acquired anatomic defects
- Brain injuries
- Cerebral palsy
- Conditions with significant muscle hypotonia
- Congenital heart disease
- Cranial nerve involvement
- Developmental disabilities
- Esophageal achalasia
- Gastroesophageal reflux disease
- Laryngeal diseases
- Mechanical obstruction
- Nasal defect
- Nasopharyngeal cavity defect
- Neurological problems
- Neuromuscular diseases
- Oropharynx abnormality
- Pharmaceutical preparations
- Prolonged intubation
- Respiratory condition
- Tracheal defect
- Trauma
- Upper airway anomaly
- Vocal cord dysfunction

Domain 2 • Class 4 • Diagnosis Code 00179

Risk for unstable blood glucose level

Focus of the diagnosis: blood glucose level

Approved 2006 • Revised 2013, 2017, 2020 • Level of Evidence 3.2

Definition

Susceptible to variation in serum levels of glucose from the normal range, which may compromise health.

Risk factors

- Excessive stress
- Excessive weight gain
- Excessive weight loss
- Inadequate adherence to treatment regimen
- Inadequate blood glucose self-monitoring
- Inadequate diabetes self-management
- Inadequate dietary intake
- Inadequate knowledge of disease management
- Inadequate knowledge of modifiable factors
- Ineffective medication self-management
- Sedentary lifestyle

At risk population

- Individuals experiencing rapid growth period
- Individuals in intensive care units
- Individuals of African descent
- Individuals with altered mental status
- Individuals with compromised physical health status
- Individuals with delayed cognitive development
- Individuals with family history of diabetes mellitus
- Individuals with history of autoimmune disorders
- Individuals with history of gestational diabetes
- Individuals with history of hypoglycemia
- Individuals with history of pre-pregnancy overweight
- Low birth weight infants
- Native American individuals
- Pregnant women > 22 years of age
- Premature infants
- Women with hormonal shifts indicative of normal life stage changes

Associated conditions

- Cardiogenic shock
- Diabetes mellitus
- Infections
- Pancreatic diseases
- Pharmaceutical preparations
- Polycystic ovary syndrome
- Pre-eclampsia
- Pregnancy-induced hypertension
- Surgical procedures

Domain 2 • Class 4 • Diagnosis Code 00194

Neonatal hyperbilirubinemia

Focus of the diagnosis: hyperbilirubinemia

Approved 2008 • Revised 2010, 2017 • Level of Evidence 2.1

Definition

The accumulation of unconjugated bilirubin in the circulation (less than 15 ml/dl) that occurs after 24 hours of life.

Defining characteristics

- Abnormal liver function test results
- Bruised skin
- Yellow mucous membranes
- Yellow sclera
- Yellow-orange skin color

Related factors

- Delay in meconium passage
- Inadequate paternal feeding behavior
- Malnourished infants

At risk population

- East Asian neonates
- Low birth weight neonates
- Native American neonates
- Neonates aged ≤ 7 days
- Neonates who are breastfed
- Neonates whose blood groups are incompatible with mothers'
- Neonates whose mothers had gestational diabetes
- Neonates whose sibling had history of jaundice
- Neonates with significant bruising during birth
- Populations living at high altitudes
- Premature neonates

Associated conditions

- Bacterial infections
- Enzyme deficiency
- Impaired metabolism
- Internal bleeding
- Liver malfunction
- Prenatal infection
- Sepsis
- Viral infection

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 4 • Diagnosis Code 00230

Risk for neonatal hyperbilirubinemia

Focus of the diagnosis: hyperbilirubinemia

Approved 2010 • Revised 2013, 2017 • Level of Evidence 2.1

Definition

Susceptible to the accumulation of unconjugated bilirubin in the circulation (less than 15 ml/dl) that occurs after 24 hours of life which may compromise health.

Risk factors

- Delay in meconium passage
- Inadequate paternal feeding behavior
- Malnourished infants

At risk population

- East Asian neonates
- Low birth weight neonates
- Native American neonates
- Neonates aged ≤ 7 days
- Neonates who are breastfed
- Neonates whose blood groups are incompatible with mothers'
- Neonates whose mothers had gestational diabetes
- Neonates whose sibling had history of jaundice
- Neonates with significant bruising during birth
- Populations living at high altitudes
- Premature neonates

Associated conditions

- Bacterial infections
- Enzyme deficiency
- Impaired metabolism
- Internal bleeding
- Liver malfunction
- Prenatal infection
- Sepsis
- Viral infection

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 4 • Diagnosis Code 00178

Risk for impaired liver function

Focus of the diagnosis: liver function

Approved 2006 • Revised 2008, 2013, 2017 • Level of Evidence 2.1

Definition

Susceptible to a decrease in liver function, which may compromise health.

Risk factors

- Substance misuse

Associated conditions

- Human immunodeficiency virus (HIV) coinfection
- Pharmaceutical preparations
- Viral infection

This diagnosis will retire from the NANDA-I Taxonomy in the 2024–2026 edition if no additional risk factors are developed.

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 4 • Diagnosis Code 00296

Risk for metabolic syndrome

Focus of the diagnosis: metabolic syndrome

Approved 2020 • Level of Evidence 2.1

Definition

Susceptible to developing a cluster of symptoms that increase risk of cardiovascular disease and type 2 diabetes mellitus, which may compromise health.

Risk factors

- Absence of interest in improving health behaviors
- Average daily physical activity is less than recommended for age and gender
- Body mass index above normal range for age and gender
- Excessive accumulation of fat for age and gender
- Excessive alcohol intake
- Excessive stress
- Inadequate dietary habits
- Inadequate knowledge of modifiable factors
- Inattentive to second-hand smoke
- Smoking

At risk population

- Individuals aged > 30 years
- Individuals with family history of diabetes mellitus
- Individuals with family history of dyslipidemia
- Individuals with family history of hypertension
- Individuals with family history of metabolic syndrome
- Individuals with family history of obesity
- Individuals with family history of unstable blood pressure

Associated conditions

- Hyperuricemia
- Insulin resistance
- Polycystic ovary syndrome

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 5 • Diagnosis Code 00195

Risk for electrolyte imbalance

Focus of the diagnosis: electrolyte balance

Approved 2008 • Revised 2013, 2017 • Level of Evidence 2.1

Definition

Susceptible to changes in serum electrolyte levels, which may compromise health.

Risk factors

- Diarrhea
- Excessive fluid volume
- Inadequate knowledge of modifiable factors
- Insufficient fluid volume
- Vomiting

Associated conditions

- Compromised regulatory mechanism
- Endocrine regulatory dysfunction
- Renal dysfunction
- Treatment regimen

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 5 • Diagnosis Code 00025

Risk for imbalanced fluid volume

Focus of the diagnosis: balanced fluid volume

Approved 1998 • Revised 2008, 2013, 2017, 2020 • Level of Evidence 2.1

Definition

Susceptible to a decrease, increase, or rapid shift from one to the other of intravascular, interstitial and/or intracellular fluid, which may compromise health.

Risk factors

- Altered fluid intake
- Difficulty accessing water
- Excessive sodium intake
- Inadequate knowledge about fluid needs
- Ineffective medication self-management
- Insufficient muscle mass
- Malnutrition

At risk population

- Individuals at extremes of weight
- Individuals with external conditions affecting fluid needs
- Individuals with internal conditions affecting fluid needs
- Women

Associated conditions

- Active fluid volume loss
- Deviations affecting fluid absorption
- Deviations affecting fluid elimination
- Deviations affecting fluid intake
- Deviations affecting vascular permeability
- Excessive fluid loss through normal route
- Fluid loss through abnormal route
- Pharmaceutical preparations
- Treatment regimen

Original literature support available at www.thieme.com/nanda-i.

Domain 2 • Class 5 • Diagnosis Code 00027

Deficient fluid volume

Focus of the diagnosis: fluid volume

Approved 1978 • Revised 1996, 2017, 2020 • Level of Evidence 2.1

Definition

Decreased intravascular, interstitial, and/or intracellular fluid. This refers to dehydration, water loss alone without change in sodium.

Defining characteristics

- Altered mental status
- Altered skin turgor
- Decreased blood pressure
- Decreased pulse pressure
- Decreased pulse volume
- Decreased tongue turgor
- Decreased urine output
- Decreased venous filling
- Dry mucous membranes
- Dry skin
- Increased body temperature
- Increased heart rate
- Increased serum hematocrit levels
- Increased urine concentration
- Sudden weight loss
- Sunken eyes
- Thirst
- Weakness

Related factors

- Difficulty meeting increased fluid volume requirement
- Inadequate access to fluid
- Inadequate knowledge about fluid needs
- Ineffective medication self-management
- Insufficient fluid intake
- Insufficient muscle mass
- Malnutrition

At risk population

- Individuals at extremes of weight
- Individuals with external conditions affecting fluid needs
- Individuals with internal conditions affecting fluid needs
- Women

Associated conditions

- Active fluid volume loss
- Deviations affecting fluid absorption
- Deviations affecting fluid elimination
- Deviations affecting fluid intake
- Excessive fluid loss through normal route
- Fluid loss through abnormal route
- Pharmaceutical preparations
- Treatment regimen

Domain 2 • Class 5 • Diagnosis Code 00028

Risk for deficient fluid volume

Focus of the diagnosis: fluid volume

Approved 1978 • Revised 2010, 2013, 2017, 2020 • Level of Evidence 2.1

Definition

Susceptible to experiencing decreased intravascular, interstitial, and/or intracellular fluid volumes, which may compromise health.

Risk factors

- Difficulty meeting increased fluid volume requirement
- Inadequate access to fluid
- Inadequate knowledge about fluid needs
- Ineffective medication self-management
- Insufficient fluid intake
- Insufficient muscle mass
- Malnutrition

At risk population

- Individuals at extremes of weight
- Individuals with external conditions affecting fluid needs
- Individuals with internal conditions affecting fluid needs
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Associated conditions

- Active fluid volume loss
- Deviations affecting fluid absorption
- Deviations affecting fluid elimination
- Deviations affecting fluid intake
- Excessive fluid loss through normal route
- Fluid loss through abnormal route
- Pharmaceutical preparations
- Treatment regimen

Domain 2 • Class 5 • Diagnosis Code 00026

Excess fluid volume

Focus of the diagnosis: fluid volume

Approved 1982 • Revised 1996, 2013, 2017, 2020 • Level of Evidence 2.1

Definition

Surplus retention of fluid.

Defining characteristics

- Adventitious breath sounds
- Altered blood pressure
- Altered mental status
- Altered pulmonary artery pressure
- Altered respiratory pattern
- Altered urine specific gravity
- Anxiety
- Azotemia
- Decreased serum hematocrit levels
- Decreased serum hemoglobin level
- Edema
- Hepatomegaly
- Increased central venous pressure
- Intake exceeds output
- Jugular vein distension
- Oliguria
- Pleural effusion
- Positive hepatojugular reflex
- Presence of S3 heart sound
- Psychomotor agitation
- Pulmonary congestion
- Weight gain over short period of time

Related factors

- Excessive fluid intake
- Excessive sodium intake
- Ineffective medication self-management

Associated conditions

- Deviations affecting fluid elimination
- Pharmaceutical preparations

Original literature support available at www.thieme.com/nanda-i.