Patient: AG Gender: Female Age: 66 years

Weight: 155lbs-70 kg

Height: 5'9- 69 inches- 175 cm

BMI: 22

Disease State: Chronic Kidney Disease Stage 1-2

Estimated Calorie needs: 2,170 kcal/day (Harris-Benedict * 1.4 Chronic Renal Failure)

Protein: -15% 70-84 g/ day (1-1.2 gm/kg)

Carbohydrates: 55 % 298g/day

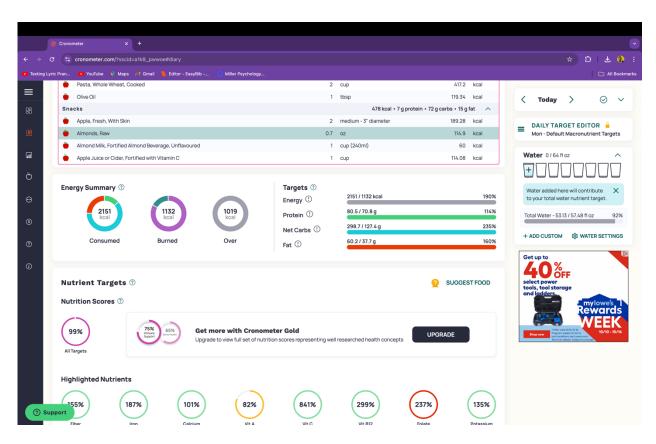
Fat: 25% 60 g/day

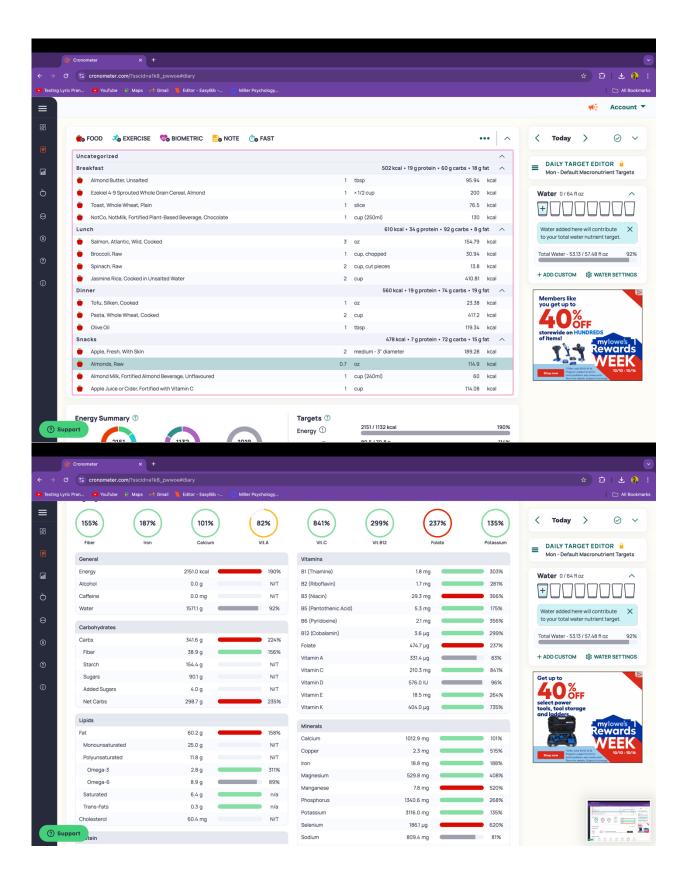
1 Day Meal Plan:

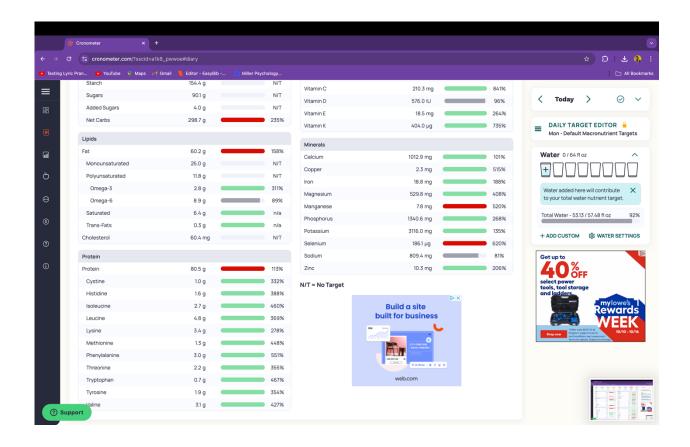
1 Day Meal Flan:	
Breakfast:	
Ezekiel 4:9 Sprouted Whole Grain Cereal, Almond	½ cup
Toast, Whole Wheat, Plain	1 slice
NotCo, NotMilk, Fortified Plant-Based Beverage, Chocolate	1 cup
Totals for Breakfast: 502 Kcal, 19g protein, 60g carbs, 0g fat.	
Snack	
Apple	1 medium
Almonds, Raw	0.7 oz
Almond Milk, fortified	1 cup
Lunch	•
Broccoli, Raw	1 cup, chopped
Spinach, Raw	2 cups chopped
Jasmine Rice, cooked	2 cup
Salmon, Atlantic, Wild Cooked	3 oz
Totals for lunch: 610 Kcal, 34g protein, 92g carbs, 8g fat	
Snack	
Apple Juice	1 cup
Apple	1 medium
Totals for snack: 209 Kcal, 1g protein, 46g carbs, 1g fat	
Dinner	
Tofu, Silken, Cooked	
Pasta, Whole Wheat, Cooked	2 cup
Olive Oil	1 tbsp
Totals for dinner: 560 Kcal, 19g protein, 74g carbs, 19g fat	1
Total Macronutrients:	Energy: 2151
	Kcal
	Protein: 80 grams
	Carbohydrates:
	298 grams
	Fat: 60 grams

For a patient with chronic kidney disease (CKD) stage 1-2, a well-balanced diet is essential to slow disease progression, maintain kidney function, and prevent future risks. The meal plan that has been outlined focuses on managing protein, carbohydrates, and fat intake for the early stage of CKD. While CKD patients need protein for tissue repair and overall health, excess protein can produce waste products that interfere with the kidneys. Protein must be monitored and altered as renal function declines. According to the Nutrition Care Manual, a Mediterranean Diet can improve lipid profiles which is important as chronic kidney disease as an independent risk factor for coronary artery disease and coronary artery disease is a leading cause of morality in individuals with renal disease. Additionally, the Nutrition Care Manual highlights findings from the Evidence Analysis Library that "in adults with CKD 1-4, increased fruit and vegetable intake may decrease body weight, blood pressure and net acid production."

Patients with CKD benefit from water-soluble vitamins like B12 and C that support immune function and energy metabolism. Vitamin D and calcium are also essential for bone health, but must be closely monitored along with phosphorus levels in progressive stages of renal insufficency.







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