

Rotation Name	Weight Management	DI Code	R13
Concentration	<input type="checkbox"/> Pediatrics <input type="checkbox"/> Adult	<input checked="" type="checkbox"/> Both	
Required Rotation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Time	3 Weeks		
Primary Pediatric Preceptor*	Helen Seagle, MS, RD	CDR #	801822
Primary Adult Preceptor*	Lisa Kassel, RD		802300
Secondary Preceptor(s)	Marilyn Day, MS, RD Liz Daeninck, RD	CDR #	708607

\* Primary Preceptor must be a Registered Dietitian.

#### Objectives:

1. Perform appropriate nutrition assessment of adult and pediatric weight management clients in a variety of settings.
2. Use motivational interviewing techniques effectively with weight management clients and/or parents of pediatric weight management clients.
3. Use appropriate treatment options for weight management clients with consideration of client's medical co-morbidities, readiness to change, cultural preferences and socio-economic factors.

#### Pre-Rotation Assignment:

Student Instructions: Readings, online video and pre-rotation reading quiz.

Assessment: Preceptor(s) will review the pre-rotation assignment at the beginning of the rotation.

Preceptor is responsible for feedback to intern.

#### Rotation Checklist:

- Intern will complete minimum 3 weight management assessments of new patients with minimal assistance. CRD 1.3, 2.1, 2.3, 2.7, 2.13, 3.1, 3.1a-e, 4.11, S1.1, S1.2
- Intern will track 3 motivational interviewing techniques of their choice during all observed weight management visits, collate the prevalence of use of each technique and discuss the pros and cons of each. CRD 1.2, 2.1
- List the key nutrients frequently impacted by obesity in both pediatric and adult populations as well as appropriate food sources of each nutrient. CRD 1.2, 2.3, 2.7, 2.13, 3.1c, S1.1, S1.2
- Identify genetic, biologic and environmental contributors to weight status. CRD 2.3, 2.13
- Demonstrate understanding of and ability to distinguish the physiologic and metabolic changes associated with various bariatric surgery procedures. CRD 1.2, 2.3, 2.13, 3.1a
- Identify appropriate screening and general assessment tools for depression, eating disorders and family dysfunction in a pediatric population for RD use in assessing a child or adolescent and his/her family prior to initiating medical nutrition therapy for this population. CRD 1.2, 1.3, 2.7, 3.1, 3.1a-e, S1.1, S1.2
- Demonstrate ability to incorporate learned counseling skills appropriate for the level of motivation and readiness to change conducive to establishing a therapeutic relationship with the child and family or client that promotes healthy behaviors or behavior change. CRD 2.1, 2.3, 2.4, 2.7, 2.13, 3.1, 3.1a-e, S1.1, S1.2
- Assess the pediatric patient's family, home, childcare, school and community environments for supports and barriers to healthy eating and weight management. CRD 2.1, 2.3, 2.4, 2.7, 2.13, 3.1, 3.1a-e, S1.1, S1.2

This rotation addresses the following CRD Competencies per ACEND DI Standards 2012: CRD 1.3, 2.1, 2.3, 2.4, 2.13, 3.1, 3.1.a-e, 4.11

This rotation addresses the following DI Concentration Competencies: S1.1, S1.2

At the successful completion of this rotation, the intern will be able to:

1. Apply evidence-based guidelines, systematic reviews and scientific literature (such as the Academy's Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites) in the nutrition care process and model and other areas of dietetics practice. CRD 1.2
2. Justify programs, products, services and care using appropriate evidence or data. CRD 1.3
3. Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics. CRD 2.1
4. Design, implement and evaluate presentations to a target audience. CRD 2.3
5. Use effective education and counseling skills to facilitate behavior change. CRD 2.4
6. Refer clients and patients to other professionals and services when needs are beyond individual scope of practice. CRD 2.7
7. Demonstrate negotiation skills. CRD 2.13
8. Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings. CRD 3.1
9. In Weight Management Nutrition, Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered. CRD 3.1a
10. In Weight Management Nutrition, Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements. CRD 3.1b
11. In Weight Management Nutrition, Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention. CRD 3.1c
12. In Weight Management Nutrition, Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis. CRD 3.1d
13. In Weight Management Nutrition, Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting. CRD 3.1e
14. Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers. CRD 4.11
15. In Weight Management Nutrition, Demonstrate thorough nutritional assessment of children and adolescents with chronic disease, growth faltering, micronutrient deficiencies, pediatric overweight and obesity, critically ill neonates and critically ill infants and children through independent assessment, case studies and presentations. S1.1
16. In Weight Management Nutrition, Develop effective strategies for monitoring and evaluating problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis of children and adolescents with chronic disease, growth faltering, micronutrient deficiencies, pediatric overweight and obesity, critically ill neonates and critically ill infants and children. S1.2

Preceptor is responsible for completing intern assessment form for this rotation.

The electronic assessment form is located at the following address: <http://j.mp/NYxiIN>

This rotation addresses the following CRD Competencies per ACEND DI Standards 2012: CRD 1.3, 2.1, 2.3, 2.4, 2.13, 3.1, 3.1.a-e, 4.11

This rotation addresses the following DI Concentration Competencies: S1.1, S1.2