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MISSION, GOALS AND OBJECTIVES OF THE DIETETIC INTERNSHIP PROGRAM

Mission: To develop practitioner skills for entry-level dietitians who are able to assume leadership roles to improve and maintain the nutritional care of diverse individuals, families and communities within the national and global populations.

Program Goals:
1. The program will prepare graduates to be competent entry-level dietitians.
2. The program will prepare graduates to be leaders and to participate in community service.
3. The program will maintain strong relationships with RDN preceptors and local facilities to ensure quality experiences for current and future interns.

Objectives:
1.1 At least 90% of alumni will take the CDR credentialing exam for dietitian/nutritionists within one year of program completion.
1.2 At least 90% of alumni, over a 5-year period, pass the CDR credentialing exam for dietitian/nutritionists within one year following first attempt.
1.3 Alumni, over a 5-year period, will meet or exceed the national average on the CDR credentialing exam for dietitian/nutritionists.
1.4 Within one year of completion at least 80% of graduates will have obtained employment in the field of nutrition and dietetics or related fields.
1.5 At least 85% of employers will rate graduates as at least adequately skilled (3) in at least 8 out of 9 areas surveyed.
1.6 At least 85% of graduates will rate themselves as at least adequately skilled (3) in at least 8 out of 9 areas surveyed.
1.7 At least 85% of students who enter the program will complete it within three years (150% of program length).
2.1 At least 75% of graduates when surveyed will indicate that they participate or have participated in at least one community service activity.
2.2 At least 75% of graduates when surveyed will indicate that they participate or have participated in at least one leadership activity.
3.1 At least 80% of preceptors when surveyed will indicate that students are well prepared for DI experiences.
3.2 At least 80% of preceptors when surveyed will indicate that the DI director communicates adequately.
3.3 At least 80% of preceptors when surveyed will indicate that that the DI director is available for monitoring intern performance.

PROGRAM SEQUENCE
The Dietetic Internship (DI) is a combined program which requires completion of a Master of Science or PhD degree from the Department of Nutrition. The supervised practice component of the program will be completed during the second year of graduate studies or the third year for MS-MPH students. For PhD students the DI will be scheduled at the end of their program. The first or second summer the Public Health Nutrition (PHN) students complete a 8-week block field experience (BFE) which is also the staff experience component of the DI. PHN students electing to complete a thesis will complete BFE the second summer. The formal start of the DI supervised practice experiences is the second January. The non-thesis PHN students
who have completed BFE the first summer finish the program by mid-June. The Cellular and Molecular Nutrition (CMN) students complete the program in mid-August.

PRIOR LEARNING POLICY
Any components of the graduate curriculum that meet competencies and/or supervised practice experience hours of the DI and are met prior to the acceptance into the DI will be granted automatic approval. This includes NUTR 524 Community Nutrition and Practicum, NUTR 543 Research Methods, and NUTR 515 Block Field Experience. Note: For BFE hours to be qualified to be counted for the intern, the preceptor must be a RD/RDN.

In the case that a graduate student has significant work experience in a clinical, community or food service management capacity, each experience will be assessed on a case by case basis by the DI Director to determine the extent to which competencies and hour requirements may have been met. Once the experience is qualified as meeting specific competencies and hour requirements, the DI Director will make a proposal to the Advisory committee to approve prior learning for the specific experience and a specific number of hours for the individual involved. If approved or revised and approved by the Advisory committee, the prior learning hours and competencies will be accepted. Written documentation of this decision will be provided to the intern and a copy maintained in the intern’s file.

REQUIRED COURSEWORK
All students are required to pass the DI Course, NUTR 490, with an average score of 80 or higher the fall prior to the January start of the DI rotations. Prior to or during the fall semester of the DI Course all students in the PHN concentration will have completed Nutrition Counseling (NUTR 522). The DI Course does not adequately explore counseling strategies. These courses are strongly recommended for students in the CMN concentration. NUTR 523, a 1 credit course for practicing nutrition counseling skills is highly recommended for all students. Prior to or during the fall semester of the DI Course students in the CMN concentration will complete NUTR 524, Community Assessment, Intervention, and Evaluation and Practicum. This course counts towards hours of supervised practice and provides assignments which align with required competencies. See the Coursework and Professionalism curriculum for other coursework requirements which are required components for meeting DI competencies.

SUPERVISED PRACTICE EXPERIENCE/DIETETIC INTERNSHIP (DI) (January - August)
The supervised practice is 31 weeks of experiences (1271 hours). Each student will spend 14+ weeks in clinical dietetics, 4 weeks in food service management, 2 weeks in electives/personal choice, 3+ weeks in community/public health, and 6-8 weeks in a staff role. The staff role is based on the students’ area of interest. In the case of PHN students, it is an 8 week block field experience. For CMN students it combines 2 weeks of additional community experience at the Knox County Health Department with 6 weeks in a clinical staff experience. Refer to Appendix A for the DI Rotation Schedule and Key.

Program Orientation – 2-3 days
Local hospitals, wellness centers and clinics where DI experiences will take place; orient DIs to facilities including: RDN preceptors, facility layout, dress code, administrative structure.

Clinical Dietetics -- 14-20 weeks
Introduction to clinical dietetics including philosophy, goals/objectives, policies/procedures Nutrition care process
• Nutrition screening, assessment and nutrition diagnosis
• Nutrition care planning and interventions
• Nutrition monitoring and evaluation
• Documentation using electronic health record (EHR)

Patient food service including modification of diets to meet a variety of health needs

Quality assurance/performance improvement/outcome measures

Food Systems Management – 4 weeks
• Introduction to site including philosophy, goals/objectives, policies/procedures
• Food production: entrees, bakery, salads, vegetable preparation
• Procurement: specifications, receiving, storage, inventory, financial records
• Safety and Sanitation: Health inspection
• Production Planning: forecasting, production sheets, standardized recipes, menus
• Supervising patient tray service: shadow catering associate
• Human resource management: job descriptions, employee scheduling, budgeting
• Theme Day Project: Menu planning, ordering, costing, marketing, producing, serving for “theme day” event including a business plan

Community/Public Health – 3+ weeks (Mobile Meals, NEAT Program, Extension, WIC, Health Department)
• Introduction to site including philosophy, goals/objectives, policies/procedures
• Nutritional management for the elderly in the Mobile Meals program. Includes nutrition education for a group of elders, and participating in the delivery of meals.
• Nutrition education for children in after school program
• Nutritional management for pregnant women, infants and children in the WIC Program. Includes nutrition counseling for individuals & education for groups of children/mothers
• Breastfeeding counseling
• Exposure to legislative issues in public health

Rotations
A. Extension – 1 week (UT Extension, Ag Campus)
Development and delivery of educational sessions for Extension agents.
B. Cancer – 1/2 week (Thompson CA Survival Center: M-W & Renal: Th/F)
Outpatient assessment and counseling for cancer patients. Counsel clients on side effects of chemo and radiation therapies. Inpatient assessment and counseling for varied clinical patients.
C. Clinical - 3 weeks (UTMCK, Parkwest, Oak Ridge Methodist or Regional)
Nutrition assessment and care for general medical patients. Introduction to metabolic support.
D. Diabetes – 1 week (Dr. Roussis’ office and Endocrinology Associates)
Individual outpatient sessions and group classes primarily for diabetes and gestational diabetes.
E. Pediatric GI – 1 week (Dr. Strobel & GI for Kids, MD offices)
MNT for failure to thrive, obesity management, eating disorders, celiac and gluten sensitivity, food allergies, FODMAPs. Friday view GI procedures with Dr. Strobel.
G. Pediatrics – 1 week (Children’s Hospital)
Wide range of pediatric experiences including: diabetes, cancer, cystic fibrosis and weight management.
H. Metabolic Support/ICU - 1 week (UTMCK, Parkwest, OR Methodist, Regional or Roane)
Assess/calculate nutritional needs, identify differences in formulas, adjust formulas based on patient tolerance and needs. ICU and GI focus.

I. Renal/Dialysis – 1.5 weeks (Fresenius, FMC)
Nutritional management of patients on hemo and peritoneal dialysis. Assess renal labs, create renal report cards, provide education to patients.

J. Knox County Schools—1 week (elective)
Assist RDN with nutrition education programs for students and teacher inservices.
Develop articles for newsletter; Cardiac Kids; Let’s Move; breakfast program.

K. Food Systems Management – 4 weeks (UTMCK, Parkwest, Regional or Childrens)

L. Long-term Care - 1 week (NHC or Claxton Consulting)
Nutrition assessment and care of the elderly in the long-term care setting.

M. Mobile Meals and NEAT Program - 1 week (Council on Aging and NEAT Program)
Mornings, work with mobile meals program. Experience how quality food is produced in a highly efficient kitchen, and distributed to meet nutrition needs, food safety standards and customer satisfaction. Assess nutrition status of customers in their home. Provide appropriate nutrition information. Provide nutrition in-service at congregate meal site. In the afternoon report to Knox County Health Department to learn about the fidelity checklist to implement to evaluate policy adherence for nutrition education in afterschool setting.

N. Public Health - 2 weeks for CMN students (Knox County Health Department)

P. Electives/Personal Choice – 2 weeks
This experience provides the opportunity for the student to plan experiences to meet their personal interests. These experiences can take place outside of Knoxville. Students would be required to transport and lodge themselves for the experience. One requirement is that the student work under the supervision of an RDN.

Q. Behavioral Health – 1 week (Weight Management in Endocrinology MD office)
Utilize motivational interviewing skills when counseling clients related to behavior change.

R. Mini-staff experience – 3 weeks (UTMCK, Parkwest, OR Methodist or Regional)
Put into practice what you have learned at previous clinical/metabolic support rotations. Case study presentation occurs during this experience.

S. Staff experience - 6-8 weeks
The staff experience can be completed in either a clinical or public health area, depending on the interests of the individual student. The clinical staff experience may be completed at local hospitals in one or more of the following areas: General Medicine, ICU, Pediatrics, Cardiology, Oncology, Diabetes, Renal or other clinical area. Students completing the PHN program complete their staff rotations (i.e. block field experience) at selected agencies in the state or region for 8 weeks during the first or second summer.

W. WIC - 1 week
Assess and counsel participants on the WIC program. Provide group education &/or individual counseling. Learn about all aspects of the program including the food package.

X. Professional Development/Advocacy – 1-2 days
Attend Hill Day and/or Tennessee Academy of Nutrition and Dietetics annual meeting. Meet with legislators to advocate for nutrition-related legislation. Network with RDNs and sponsors at TAND.
ACCREDITATION
The Program received full accreditation from ACEND (Accreditation Council for Education in Nutrition and Diетetics) in August 2018. The program is accredited through December 31, 2025. ACEND phone is: 312-899-0040 and email is: acend@eatright.org

COMMUNICATION WITH THE DI DIRECTOR/LOGBOOKS
Approximately every other Friday of the spring supervised practice experiences (not during staff experience/Block Field Experience) the students will meet with the DI Director from 3:30-5 pm. The students will hand in their evaluations for the rotations they have recently completed and a logbook of their experiences for those weeks. (See Appendix B). This meeting is a time to share experiences/concerns with the DI Director and other DIs and to ensure the intern is prepared for the next two weeks of scheduled experiences.

PROGRESSION POLICIES
During the DI Course, the student is expected to maintain a grade of no less than 80% in order to be adequately prepared to begin the supervised practice experiences. Achieving a final score of less than 80% puts the student in jeopardy of not being prepared for success in supervised practice. Should this occur a decision will be made by the DI Director in consultation with the major faculty advisor as to whether the student will be able to begin supervised practice experiences in January or if the DI experience will be forfeited or if remedial work would need to occur prior to the start of supervised practice.

During the supervised practice students are evaluated for attainment of practice competency at the end of each rotation. If a student receives a less than satisfactory score in any of the food service management, clinical or community areas, the student is counseled by the DI Director. Throughout the program, preceptors work very closely with students and provide extensive feedback. If the final rotation evaluation is not satisfactory, the student will be required to repeat a planned experience, in full or in part, to meet rotation requirements and achieve a passing score.

RETENTION AND/OR TERMINATION PROCEDURES
The intern must successfully achieve objectives of each rotation in order to successfully complete the dietetic internship and earn a verification statement. If they are unable to successfully complete a rotation after being given the opportunity for a second chance to meet requirements, a committee including the DI Director, select members of the DI Advisory Committee, and the student’s faculty advisor will meet to determine the next course of action, which may include additional remedial work and a timeline for completing such or, if justified, termination. Decisions made by this committee will be documented in writing, shared with the intern along with discussion of next steps, and a copy will be placed in the intern’s file.

During coursework, if grade point average drops below 3.0 any semester of the program, the student may be dropped from the Internship program. In case the student is dropped from the Internship program, s/he may continue in the graduate degree program with a 3.0 grade point average. If the student’s G.P.A. drops below a 3.0 (on a 4.0 scale) s/he will be counseled out of the graduate program. It is required by the University to have a 3.0 for graduation. Written notification will be given to students about their deficits in either the Internship or the graduate program. The notice of termination will include information about grievance procedures for a student appeal.

GRIEVANCE PROCEDURES
The Department of Nutrition and the Program maintain the same structure for assisting students with grievances. In the event a student is unable to resolve a problem through the available channels of the DI
Director, Department Head, Associate Dean for Graduate Studies, and Dean of the College, the student is encouraged to submit a request to the Ombudsman. The Ombudsman works cooperatively with students and College personnel in resolution of grievances to the satisfaction of both parties.

An Academic Review Board is composed of the following members: student presidents of the Dean's Student Advisory Council (DSAC), Student Member Section-American Home Economics Association (SMS-AHEA), and Omicron Nu; elected faculty senators; three alternate student members selected from presidents of other undergraduate student organizations; and three alternate faculty members selected from the advisors of the student organizations. The Academic Review Board may be requested to hear appeals involving academic concerns such as academic dishonesty and discrimination. The Board is chaired by the Associate Dean of Students. Students and faculty members who wish to bring matters before the Board are assisted in case preparation by the staff in the Office of Student Conduct.

Any grievance with ACEND related program noncompliance with ACEND accreditation standards should be addressed with the program director, then Department Head as stated above. If after all options have been exhausted, a written complaint can be submitted to ACEND at: ACEND@eatright.org or 120 South Riverside Plaza, Suite 2190, Chicago, IL 60606-6995.

STANDARDS OF PROFESSIONAL BEHAVIOR
The Program follows the University's policy about plagiarism and academic honesty which is provided to each student at the beginning of each year. This code of honesty guides students in their behavior. Students violating the plagiarism code of the graduate program are subject to dismissal from the Program. Cases of this nature are investigated thoroughly before the student is dismissed.

Students are exposed to the Code of Ethics and the Guidelines for Professional Conduct of the Academy of Nutrition and Dietetics in their orientation to the Program (Appendix F). They are exposed to the ethics philosophy of each facility by the Facility Coordinator and staff. Students observe the manner in which clinical staff handles confidential patient and employee information. Students are taught how to present information about employees and patients in a manner that protects the rights of the individual.

At all times, students in the Program are expected to perform in a professional manner. Professional behavior is discussed and evaluated throughout the Program. HIPAA certification provided by Covenant Health Systems is completed by each student during orientation. Additionally, some sites require site specific HIPAA training.

REQUIREMENTS FOR COMPLETION OF THE PROGRAM
For completion of the Program, students must meet the following requirements:
1. complete the 1271 hours of planned experience;
2. obtain a satisfactory rating on all rotations;
3. successfully complete all graduation requirements for the Master's degree including: academic coursework plus comprehensive exam, thesis defense or block field paper or for the PhD degree successfully pass comprehensive exam.
4. in order to obtain a verification statement the program must be completed within 150% of the program time.
   a. for the MS-DI completion requirement is 150% of 2 years
   b. for the MS-MPH-DI completion requirement is 150% of 3 years

Following completion of the above requirements, the DI Director will verify completion of the Program to the Commission on Dietetic Registration (CDR). The student receives several original copies of the verification statement. At that time, students will be eligible to take the CDR credentialing exam for Registered Dietitian Nutritionists.
If an exception to this policy occurs, the DI Director will inform the student verbally and in writing. Effort will be made to counsel with the student and to make recommendations for remediation at the earliest possible time to prevent student failure in the Program.

PERSONAL FILES - ACCESS AND PROTECTION
Program students have access to their professional/academic records. The Program follows the tenets of the Family Educational Rights and Privacy Act which provides for confidentiality of student records. However, student records are available to the following individuals without the consent of the student: compilers of the student telephone directory, faculty in Nutrition, College administrators, the DI Director, and RDN preceptors who require confidential information for their hospital to register the student to obtain a badge. Records of Program students are maintained in the Director’s Office and in long-term storage by the University. Access to letters of recommendation will be given to students unless the student waived that right on the recommendation form.

ATTENDANCE AT PROFESSIONAL MEETINGS
Students have numerous and varied opportunities for professional interaction throughout the Program. Since the Program utilizes many settings for clinical experiences, students have opportunities to interact with professionals in diverse professions.

Students have an opportunity to participate in meetings of local and state professional organizations, such as the Knoxville Academy of Nutrition and Dietetics (KAND), Tennessee Academy of Nutrition and Dietetics Association (TAND), Greater Knoxville Nutrition Council (GKNC), Knoxville Affiliate of The American Heart Association (KAHA), and Knox Area Diabetes Association (KADA). Students often receive discount rates for professional memberships and registration for meetings, such as the Academy of Nutrition and Dietetics (AND), Society for Nutrition Education and Behavior (SNEB) and American Public Health Association (APHA).

Each year students are given the opportunity to attend a variety of professional annual meetings. Class times may be arranged if students wish to attend. Students are responsible for their own expenses. When the national AND convention is within reasonable driving distance from the University, students are encouraged strongly to attend. Often, University transportation is provided for students and faculty who wish to attend.

The annual meeting for TAND is often held in Nashville. This meeting is planned into the schedule for the interns. Interns are encouraged to present a poster session at the meeting.

It is a requirement for students to maintain an active membership with both the AND and KAND.

HEALTH AND LIABILITY INSURANCE
Each student enrolled in the Program must participate in the University’s professional liability insurance program. Students are informed of the cost of liability insurance at the beginning of the combined program. Students must provide a receipt indicating fee paid. Coverage may be purchased in the Department of Nutrition.

Students must participate in some form of health insurance. This is paid as part of the student fees. Students must provide evidence of health coverage. This evidence may be a wallet card, a copy of the policy, a receipt from the University indicating fee paid for student health insurance, or any record showing clearly that the student is covered by a health insurance policy.
EVIDENCE OF HEALTH STATUS
Prior to entering the program, students must be free of any communicable diseases. They must provide the Program Director with documentation that they have had the following medical tests:
1. a tuberculin skin test or chest x-ray within the last year;
2. a tetanus booster within the last ten years;
3. a rubella vaccination;
4. a chicken pox vaccination or date of event;
5. blood work to include complete blood count (CBC);
6. a current medical history including blood pressure.
7. a three part Hepatitis B vaccination (done over 6 months).

Students may have many of these medical tests performed at the University Student Health Service at no charge. Students who wish to have their private physicians conduct the physical examination are allowed to do so. The same medical form is completed by the Student Health Service physicians and private physicians (Appendix F). Physical examinations must be completed prior to beginning the program. Students who do not provide evidence of completion of the physical examination are not allowed to begin clinical experiences until the results of the physical are submitted to the Director.

The written affiliation agreements with the clinical facilities specify that the Program will send only students who meet the physical requirements of the facility. Individual student health data are not provided to the facility. Dates of negative TB tests and dates of completed Hep B may be provided to facilities that require this information. The clinical facility may request withdrawal of a student whose health status is detrimental to the patients and/or staff. Requests for withdrawal of a student are made to the Program Director.

In case of minor accident or illness, notify your preceptor and/or Program Director. Except for emergency situations, the facility will not provide health services for DI students. Any medical care provided will be at the expense of the individual involved.

Note that recently hospitals have required interns to obtain a flu shot and provide documentation the fall before DI experiences begin.

SUBSTANCE ABUSE and CRIMINAL BACKGROUND CHECK POLICY
Screening for substance abuse and a criminal background check is required by the Department of Nutrition prior to working in community facilities. The policy statement can be found in the final appendix of the graduate handbook on the Department of Nutrition website.

Note that some facilities require an additional substance abuse and background check policy. This is true for the renal experience at Fresenius (FMC). The corporation covers the expense for this requirement. Students are to be aware of the possibility that facilities may require this as they plan personal choice experiences.

PROGRAM CALENDAR
During semesters in which students are enrolled in coursework, the University calendar in the Timetable of Classes is followed. For students in the master’s degree program, this generally includes fall, spring, summer, and fall terms prior to the start of supervised practice. The timeline will differ for those in MS-MPH and PhD programs. During the subsequent spring and summer when students are enrolled in supervised practice, the University calendar does not apply. January orientation generally begins the first week of January and immediately precedes the start of supervised practice rotations. If a facility is closed (i.e. holiday) during a student experience the student is required to utilize this time to work on rotation.
assignments. No holiday or vacation times have been planned into the schedule. University holidays and
closings are not observed. Spring and summer experiences are complete mid-August. If block field
experience has been completed in a previous summer, the spring supervised practice is complete by mid-
June.

**ABSENCE POLICY/PERSONAL DAYS**
Students are expected to be present for each scheduled supervised practice experience. If circumstances
beyond a student's control (i.e., injury, illness, car trouble, illness or death of an immediate family member)
occur, the DI Director and Facility Coordinator will work with the student to reschedule these experiences.
There is no guarantee that these experiences can be made up, but every reasonable effort will be made.
Internship completion date may be extended to assure that the total number of supervised practice hours
is completed. If illness or injury occurs while in a facility contact your supervisor immediately.

A student is allowed one excused absence without needing to make up time if the preceptor evaluates that
the student has received full value out of the rotation within the shortened time. Students should provide
preceptors with as much advanced notice as possible if they need to miss time at a supervised practice
experience. If a preceptor is ill the intern should notify the DI Director who will help them find another
experience for that day.

**DEFERRAL OR WITHDRAWAL OF DI PROGRAM**
In situations where life circumstances interfere with an intern’s ability to continue the internship according
to the regular schedule, it may be possible to put the internship on hold for a period of time, but no longer
than a one year deferral. This would only be possible for one internship position in a given year. If a
situation occurs, the DI Director should be notified as soon as possible to determine if deferral is an option.

The combined graduate DI program requires registering for graduate courses and, thus, follows the UT
withdrawal policy if one chooses to withdraw from UT. This link provides information on the university’s
withdrawal policy and associated fees: [https://onestop.utk.edu/withdraw/](https://onestop.utk.edu/withdraw/).

**MEALS AND PARKING COSTS AT FACILITIES**
Students follow the policies of each supervised practice site regarding meal and parking costs. These
policies vary among facilities used by the Program. Several hospitals provide free lunch, and a free place
to park. Individual policies for each site are reviewed during January orientation.

**TRANSPORTATION/LIABILITY RESPONSIBILITY**
Students are responsible for their own transportation to supervised practice experience sites. The
University and the Program assume no liability for the student's safety in travel to the assigned sites.

**STAFF REPLACEMENT POLICY**
During supervised practice experiences, students will not routinely replace regular employees outside of
the mini-staff and staff experience rotations.

**EXIT EVALUATIONS**
The exit interview occurs the last week of the internship. The main thrust of the interview is to determine
how prepared students are regarding their skills as entry-level dietitians, and to ensure that all
competencies are met. This is also a time for the student to provide informal feedback to the Director
regarding strengths and weaknesses of the Program.
## ESTIMATED EXPENSES*

### YEAR 1 (2 Semesters)

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
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<tbody>
<tr>
<td>Tuition (includes University Programs &amp; Technology Fee)</td>
<td>$13,120 In-state</td>
</tr>
<tr>
<td>Books and Supplies (~ $300/semester)</td>
<td>$600 up</td>
</tr>
<tr>
<td>Physical Examination/Lab Tests</td>
<td>free/variable</td>
</tr>
<tr>
<td>Membership in Professional Organizations:</td>
<td></td>
</tr>
<tr>
<td>KAND - Student Member</td>
<td>$10/yr</td>
</tr>
<tr>
<td>AND - Affiliate Member</td>
<td>$49/yr</td>
</tr>
<tr>
<td>Total Expenses (w/o tuition)</td>
<td>$659</td>
</tr>
<tr>
<td>*Total Estimated Expenses for 2 semesters for MS Students</td>
<td>$13,779 In-state</td>
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### YEAR 2 (3 Semesters)

**1 Semester full-time, DI is 3 credits for 2 Semesters**

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition (includes University Programs &amp; Technology Fee)</td>
<td>$10,928 In-state</td>
</tr>
<tr>
<td>Books and Supplies (1st semester)</td>
<td>$300 up</td>
</tr>
<tr>
<td>Uniform (slacks, tops, scrubs, lab coat)</td>
<td>$250 up</td>
</tr>
<tr>
<td>Transportation &amp; Meals</td>
<td>variable</td>
</tr>
<tr>
<td>Physical Examination/Lab Tests</td>
<td>free/variable</td>
</tr>
<tr>
<td>Liability Insurance</td>
<td>$40 ($20/year)</td>
</tr>
<tr>
<td>Membership in Professional Organizations:</td>
<td></td>
</tr>
<tr>
<td>KAND - Student Member</td>
<td>$10/yr</td>
</tr>
<tr>
<td>AND - Affiliate Member</td>
<td>$49/yr</td>
</tr>
<tr>
<td>Attendance at Professional Meetings (TAND)</td>
<td>$150</td>
</tr>
<tr>
<td>Graduation fee</td>
<td>$60 up</td>
</tr>
<tr>
<td>Total Expenses (w/o tuition)</td>
<td>$859</td>
</tr>
<tr>
<td>*Total Estimated expenses for 3 semesters for MS-DI Students</td>
<td>$11,787 In-state</td>
</tr>
</tbody>
</table>

*All expense quotations are approximations based on costs available at time of publication (Fall, 2018). Actual costs may vary. Room & board estimates are not included.

**NOTE:** Dietetic interns may receive graduate assistantships for teaching or research which may cover tuition plus stipend for the three semesters during coursework, but are not available during the supervised practice portion of the MS-DI Combined Program.

## REGISTERING FOR DI COURSE & DI ROTATIONS

Register for the DI Course, NUTR 490, 3 credits, beginning fall semester prior to your DI rotations. Register for the DI, NUTR 547, for 3 credits for spring semester. CMN students register for NUTR 547, for 3 credits for summer semester. PHN students register for credits for Block Field Experience.

## DRESS REQUIREMENTS FOR DI STUDENTS

During orientation in January, students should wear professional dress (skirt and blouse, dress, or trousers and shirt). In addition, students should bring a white laboratory coat to wear while touring. Jewelry should be kept to a minimum and **name tags should be worn at all times**. Dress requirements for clinical and food service management rotations are described below. The student should be mindful of covering their skin and/or any tattoos. Tops and trousers should not be inappropriately low cut.
Food Service Management Rotation
At Food Service rotations wear comfortable clothes, a lab coat and rubber soled, non-skid, low heeled shoes. Cotton slacks and top are recommended. Some facilities encourage scrubs. No nail polish. Minimal jewelry.

Clinical Rotation
Professional attire must be worn during the clinical rotation. Street clothes (dresses, skirts and blouses, or trousers and shirts) should be worn under white lab coat. Denim dresses or skirts, or colored jeans do not qualify as professional dress. Hose or socks must be worn at all times and students should wear low-heeled closed-toed shoes.

Note: Students follow the dress code of the facility to which they are assigned.

STUDENT/PROGRAM EVALUATION

A. Evaluation of student progress is ongoing during the Dietetic Internship. Students participate in evaluation of their progress and that of their peers. The dietitian preceptor in the clinical facilities is the primary person to participate in student evaluation. The DI Director provides summative evaluations.

1. Case Studies—The DI completes and is scored on computer-based simulations and comprehensive case studies completed on paper during the DI Course.

2. Tests—Exams are taken during the DI course.

3. Formative performance evaluation—Direct observation of DI activities and formative evaluations are completed at the end of each rotation by the preceptor with whom the DI has worked (Appendix C).

4. Summative performance evaluation—At completion of the Dietetic Internship Program, the Director and DI meet for evaluation attainment of Performance Requirements. Consistency of performance and degree of attainment of desired competencies are evaluated. Curriculum is designed to meet all requirements. (Appendix G)

5. Peer evaluation—Case study, in-service trainings and seminar presentations are rated by peers (as well as RDN preceptors and DI Director).

6. Log book evaluation—Each student maintains a log of observations during clinical experiences, which includes tasks, evaluation and problem solving (Appendix B). The Program Director evaluates these as submitted (~every 2 weeks).

7. Self-evaluation of performance—Students complete self-assessment using the DI evaluation form at the end of each rotation (Appendix C). Student ratings are compared to ratings by preceptors. Satisfactory performance and areas for improvement are noted.

8. Professional paper—Non-thesis Public Health students develop a comprehensive paper which integrates their 8 week rotation. The analysis could include a description of the institution/agency’s objectives, problem identification, planning, implementation, evaluation, organizational structure, staffing, and student's self-assessment of performance in a professional role.
9. **Professional poster presentation evaluation**—Public Health students present their 8 week block field experience to peers and faculty via a poster presentation. The student is evaluated on their ability to communicate effectively and analyze the experience as indicated in the guidelines for the professional poster presentation.

10. **Joint evaluation of student's staff experience**—At the end of the staff experience, the Program Director and major RDN preceptor assess attainment of the Performance Requirements, judge affective factors that influenced the student's performance, and make a judgment about the student's fulfillment of the requirements for the staff experience.

11. **Completion Evaluation**—A questionnaire is administered to determine how students rate their experience of the DI Program. Constructive recommendations about program strengths and weaknesses are elicited from students. This data is collected confidentially by the administrative assistant who then types a summary report for the DI Director.

B. **Graduates of the Program**

1. **Post-graduate surveys**—Within one year after graduation from the Program, graduates and their employers are asked to evaluate the student's preparedness for the job they were hired to perform.

2. **Registration examination scores**—Data regarding passage of the RDN examination are available to the Program Director biannually. This data is one measure of program effectiveness.
## APPENDIX A: DI MASTER ROTATION SCHEDULE KEY 2019

<table>
<thead>
<tr>
<th>Internship Rotations</th>
<th>Possible Preceptors</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Internship Rotation - UT Ag Campus</td>
<td>Janie Burney</td>
</tr>
<tr>
<td>B Cancer - Thompson &amp; UTMCK</td>
<td>Jennifer/Susan(M-W)</td>
</tr>
<tr>
<td>C Clinical - UTMCK</td>
<td>Nicole, Janet, Andrea, Whitney, Katy</td>
</tr>
<tr>
<td>C2 Clinical - Parkwest</td>
<td>Kathy Irwin &amp; staff</td>
</tr>
<tr>
<td>C3 Clinical - OR Methodist</td>
<td>Kerri, Kristen, Lori</td>
</tr>
<tr>
<td>C4 Clinical - Regional</td>
<td>Jenny Glenn &amp; Nancye(T)</td>
</tr>
<tr>
<td>D DM - Roussis &amp; Endocrine</td>
<td>Jennifer Masters(M-W)</td>
</tr>
<tr>
<td>E Out-patient GI</td>
<td>GI for Kids(Th-F)</td>
</tr>
<tr>
<td>G Pedi - Children's</td>
<td>Janet Buck</td>
</tr>
<tr>
<td>H1 Metabolic Support - UTMCK</td>
<td>Jenny Saganski</td>
</tr>
<tr>
<td>H2 Metabolic Support - Parkwest (2)</td>
<td>Karin Adler</td>
</tr>
<tr>
<td>H3 Metabolic Support - OR Methodist (2)</td>
<td>Kathy Irwin</td>
</tr>
<tr>
<td>H4 Metabolic Support - Regional (2)</td>
<td>Beth Booker</td>
</tr>
<tr>
<td>H5 Metabolic Support - Roane (2)</td>
<td>Megan Minner</td>
</tr>
<tr>
<td>I1 Renal - Fresenius, Knoxville (4)</td>
<td>Kori Daniel</td>
</tr>
<tr>
<td>I2 Renal - Fresenius, Knoxville (2)</td>
<td>Barbara Glanz</td>
</tr>
<tr>
<td>I3 Renal - Fresenius, Knoxville (2)</td>
<td>Ashley Treadway</td>
</tr>
<tr>
<td>I4 Renal - Fresenius, Knoxville (2)</td>
<td>Jennifer Pickering</td>
</tr>
<tr>
<td>J Knox County Schools (elective)</td>
<td>Carolyn P-B</td>
</tr>
<tr>
<td>K1 Food Service - UTMCK (4)</td>
<td>Virginia Turner</td>
</tr>
<tr>
<td>K2 Food Service - Parkwest (2)</td>
<td>Debbie Fox</td>
</tr>
<tr>
<td>K3 Food Service - Regional (2)</td>
<td>Arthur Sparks/Autumn</td>
</tr>
<tr>
<td>K4 Food Service - Children's (2)</td>
<td>Janet Buck</td>
</tr>
<tr>
<td>L1 Long-term Care – NHC OR (4)</td>
<td>Megan Fritts</td>
</tr>
<tr>
<td>L2 Long-term Care—NHC Knox (2)</td>
<td>Megan Cantrell</td>
</tr>
<tr>
<td>L3 Long-term Care – Claxton (4)</td>
<td>Marnie/Brenna/Jennifer</td>
</tr>
<tr>
<td>M Mobile Meals/NEAT</td>
<td>Judith/Cheryl/Megan Beck</td>
</tr>
<tr>
<td>N Knox Co. Health Dept. (2)</td>
<td>Cheryl Hill</td>
</tr>
<tr>
<td>O Orientation</td>
<td></td>
</tr>
<tr>
<td>P Personal Choice/Electives</td>
<td>Chelsi Cardoso</td>
</tr>
<tr>
<td>Q Out-patient Behavioral (Wt Mgmt)</td>
<td>Virginia Turner</td>
</tr>
<tr>
<td>R1 Mini-Staff Experience – UTMCK (3)</td>
<td>Debbie Fox</td>
</tr>
<tr>
<td>R2 Mini-Staff Experience – Parkwest (3)</td>
<td>Kathy Irwin</td>
</tr>
<tr>
<td>R3 Mini-Staff Experience – OR Methodist (2)</td>
<td>Autumn Kelly</td>
</tr>
<tr>
<td>R4 Mini-Staff Experience – Regional (2)</td>
<td>TBA</td>
</tr>
<tr>
<td>S Staff Experience – (2)</td>
<td>Jennifer</td>
</tr>
<tr>
<td>T Wellness Clayton Homes (elective)</td>
<td>Sarah Griswold</td>
</tr>
<tr>
<td>W WIC – Knox Co. Health Department (6)</td>
<td>Briana Robison</td>
</tr>
<tr>
<td>W1 WIC – Louden Co. Health Department (4)</td>
<td>Karen</td>
</tr>
<tr>
<td>X Hill Day/TAND</td>
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</tr>
<tr>
<td>BF Block Field Experience</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX B

LOG BOOKS

Purpose

1. Develop and enhance analytical and problem solving skills.
2. Practice professional writing.
3. Establish formal communication between DI and DI Director.

Specific Guidelines for Recording

1. List briefly tasks performed and/or observed.
   Examples:
   -"Prepared cantaloupe for fruit plate or special function."
   -"Observed RDN counsel patient with insulin dependent diabetes."
   -Assisted RDN with WIC certification of 13-mo-old child."

2. Evaluate, question, analyze.
   Examples:
   -"Possible cross-contamination Salmonella." Indicate why suspected.
   -"Food is good quality and appealing."
   -"Diet order, TF, TPN/PPN appropriate to disease condition, meeting nutritional needs." Indicate basis for evaluation.
   -"Nutrition education provided with limited effectiveness." Indicate basis for evaluation.

3. Problem solve.
   Examples:
   -"Revised diet order, TF, TPN/PPN to meet patient's needs."
   -"Recommend in-service on cross contamination." Include lines of communication and target audience.
   -"Recommended specific nutrition education to effect dietary modification specific to patient's needs by using large print pamphlets and use of food models."

General Guidelines

1. Write professionally and analytically. Avoid personal prejudices and judgments.
2. Due every other Friday afternoon at the end of each rotation during DI meeting.
3. Must be typed (or neatly written) and submitted in folder.
4. Required for all rotations except staff experience (include logbook for mini-staff experience).
APPENDIX C

Intern __________________________  Rotation/weeks ____________ / ______ wks
Preceptor __________________________  Date ______________________________

THE UNIVERSITY OF TENNESSEE-KNOXVILLE DIETETIC INTERNSHIP

DIETETIC INTERN EVALUATION

Directions: Upon completion of the rotation, the RD preceptor and the DI should evaluate the DI's performance in the areas listed, using the following rating scale below. These should be completed individually & reviewed together.

4 = met independently/excellent
3 = met with occasional support/good
2 = met with frequent support/needs improvement
1 = not met
N/A = not observed or not applicable
Qualify ratings with comments as appropriate.

PERFORMANCE
1. Assessment Skills (Ability to determine individual and/or community health needs) 4 3 2 1 N/A
   Comments:

2. Counseling/Educating Skills (Ability to present information clearly and at appropriate level; sensitive to client culture and education level; ability to listen, comprehend and respond to ideas of others) Comments:

3. Writing Skills (Ability to organize thoughts and present them clearly and concisely in writing; effectiveness of medical record documentation, development of nutrition education materials with sensitivity to culture and education level) Comments:

4. Interpersonal Skills (Ability to successfully participate with RDs, DIs and other health care providers) Comments:

5. Organization Skills (Ability to operate within established parameters, including planning, prioritizing, scheduling, coordinating, anticipating problems, meeting timelines and objectives) Comments:
<table>
<thead>
<tr>
<th></th>
<th>Critical Thinking/Reasoning (Consideration of alternative solutions &amp; results measurement; appropriate, innovative &amp; practical problem analysis &amp; resolution) Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>4 3 2 1 N/A</td>
</tr>
<tr>
<td></td>
<td>Persuasion &amp; Conflict Resolution (Ability to appreciate multiple perspectives in working with groups/individuals, &amp; achieve beneficial results) Comments:</td>
</tr>
<tr>
<td>7</td>
<td>4 3 2 1 N/A</td>
</tr>
<tr>
<td></td>
<td>Supervisory &amp; Management Skills (Ability to delegate tasks &amp; support others in the successful performance of the units functions) Comments:</td>
</tr>
<tr>
<td>8</td>
<td>4 3 2 1 N/A</td>
</tr>
<tr>
<td></td>
<td>Advanced Technology Skills (Use of computer &amp; other emerging technologies) Comments:</td>
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<tr>
<td>9</td>
<td>4 3 2 1 N/A</td>
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<tr>
<td></td>
<td>Personal &amp; Professional Development Skills (Ability to accept &amp; apply criticism; realistic assessment of personal performance; planned development for ones own future as a professional) Comments:</td>
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<tr>
<td>10</td>
<td>4 3 2 1 N/A</td>
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<tr>
<td></td>
<td>Marketing skills (Competing by personal integrity, persistence, innovation &amp; effective presentation) Comments:</td>
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<tr>
<td>11</td>
<td>4 3 2 1 N/A</td>
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<tr>
<td></td>
<td>Leadership Skills (Providing direction for others; advocacy; willing to take appropriate risks) Comments:</td>
</tr>
<tr>
<td>12</td>
<td>4 3 2 1 N/A</td>
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**AFFECTIVE BEHAVIOR**

<table>
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<tr>
<th></th>
<th>Judgment (Decisions based on data &amp; experience) Comments:</th>
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<tbody>
<tr>
<td>1</td>
<td>4 3 2 1 N/A</td>
</tr>
<tr>
<td></td>
<td>Flexibility (Ability to adapt to sudden &amp; unpredictable change) Comments:</td>
</tr>
<tr>
<td>2</td>
<td>4 3 2 1 N/A</td>
</tr>
</tbody>
</table>
3. Personal Initiative (Confident, engaged, enthusiastic, strong work ethic) Comments: 4 3 2 1 N/A

4. Resourcefulness (Willingness to research & innovate) Comments: 4 3 2 1 N/A

5. Cooperation (Work harmoniously with others without compromise of professional ethics) Comments: 4 3 2 1 N/A

6. Responsibility (On time, dependable, accountable) Comments: 4 3 2 1 N/A

7. Respectful (Polite, tactful, appropriate) Comments: 4 3 2 1 N/A

8. Professional Conduct (Ethical, confidential) Comments: 4 3 2 1 N/A

9. Personal Characteristics (Patience, tolerance, culturally aware) Comments: 4 3 2 1 N/A

10. Excellence (Accuracy, focus, quality results) Comments: 4 3 2 1 N/A

OVERALL RATING
Did the DI meet the objectives/performance expectations of the rotation? Yes No
Please complete the score summary form for assignments located on final page of each curriculum.

Based on the planned experiences & the above evaluation of performance, please identify additional experiences if needed that will strengthen performance.
Comments (Needs):

Preceptor Signature: ___________________________ Date: ______________

Intern Signature: ___________________________ Date: ______________
APPENDIX D

THE UNIVERSITY OF TENNESSEE-KNOXVILLE DIETETIC INTERNSHIP
PRECEPTOR’S EVALUATION

Preceptor’s Name: ___________________________ Rotation ___________________________

Please evaluate the preceptor and the rotation you have just completed using the following rating system. If you have had several preceptors during this rotation, please fill out a different form for each preceptor. This evaluation is to be submitted with your log books at the completion of each rotation. The information will be summarized and shared with the preceptor at the end of the internship.

5 = strongly agree
4 = agree
3 = neutral
2 = disagree
1 = strongly disagree
N/A = not applicable, no chance to observe or form opinion

1. Demonstrates effective interpersonal relationships with clients/employees/health care team/DIs. 5 4 3 2 1 N/A

2. Provides opportunities for DI to assess and counsel clients or participate in food service management, encouraging use of decision-making skills. 5 4 3 2 1 N/A

3. Encourages participation in discussions/presentations. 5 4 3 2 1 N/A

4. Questions DI to determine accuracy and completeness of DI observations of client status or employee/management situations. 5 4 3 2 1 N/A

5. Facilitates DI’s ability to evaluate the effectiveness of DI’s care/intervention/performance. 5 4 3 2 1 N/A

6. Provides constructive feedback regarding DI’s performance, clarifying points with examples. 5 4 3 2 1 N/A

7. Provides references/resources to assist DI learning, while facilitating independent thinking. 5 4 3 2 1 N/A

8. Provides assistance to DI when performing tasks DI perceives as difficult; deals with DI frustration, confusion and anxieties. 5 4 3 2 1 N/A

9. Is perceptive to DI’s strengths and weaknesses. 5 4 3 2 1 N/A
10. Is realistic regarding DI performance expectations.  5  4  3  2  1  N/A
11. Is accessible to DI.  5  4  3  2  1  N/A
12. Allows DI to participate in selecting learning experiences as appropriate.  5  4  3  2  1  N/A
13. Discusses ethical issues of patient care, purchasing cost accounting, etc., with DI.  5  4  3  2  1  N/A
14. Asks DI for feedback/suggestions regarding the rotation/learning experiences.  5  4  3  2  1  N/A
15. Is professional and stays up-to-date on latest nutrition research in the field.  5  4  3  2  1  N/A

OVERALL RATING OF PRECEPTOR
Strengths


Needs


OVERALL RATING OF ROTATION
Would you recommend this rotation to another DI? Any suggestions?

Intern Signature: ____________________________________ Date: ___________________
Preamble:
When providing services the nutrition and dietetics practitioner adheres to the core values of customer focus, integrity, innovation, social responsibility, and diversity. Science-based decisions, derived from the best available research and evidence, are the underpinnings of ethical conduct and practice.

This Code applies to nutrition and dietetics practitioners who act in a wide variety of capacities, provides general principles and specific ethical standards for situations frequently encountered in daily practice. The primary goal is the protection of the individuals, groups, organizations, communities, or populations with whom the practitioner works and interacts.

The nutrition and dietetics practitioner supports and promotes high standards of professional practice, accepting the obligation to protect clients, the public and the profession; upholds the Academy of Nutrition and Dietetics (Academy) and its credentialing agency the Commission on Dietetic Registration (CDR) Code of Ethics for the Nutrition and Dietetics Profession; and shall report perceived violations of the Code through established processes.

The Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession establishes the principles and ethical standards that underlie the nutrition and dietetics practitioner’s roles and conduct. All individuals to whom the Code applies are referred to as “nutrition and dietetics practitioners”. By accepting membership in the Academy and/or accepting and maintaining CDR credentials, all nutrition and dietetics practitioners agree to abide by the Code.

Principles and Standards:
1. Competence and professional development in practice (Non-maleficence)
Nutrition and dietetics practitioners shall:
   a. Practice using an evidence-based approach within areas of competence, continuously develop and enhance expertise, and recognize limitations.
   b. Demonstrate in depth scientific knowledge of food, human nutrition and behavior.
   c. Assess the validity and applicability of scientific evidence without personal bias.
   d. Interpret, apply, participate in and/or generate research to enhance practice, innovation, and discovery.
   e. Make evidence-based practice decisions, taking into account the unique values and circumstances of the patient/client and community, in combination with the practitioner’s expertise and judgment.
   f. Recognize and exercise professional judgment within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate.
   g. Act in a caring and respectful manner, mindful of individual differences, cultural, and ethnic diversity.
   h. Practice within the limits of their scope and collaborate with the inter-professional team.
2. Integrity in personal and organizational behaviors and practices (Autonomy)

Nutrition and dietetics practitioners shall:

a. Disclose any conflicts of interest, including any financial interests in products or services that are recommended. Refrain from accepting gifts or services which potentially influence or which may give the appearance of influencing professional judgment.

b. Comply with all applicable laws and regulations, including obtaining/maintaining a state license or certification if engaged in practice governed by nutrition and dietetics statutes.

c. Maintain and appropriately use credentials.

d. Respect intellectual property rights, including citation and recognition of the ideas and work of others, regardless of the medium (e.g. written, oral, electronic).

e. Provide accurate and truthful information in all communications.

f. Report inappropriate behavior or treatment of a patient/client by another nutrition and dietetics practitioner or other professionals.

g. Document, code and bill to most accurately reflect the character and extent of delivered services.

h. Respect patient/client’s autonomy. Safeguard patient/client confidentiality according to current regulations and laws.

i. Implement appropriate measures to protect personal health information using appropriate techniques (e.g., encryption).

3. Professionalism (Beneficence)

Nutrition and dietetics practitioners shall:

a. Participate in and contribute to decisions that affect the well-being of patients/clients.

b. Respect the values, rights, knowledge, and skills of colleagues and other professionals.

c. Demonstrate respect, constructive dialogue, civility and professionalism in all communications, including social media.

d. Refrain from communicating false, fraudulent, deceptive, misleading, disparaging or unfair statements or claims.

e. Uphold professional boundaries and refrain from romantic relationships with any patients/clients, surrogates, supervisees, or students.

f. Refrain from verbal/physical/emotional/sexual harassment.

g. Provide objective evaluations of performance for employees, coworkers, and students and candidates for employment, professional association memberships, awards, or scholarships, making all reasonable efforts to avoid bias in the professional evaluation of others.

h. Communicate at an appropriate level to promote health literacy.

i. Contribute to the advancement and competence of others, including colleagues, students, and the public.

4. Social responsibility for local, regional, national, global nutrition and well-being (Justice)

Nutrition and dietetics practitioners shall:

a. Collaborate with others to reduce health disparities and protect human rights.

b. Promote fairness and objectivity with fair and equitable treatment.

c. Contribute time and expertise to activities that promote respect, integrity, and competence of the profession.

d. Promote the unique role of nutrition and dietetics practitioners.

e. Engage in service that benefits the community and to enhance the public’s trust in the profession.

f. Seek leadership opportunities in professional, community, and service organizations to enhance health and nutritional status while protecting the public.
**Glossary of Terms:**

**Autonomy:** ensures a patient, client, or professional has the capacity and self-determination to engage in individual decision-making specific to personal health or practice.1

**Beneficence:** encompasses taking positive steps to benefit others, which includes balancing benefit and risk.1

**Competence:** a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis.2

**Conflict(s) of Interest(s):** defined as a personal or financial interest or a duty to another party which may prevent a person from acting in the best interests of the intended beneficiary, including simultaneous membership on boards with potentially conflicting interests related to the profession, members or the public.2

**Customer:** any client, patient, resident, participant, student, consumer, individual/person, group, population, or organization to which the nutrition and dietetics practitioner provides service.3

**Diversity:** “The Academy values and respects the diverse viewpoints and individual differences of all people. The Academy’s mission and vision are most effectively realized through the promotion of a diverse membership that reflects cultural, ethnic, gender, racial, religious, sexual orientation, socioeconomic, geographical, political, educational, experiential and philosophical characteristics of the public it serves. The Academy actively identifies and offers opportunities to individuals with varied skills, talents, abilities, ideas, disabilities, backgrounds and practice expertise.”4

**Evidence-based Practice:** Evidence-based practice is an approach to health care wherein health practitioners use the best evidence possible, i.e., the most appropriate information available, to make decisions for individuals, groups and populations. Evidence-based practice values, enhances and builds on clinical expertise, knowledge of disease mechanisms, and pathophysiology. It involves complex and conscientious decision-making based not only on the available evidence but also on client characteristics, situations, and preferences. It recognizes that health care is individualized and ever changing and involves uncertainties and probabilities. Evidence-based practice incorporates successful strategies that improve client outcomes and are derived from various sources of evidence including research, national guidelines, policies, consensus statements, systematic analysis of clinical experience, quality improvement data, specialized knowledge and skills of experts.2

**Justice (social justice):** supports fair, equitable, and appropriate treatment for individuals1 and fair allocation of resources.

**Non-Maleficence:** is the intent to not inflict harm.1

**References:**

   http://www.eatrightpro.org/~/media/eatrightpro%20files/practice/scope%20standards%20of%20practice/academydefinitionoftermslist.ashx
University of Tennessee, Knoxville Combined MS-DI Program  
Planned Supervised Practice Hours (Required Elements 1.6.a and b) DI

Concentration: Community Nutrition

Table 1: Types of Planned Experiences

<table>
<thead>
<tr>
<th>Track: Rotation Area/Course</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># of hours in Professional Work Setting</td>
<td># of hours in Alternate Practice Experiences</td>
</tr>
<tr>
<td>US Based</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural Competence Workshop</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NTR 524 Community Nutrition &amp; Practicum</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>NTR 490 DI Course</td>
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<tr>
<td>(A) Extension</td>
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<td></td>
</tr>
<tr>
<td>(B) Cancer</td>
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<td></td>
</tr>
<tr>
<td>(C) Clinical</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>(D) Diabetes</td>
<td>40</td>
<td></td>
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<tr>
<td>(E) Out-patient GI</td>
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<td></td>
</tr>
<tr>
<td>(G) Pediatrics</td>
<td>40</td>
<td></td>
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<tr>
<td>(H) Metabolic Support</td>
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<td></td>
</tr>
<tr>
<td>(I) Renal Dialysis</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>(K) Foodservice Mgmt</td>
<td>160</td>
<td></td>
</tr>
<tr>
<td>(L) Long-term Care</td>
<td>40</td>
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<tr>
<td>(M) Mobile Meals &amp; NEAT</td>
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</tr>
<tr>
<td>(N) Health Department</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>(P) Personal Choice</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>(Q) Behavior/Wt Mgmt</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>(R) Clinical Mini-staff Experience</td>
<td>120</td>
<td></td>
</tr>
<tr>
<td>(W) WIC</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>(S) Staff Experience</td>
<td>240</td>
<td></td>
</tr>
<tr>
<td>(BFE) Blockfield Experience (8wk) Replaces (S) + (N)</td>
<td>320</td>
<td></td>
</tr>
<tr>
<td>DI meeting time 2hrsx10wks</td>
<td>-20</td>
<td></td>
</tr>
<tr>
<td>1 Personal/sick day</td>
<td>-8</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>1220</td>
<td>13</td>
</tr>
</tbody>
</table>

Table 2: Total Planned Hours

Total Planned Hours

Sum of hours in professional work setting and alternate experiences  
(Total Sum of Columns A and B5 in Table 1)  
1271
I. **Pertinent Medical History**

<table>
<thead>
<tr>
<th>Comments Regarding Results (DO NOT give specific values)</th>
<th>Physician Signature</th>
<th>Date (DO PROVIDE DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BP _____ P _______</td>
<td>____________________</td>
<td>_____________________</td>
</tr>
</tbody>
</table>

II. **Laboratory Data:**

   1. Tuberculin Skin Test
   2. Complete Blood Count (CBC)

   | ____________________ | _____________________ | _____________________ | _____________________ |
   | ____________________ | _____________________ | _____________________ | _____________________ |

III. **Vaccinations:**

   | ____________________ | _____________________ | _____________________ |
   | ____________________ | _____________________ | _____________________ |
   | ____________________ | _____________________ | _____________________ |
   | ____________________ | _____________________ | _____________________ |

Please inquire about exposure to or incidence of food poisoning. If response is positive, follow with a stool culture.

The above requirements have been completed and I certify that the appropriate treatment(s) is(are) being obtained for any problems identified.

______________________________            _____________________________
Student Signature                Date
## Appendix H: Time sheet

<table>
<thead>
<tr>
<th>Day of Week</th>
<th>Date</th>
<th>RDN Initials</th>
<th>Supervised practice hours with preceptor at site</th>
<th>Project development</th>
<th>Preparatory review of PPTs, case studies, readings*</th>
<th>Developing goals, completing logbooks, self-assessment*</th>
<th>Meeting with Director, mentoring other DIs*</th>
<th>Other (describe here):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Hours worked</td>
<td>Hours worked</td>
<td>Hours worked</td>
<td>Hours worked</td>
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<td>Saturday/Sunday</td>
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<td>Thursday</td>
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<td>Friday</td>
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<tr>
<td>Total Hours</td>
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</tr>
</tbody>
</table>

Intern Name: ________________________________

Rotation: ________________________________

Intern Signature: ________________________________

Preceptor Signature: ________________________________

*Note these categories are not counted toward supervised practice hours