



Examination Content Outline - CSDH

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| 1 | Nutrition Assessment and Diagnosis | 60 |
| A | Client/Patient Pathophysiology, Factors, and Comorbidities | |
| 1 | Upper Gastrointestinal (GI) Conditions (e.g., dysphagia, GERD, EOE, gastritis) | |
| 2 | Diverticular Disease | |
| 3 | Disorders of Gut–Brain Interaction (DGBI) and Functional Disorders | |
| 4 | Carbohydrate Intolerances (e.g., sucrose, lactose, fructose) | |
| 5 | Inflammatory Bowel Disease (IBD) | |
| 6 | Accessory Organs (e.g., Liver, Pancreas, Gallbladder) | |
| 7 | Short Bowel Syndrome (SBS) and Intestinal Resection | |
| 8 | Allergies and Immune-mediated Food Reactions | |
| 9 | Celiac Disease and Gluten-Related Disorders | |
| 10 | Disordered Eating and Eating Disorders | |
| 11 | Cancer and Cancer Complications | |
| 12 | Infant and Pediatric Conditions | |
| 13 | Non-clinical Factors (e.g., socio-emotional, social determinants of health, economic) | |
| B | Assessment and Nutrition Diagnosis | |
| 1 | Nutrition Screening, Assessment Tools, Anthropometrics, and Patient/Client Assessments (e.g., NFPE) | |
| 2 | Diet History and Patterns | |
| 3 | Anatomy, Physiology, and Pathophysiology | |
| 4 | Macronutrients/Micronutrients and Hydration Status | |
| 5 | Malnutrition Criteria and Diagnosis | |
| 6 | Diagnostic Procedures, Biochemical Data, Imaging, and Laboratory Evaluation | |
| 7 | Medical Interventions and Treatments | |
| 8 | Medical Goals and Plan of Care | |
| 9 | Special Populations (e.g., geriatric, pregnancy, developmental delay, pediatric, etc.) | |
| 2 | Nutrition Intervention, Monitoring, and Evaluation | 49 |
| A | Intervention Design | |
| 1 | Patient/Client-centered Care (e.g., lifecycle, cultural, quality of life) | |
| 2 | Therapeutic Diet and Lifestyle Modifications | |
| 3 | Pharmacotherapy and Drug Interactions | |
| 4 | Macronutrients/Micronutrients and Fluid Recommendations | |
| 5 | Nutrition Support | |
| 6 | Barriers and Support Systems for Intervention | |

B Intervention Monitoring and Evaluation

- 1 Intervention Goals, Measures, and Outcomes
- 2 Nutrient and Nutrition Status, Individualized Trends, Patterns, and Intervention Indicators
- 3 Interdisciplinary/Interprofessional Teams, Referrals, and Consults

3 Education and Advocacy

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A Care Support

- 1 Patient/Client and Caregiver Counseling and Education
- 2 Patient/Client and Caregiver Resources, Support, Group Programs, and Advocacy
- 3 Access to Food (e.g., food security) and Resources
- 4 Care Continuum and Transition of Care

B Best Practices

- 1 Communication and Documentation Requirements
- 2 Evidence-based Research Design, Methods, and Evaluation
- 3 Ethics, Scope and Standards of Practice





Secondary Classifications - Tasks

1. Perform nutrition screening and assessment for gastrointestinal (GI) patient/client populations.
2. Identify and interpret nutrition-related laboratory data and diagnostic test results in context with complex clinical findings.
3. Identify the most relevant diagnostic tests and procedures for the nutrition assessment of a patient/client.
4. Conduct, interpret, and/or utilize physical findings (e.g., weight changes, muscle wasting, dentition) and/or in-depth nutrition-focused physical examinations (NFPEs).
5. Use tools, equipment, and anthropometric measurements to provide the most appropriate diagnostic information to develop nutrition diagnoses and interventions.
6. Obtain and assess the nature of GI symptoms, mental and health history, medical goals, and social determinants of health of a patient/client to develop a nutrition intervention.
7. Recognize alarm symptoms that need immediate medical attention.
8. Identify patient/clients exhibiting signs of or at risk for disordered eating or eating disorders.
9. Identify patient/clients exhibiting signs of disorders of the gut/brain interaction.
10. Identify patient/clients exhibiting signs of or at risk for malnutrition.
11. Identify patient/clients exhibiting signs of or at risk for dehydration.
12. Obtain diet and symptom recall from a patient/client and interpret in the context of conditions.
13. Assess adequacy or appropriateness of fiber in the diet and modify as necessary.
14. Prioritize diagnosis-based recommendations based on level of impact on a patient/client's condition and comorbidities.
15. Use the most appropriate resources to collect the information required to assess and treat patients/clients who have limited ability to communicate.
16. Evaluate drug, supplements, nutrients, and complementary/alternative medicine for their potential impact on a patient/client's nutrition status, condition, and outcomes.
17. Evaluate food/drug interactions and their potential impact on a patient/client's nutrition status, conditions, and outcomes.
18. Evaluate a patient/client's psychosocial, economic, environmental, cultural, and lifestyle status/behaviors to individualize intervention, support outcomes, and prioritize quality of life.
19. Select and implement the appropriate therapeutic diet and/or diet modification, including fluids and hydration.
20. Identify and address patient/client-specific barriers (e.g., physical, socioeconomic) to nutrient access, intake, and delivery, and/or refer to other disciplines when appropriate.



21. Identify and address macronutrient/micronutrient and fluid requirements for a medically complex patient/client for nutrition intervention.
22. Identify patient/client who may benefit from alternate routes of nutrition support and recommend enteral and/or parenteral nutrition support.
23. Identify and/or calculate enteral nutrition needs for patient/client based on conditions.
24. Provide inclusive and culturally competent care.
25. Use patient/client-centered education/interviewing/counseling models to communicate and optimize the effectiveness of nutrition interventions.
26. Incorporate knowledge of food and fluid composition into assessment and interventions.
27. Complete appropriate documentation of patient/client assessment and nutrition intervention.
28. Monitor outcomes and revise nutrition interventions to reflect changes in a patient/client's condition and/or response to treatment.
29. Adapt nutrition interventions to reflect patient/client attitude, knowledge, and beliefs about food and nutrition practices.
30. Evaluate patient/client's acceptance and adherence to nutrition intervention and adjust the plan accordingly.
31. Educate on the scientific validity and safety of direct-to-consumer nutrition-related tests (e.g., food sensitivity, stool microbiome), products, and devices.
32. Evaluate evidence for the efficacy and safety of unconventional approaches in nutrition care and emerging trends.
33. Evaluate research to determine applicability for clinical nutrition practice.
34. Communicate and support the continuity of care with other disciplines and settings.
35. Comply with local, state, and national rules, and regulations for scope and standards of practice.

