

Registration Examination for Dietitians – Practice Questions

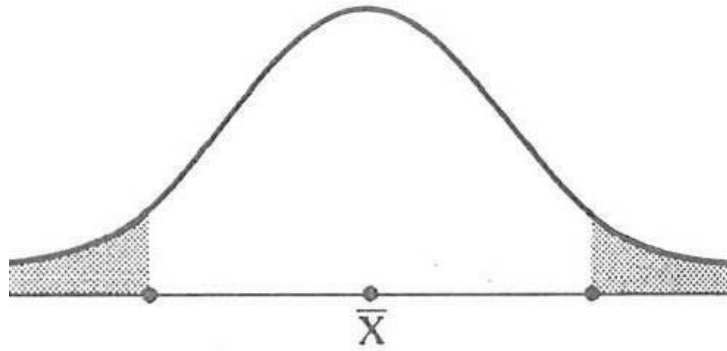
1. Using the 5-week, simple moving average method of forecasting and the data below, the dietitian will need how many servings for October 17th?

Roast Beef Special	Number of Servings Consumed
September 5	125
September 12	115
September 19	119
September 26	123
October 2	120
October 10	121

- A. 115
B. 120
C. 121
D. 125
2. A dietitian who is counseling the mother of a child with eating difficulties has evaluated needs and decided on the best alternatives for feeding. The dietitian should next:
- A. evaluate the mother's level of comprehension.
B. instruct the mother in various feeding approaches.
C. obtain a list of the child's food preferences and typical eating patterns.
D. review with the mother the ways to implement the recommended approaches.
3. During a counseling session about lowering sodium, the client states, "I have begun reading labels to identify the sodium content of foods." The client is in which of the following stages of change?
- A. Precontemplation
B. Contemplation
C. Preparation
D. Action

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4. A distribution of body weights is shown on the curve below.



- Which of the following statements best describes the samples that fall within the shaded areas?
- A. They are positively skewed.
 - B. They are negatively skewed.
 - C. They indicate a bimodal distribution.
 - D. They are two standard deviations from the mean.
5. A patient has a pre-surgery serum albumin level of 3.7 mg/dl and a post-surgery level of 3.1 mg/dl. The dietitian should recognize that:
- A. a laboratory error has likely occurred.
 - B. the patient is experiencing a protein-losing enteropathy.
 - C. this is an expected response to surgical stress
 - D. the patient is experiencing severe visceral protein storage depletion.
6. An adolescent's BMI is plotted at the 90th percentile on the Centers for Disease Control and Prevention growth chart. The adolescent is:
- A. obese.
 - B. overweight.
 - C. normal weight.
 - D. at risk for overweight.
7. Which nutrition intervention is most appropriate to recommend to a patient with chronic kidney disease on hemodialysis with the following labs: albumin: 2.8 g/dL, calcium: 8.4 mg/dL, potassium: 5.5 mEq/L, phosphorus : 4.8 mg/dL, and BUN : 50 mg/dL ?
- A. Check vitamin D level
 - B. Decrease fluid intake
 - C. Increase protein intake
 - D. Add calcium supplement

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8. An infant with phenylketonuria requires which of the following dietary alterations as part of the nutritional treatment plan?
- A. Low-isoleucine, high-valine
 - B. High-isoleucine, low-valine
 - C. Low-phenylalanine, high-tyrosine
 - D. High-phenylalanine, low-tyrosine
9. How many FTE employees would be required to staff ten 8-hour positions that require coverage 7 days a week?
- A. 10.0
 - B. 14.0
 - C. 8.75
 - D. 15
10. Transferring a staff member who is rumored to have chronic obstructive pulmonary disease violates which of the following acts?
- A. Equal Employment Opportunity Act
 - B. Americans with Disabilities Act
 - C. Fair Labor Standards Act
 - D. Civil Rights Act
11. How An infant exclusively breastfed during the first 6 months of life should receive daily supplementation of which of the following vitamins?
- A. K
 - B. D
 - C. B12
 - D. A
12. Which type of cells in the pancreas secrete insulin?
- A. Acinar
 - B. Duct
 - C. Exocrine
 - D. Endocrine
13. A dietitian wants to lead a series of classes at a local community center aimed at helping people learn how to prepare meals for the week. Which of the following modes of education would be most appropriate to help develop these skills?
- A. Discussing different dishes to cook.
 - B. Reading about cooking in a book.
 - C. Talking to the group about how they cook certain dishes.
 - D. Demonstrating cooking and preparing foods in the classroom.

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- 14.** A dietitian is leading a study to assess the effectiveness of adding a specific antioxidant supplement on reducing cardiovascular disease in Indigenous adults. Which of the following study designs would be most appropriate to measure the effectiveness of the supplement?
- A. Observational
 - B. Cross sectional
 - C. Epidemiological
 - D. Randomized controlled
- 15.** What are the nutrition support guideline recommendations for calories and protein for critically ill patients without renal or hepatic dysfunction with BMI >50 kg/m²?
- A. 25-30 kcal/kg actual weight and 1.2-1.5 g/kg ideal body weight
 - B. 22-25 kcal/kg ideal body weight and 2-2.5 g/kg ideal body weight
 - C. 11-14 kcal/kg actual body weight and 1.5-2 g/kg ideal body weight
 - D. 15-20 kcal/kg ideal body weight and 1.0-1.5 g/kg ideal body weight
- 16.** What micronutrient deficiency may be present in a 5-year-old child who eats high amounts of milk, cheese, and yogurt each day, and has refused to try any other foods for the past 2 years?
- A. Folate
 - B. Calcium
 - C. Riboflavin
 - D. Potassium
- 17.** A patient with stomach cancer and recent subtotal gastrectomy may commonly experience which of the following complications?
- A. Esophageal dysphagia
 - B. Aspiration pneumonia
 - C. Metabolic syndrome
 - D. Dumping syndrome
- 18.** Which of the following factors results in the greatest risk of dehydration for a patient diagnosed with a stroke?
- A. Enteral nutrition dependence
 - B. Thickened liquid prescription
 - C. Decreased taste sensation
 - D. Dominant hand weakness
- 19.** After eating dinner at a new restaurant, a patient experiences nausea, abdominal pain and respiratory distress. Which part of the meal is the most likely cause of this reaction?
- A. Roll and butter
 - B. Grilled chicken breast
 - C. Steamed broccoli and cauliflower florets
 - D. Green salad with olive oil and vinegar dressing

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- 20.** Which of the following treatments would be appropriate for a patient experiencing hypoglycemia?
- A. 12 oz. Diet cola
 - B. Peanut butter cup
 - C. 4 oz. orange juice
 - D. 4 crackers with cheese
- 21.** In which of the following patient populations is the initiation of parenteral nutrition support an appropriate recommendation?
- A. Malnourished patient with hemiglossectomy
 - B. Critically ill underweight patient with pancreatitis
 - C. Actual ill overweight patient with vomiting for 2 days
 - D. Patient at risk for malnutrition with small bowel obstruction
- 22.** Which of the following parameters should be evaluated and monitored in an enterally fed patient experiencing frequent constipation?
- A. Diameter of feeding tube
 - B. Head of bed elevation
 - C. Weight trends
 - D. Fluid intake
- 23.** What is the primary method for assessing a patient's renal function?
- A. eGFR
 - B. Blood pressure
 - C. Total cholesterol
 - D. Potassium intake
- 24.** When deciding whether dietitians will work on the weekend, the Clinical Nutrition Manager (CNM) continuously sought unanimous agreement from her staff before deciding. Which leadership style did the CNM exhibit?
- A. Autocratic
 - B. Consensus
 - C. Participative
 - D. Laissez-faire
- 25.** During an interview for a foodservice worker position, a panelist asks the candidate, "How many children do you have?" As the lead dietitian conducting the interview, what is the most appropriate way to handle this situation?
- A. Allow the candidate to answer and assess their response
 - B. Interrupt and inform the candidate they don't need to answer the question.
 - C. Allow the candidate to answer but clarify that the information won't influence the selection process.
 - D. Follow up with a question about how the candidate will manage childcare with the job's demands.

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26. Which of the following expenditures should be included in a capital budget?
- A. Food
 - B. Payroll taxes
 - C. Office supplies
 - D. Kitchen equipment
27. Which of the following guidelines must be met for a meal to be reimbursable under the Child and Adult Care Food Program (CACFP)?
- A. All dairy products must be low-fat or fat-free
 - B. At least 50% of the meal calories must be from protein-rich sources.
 - C. At least one serving of a whole grain-rich product must be served each day.
 - D. At least ½ cup of fresh fruits or vegetables must be served at every meal.
28. A month after introducing a new selective menu, the amount of plate waste from patients has doubled. What should be the dietitian's first course of action?
- A. Revert to the previous menu.
 - B. Conduct a survey to gather patient-preference data.
 - C. Review and verify the standardized recipes used in the new menu.
 - D. Interview staff to gather feedback on patient reactions to the new menu.
29. This foodservice organization calculates inventory value based on both the unit purchase price and the number of units in each purchase. What method of valuation is this?
- A. Actual purchase price
 - B. Weighted average (WA)
 - C. First In, First Out (FIFO)
 - D. Last In, First Out (LIFO)
30. The ticket price of a refrigerator is \$10,000, has a life expectancy of 10 years, salvage value of \$1,250, and has a 15% return on investment. How much does the refrigerator depreciate annually using the straight-line method?
- A. \$875
 - B. \$1,000
 - C. \$1,125
 - D. \$1,300

(Continue to page 7 for answers and rationales)

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Practice Questions for Dietitians Answer Key and Classification List

Item Number	Domain Classification	Answer Key
1	IV.B	B
2	I.C	C
3	I.C	C
4	I.D	D
5	II.A	C
6	II.A	B
7	II.C	C
8	II.C	C
9	III.A	B
10	III.B	B
11	I.A	B
12	I.A	D
13	I.B	D
14	I.C	D
15	II.A	B
16	II.A	A
17	II.B	D
18	II.B	B
19	II.B	A
20	II.C	A
21	II.C	D
22	II.D	D
23	II.D	A
24	III.A	B
25	III.B	B

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26	III.C	D
27	III.E	C
28	IV.A	B
29	IV.B	B
30	IV.C	A

Rationales and References

1.

RATIONALE:

A: Number consumed on second week

B: (KEY): 5-week moving average: $115+119+123+120+121 = 598/5 = 119.6 = 120$

C: Averaged all six days: $125+115+119+123+120+121 = 723. 723/6=120.5=121$

D: Number consumed on first week

REFERENCE:

Gregoire MB. Foodservice Organizations: A Managerial and Systems Approach. 9th ed. Upper Saddle River, NJ: Prentice-Hall; 2017, 153.

2.

RATIONALE:

Changing behavior is the goal of nutrition education. Option C demonstrates that the client has knowledge of the diet, and they can apply the knowledge to select the appropriate dinner menu.

Option A is not correct because although the client is able to demonstrate knowledge of foods that must be avoided, there is no evidence to show that the client will apply the knowledge and avoid the 5 foods named. Option B is not correct because although the client verbalizes elements of what is known about the diet, there is no evidence to show that they are able to apply the knowledge.

Option D is not correct, because although the client is able to identify foods they have had to eat and drink on the diet, there is no evidence to show that all the foods they had to eat, or drink followed the recommended diet.

REFERENCE:

Nutrition Education, 4th edition, Contento, 376-379.

3.

RATIONALE:

A. Precontemplation: client has no intention of changing behaviors in next 6 months, resists efforts to modify behavior.

B. Contemplation: recognize need for change, but give reasons for not starting to change

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- C. Preparation client identifies motivators, believes advantages outweigh disadvantages of change.
Correct answer.
- D. Action: client has altered the behavior

REFERENCE:

Nutrition Counseling & Education, 4th edition by Bauer & Liou,19-20.

4.

RATIONALE:

A normal distribution is depicted. The X-bar symbol is used in statistics to represent the arithmetic mean. A normal distribution is unimodal (one peak), and the mean, median (50th percentile), and mode (value of highest frequency) of a normal distribution are equal, meaning the distribution has zero skew. Thus, A and B are incorrect because this distribution has neither a positive nor negative skew, and C is incorrect because this distribution is not bimodal.

In normal distribution, 95% of values fall within two standard deviations of the mean. Thus, the shaded areas represent the 5% of values that are greater than or equal to two standard deviations from the mean.

REFERENCE:

Van Horn L, Beto J. Research: Successful Approaches in Nutrition and Dietetics. 4th ed. Chicago, IL. Academy of Nutrition and Dietetics. 2019, 301.

5.

RATIONALE:

Albumin is a negative acute phase protein that decreases in response to inflammation, including in response to stress and trauma of surgery.

REFERENCE:

Krause's Food & the Nutrition Care Process (2023) Mahan LK, Raymond JL/W B Saunders Company, 1012.

6.

RATIONALE:

Overweight BMI is >85th percentile <95th percentile, obese BMI is at or above 95th percentile. 90th percentile on the CDC growth chart - overweight category.

REFERENCE:

Krause's Food & the Nutrition Care Process (2023) Mahan LK, Raymond JL/W B Saunders Company, 357.

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7.

RATIONALE:

- A. Checking vitamin D is not required with the lab values available
- B. CKD/HD patient, fluid intake with the labs as listed above does not need an adjustment
- C. (KEY) HD patient requires increased protein intake
- D. Calcium is within normal limits, supplement not needed

REFERENCE: Krause's Food & the Nutrition Care Process (2023) Mahan LK, Raymond JL/W B Saunders Company, 767-771.

8.

RATIONALE:

Phenylketonuria nutritional management involves restricting the substrate -phenylalanine and supplementing the product-tyrosine due to a deficiency or inactivity of phenylalanine hydroxylase.

REFERENCE: Krause's Food & the Nutrition Care Process (2023) Mahan LK, Raymond JL/W B Saunders Company, 1003-1004.

9.

RATIONALE:

A: $10 \text{ staff} * 40 \text{ hrs/week} = 400 \text{ hours} / 10 = 10.0 \text{ FTE}$

B:(KEY): $10 * 8 * 7 = 560 \text{ hours}; 560 / 40 = 14.0 \text{ FTE}$

C: $40 / 8 = 5 * 7 * 10 = 350 \text{ hours}; 350 / 40 = 8.75 \text{ FTE}$

D: $8\text{-hour positions} + 7 \text{ days} = 15.0 \text{ FTE}$

REFERENCE:

Gregoire MB. Foodservice Organizations: A Managerial and Systems Approach. 9 th ed. Upper Saddle River, NJ: Prentice-Hall; 2017, 385.

10.

RATIONALE:

A: OSHA specifies workplace safety rules.

B (KEY): ADA provides civil rights protection for people with physical or mental impairment that substantially limits one or more major life activities (e.g, working).

C: FLSA requires payment of minimum wage and overtime pay, restricts employment of children, and requires record keeping.

D: The Civil Rights Act provides remedies for intentional discrimination and harassment on the basis of race, color, religion, sex or national origin.

REFERENCE:

Gregoire MB. Foodservice Organizations: A Managerial and Systems Approach. 9 th ed. Upper Saddle River, NJ: Prentice-Hall; 2017, 361-363.

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11.

RATIONALE:

Human breastmilk does not contain enough Vitamin D for infants. Infants that are exclusively receiving human breastmilk should be supplemented with 400 IU of vitamin D every day starting in the first month after birth.

REFERENCE:

Judith Brown, Nutrition Through The Life Cycle, 7th edition, pg 169

12.

RATIONALE:

Exocrine cells secrete digestive enzymes and alkaline solution to neutralize stomach acid in the duodenum. Acinar and duct cells are both exocrine cells. Endocrine cells secrete insulin.

REFERENCE:

Gropper S, Smith J, Carr T, Advanced Nutrition and Human Metabolism, 8th ed, 45

13.

RATIONALE:

Cooking is a hands-on activity and skill that would best be learned by demonstration and practicing. Practicing skills like how to hold a knife, and how to cook different dishes would be most valuable.

REFERENCE:

Contento, Isabel, Nutrition Education, 4th edition, pg 454

14.

RATIONALE:

A randomized controlled study/trial would be most appropriate. To test the effectiveness of a supplement, you need to have a group that is receiving the supplement, compared to a group with similar demographics that are receiving a placebo. The participants of this study will be placed randomly into different groups to reduce bias.

REFERENCE:

Van Horn, Beto, Research: Successful Approaches in Nutrition and Dietetics, 4th edition, pg 131

15.

RATIONALE:

Option B-ASPEN/SCCM Clinical guidelines recommend 22-25 kcal/kg ideal body weight and 2-2.5 g/kg protein ideal body weight for patients with BMI > 50, other options may over or underestimate needs

REFERENCE:

Charney P, Malone A. Academy of Nutrition and Dietetics Pocket Guide to Nutrition Assessment, 229

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16.

RATIONALE:

Picky eating is a common problem in children that can put them at risk for nutrient deficiencies. Milk, cheese, and yogurt are good sources of calcium, riboflavin, and potassium. These foods alone are not an adequate source of folate.

REFERENCE:

Whitney E, Rolfes S, Understanding Nutrition, 297-378

17.

RATIONALE:

A and B are not complications associated with gastric surgery—they are upper GI tract related issues; metabolic syndrome is not a gastric surgery complication. The most common complication of gastric surgery—partial, subtotal or total gastrectomy is dumping syndrome due to rapid transit of foods or liquids.

REFERENCE:

Mahan LK, Raymond JL, Krause's Food and Nutrition Care Process, 801

18.

RATIONALE:

Patients diagnosed with stroke often have multiple symptoms that impede nutrition intake. While some stroke patients are dependent on enteral nutrition, sufficient water can be given via the tube to avoid dehydration. Weakness of dominant hand can cause issues with coordination, but there are many aids available like straws or assistance at meals to help patients with fluid intake. Decreased taste sensation is more likely to cause decreased food intake rather than decreased fluid intake. Thickened liquid diets are unappealing because of the texture of the liquid and so these diet prescriptions often cause significant decrease in fluid intake putting patients at high risk for dehydration.

REFERENCE:

Dorner B, Diet and Nutrition Care Manual, 2-5

19.

RATIONALE:

The symptoms described are classic symptoms of food induced anaphylaxis so A, the roll and butter, is the most likely source due to the inclusion of two of the most common allergens: wheat and cow's milk. None of the other items are common allergens.

REFERENCE:

741, Mahan LK, Raymond JL, Krause's Food and Nutrition Care Process, 519

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20.

RATIONALE:

Hypoglycemia should be treated with 15 grams of carbohydrate (C). Protein and fat delay the digestion and absorption of carbohydrates making B & D incorrect. Diet or calorie-free beverages do not contain carbohydrates, making A incorrect.

REFERENCE:

Krause, p. 654

21.

RATIONALE:

A -can be fed enterally, B- enteral nutrition support trial is recommended first, C-may stay NPO for a few days and then advanced to an oral diet, D-dysfunctional gastrointestinal tract-parenteral nutrition support is recommended.

REFERENCE:

Mahan LKM Raymond JL, Krause's Food and Nutrition Care Process, 877

Malone A, Carney LN, Carrera AL, Mays A. ASPEN Enteral Nutrition Handbook, 67

22.

RATIONALE:

A, B and C do not affect GI function, D-daily provision of adequate fluid is important to avoid constipation.

REFERENCE:

Mahan LKM Raymond JL, Krause's Food and Nutrition Care Process, 220

23.

RATIONALE:

B & C are not measures of renal function. Potassium intake does not indicate renal function.

REFERENCE:

Mahan LK, Raymond JL, Krause's Food and Nutrition Care Process, 761

24.

RATIONALE:

An autocratic leader makes decisions unilaterally without input from others. A participative leader involves the members in the process but does not require unanimous agreement. Laissez-fair leaders take a hands-off approach and allow the team to make the decision. A consensus leader focuses on achieving unanimous agreement among the group.

REFERENCE:

Management Practice in Dietetics (2022 – Revised 5th) Hudson / pp. 73-80

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25.

RATIONALE:

A is incorrect because asking about family or children is illegal, as it introduces potential for discrimination based on family status. C is incorrect because allowing the candidate to answer the question, even if you try to reassure them, still exposes the interviewer to legal risks by gathering irrelevant and protected information. D is incorrect because it continues to focus on personal life issues, which are inappropriate in a pre-employment interview context.

REFERENCE:

Management Practice in Dietetics (2022 – Revised 5th) Hudson, 270-273

26.

RATIONALE:

Capital budgets include equipment, building(s), and land expenses. Operational budgets include expenses related to day-to-day operations such as food, payroll taxes for employees, hourly wages, etc.

REFERENCE:

Gregoire, Foodservice Organizations 9th edition, p 414

27.

RATIONALE:

A is incorrect because while low-fat or fat-free dairy is encouraged for certain age groups (children over 2 years), the CACFP does not require all dairy products to be low-fat or fat-free across all age groups.

Whole milk is allowed for children between 1 and 2 years of age.

B is incorrect because the CACFP does not have a guideline specifying that a certain percentage of calories must come from protein.

D is incorrect because while fruits and vegetables are important components of CACFP meal patterns, they do not have to be fresh, as the program allows a variety of forms, including frozen, canned, or dried. Additionally, CACFP meal patterns do not require that fruits or vegetables be served at every meal. However, fruits or vegetables are required at certain meals and snacks throughout the day based on the meal pattern requirements.

REFERENCE:

Child and Adult Care Food Program. United States Department of Agriculture.
<http://www.fns.usda.gov/cacfp/child-and-adult-care-food-program>

28.

RATIONALE:

While verifying standardized recipes is important, it does not directly address the issues of increased plate waste. Reverting to the old menu might solve the waste issue temporarily, but it doesn't provide insights into why the new menu failed. Staff feedback might offer some insights, but it is second-hand information and will not capture patient preferences. Collecting patient-preference data will provide

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valuable insights into why the new menu isn't well received. This information is critical for making informed decisions.

REFERENCE:

Foodservice Organizations: A Managerial and Systems Approach (2017 – 9th) Gregoire, pp. 48-49 & 454.

29.

RATIONALE:

There are several methods to value foodservice inventory. Typically, organizations use the actual purchase price for each item, LIFO (the purchase price of the *oldest* item would be used), FIFO (the purchase price of the *newest* item is used), or a weighted average (prices determined the unit prices and number of units).

REFERENCE:

Gregoire, Foodservice Organizations 9th edition, p 141

30.

RATIONALE:

- a. $(\$10,000 - \$1,250) / 10 \text{ years} = \875 [KEY]
- b. $\$10,000 / 10 = \$1,000$ [incorrect]
- c. $(\$10,000 + \$1,250) / 10 = \$1,125$ [incorrect]
- d. $(\$10,000 - \$1,250) \times 0.15 = \$1,312.5$ [incorrect]

REFERENCE:

Foodservice Organizations: A Managerial and Systems Approach (2017 – 9th) Gregoire, pp. 403.