

# What Services do Registered Dietitian Nutritionists (RDN) Provide?

The majority of Registered Dietitian Nutritionists (RDN)'s work in the treatment and prevention of disease (administering medical nutrition therapy, as part of medical teams), often in hospitals, HMOs, private practice or other health care facilities. In addition, a larger number of RDN's work in community and public health settings, academia and research. A growing number of RDN's work with food and nutrition industry and business, journalism, sports nutrition, corporate wellness programs and other non-traditional work settings. RDN's are licensed.

## Practice Areas

According to the Academy of Nutrition and Dietetics' (AND) Compensation & Benefits Survey of the Dietetics Profession 2015. There are 100,000 credentialed practitioners according to the Commission on Dietetic Registration.

Practice Area	RDN's
Clinical Nutrition-Acute Care/Inpatient	32%
Clinical Nutrition-Ambulatory Care	17%
Clinical Nutrition-Long-term Care	8%
Community Nutrition	10%
Food and Nutrition Management	11%
Consultation and Business	8%
Education and Research	7%

## Services of Registered Dietitian Nutritionists:

- Hospitals, HMOs or other health care facilities, educating patients about nutrition and administering medical nutrition therapy as part of the health care team. RDN's may also manage the foodservice operations in these settings, as well as in schools, day-care centers, and correctional facilities, overseeing everything from food purchasing and preparation to managing staff.
- Sports nutrition and corporate wellness programs, educating clients about the connection between food, fitness and health.
- Food and nutrition-related businesses and industries, working in communications, consumer affairs, public relations, marketing or product development.
- Private practice, working under contract with health care or food companies, or in their own business. RDN's may provide services to foodservice or restaurant managers, food vendors, and distributors, or athletes, nursing home residents or company employees.

- Medical nutrition therapy (MNT) services are covered by most health care insurance companies.

What is the evidence to support the cost-effectiveness, cost benefit or economic savings of outpatient MNT services provided by an RDN?

**Conclusion:**

Ten studies were reviewed to evaluate the cost-effectiveness, cost benefit and economic savings of outpatient MNT, involving in-depth individualized nutrition assessment and a duration and frequency of care using the Nutrition Care Process to manage disease. Using a variety of cost-effectiveness analyses, the studies affirm that MNT resulted in improved clinical outcomes and reduced costs related to physician time, medication use and/or hospital admissions for people with obesity, diabetes and disorders of lipid metabolism, as well as other chronic diseases. Further research is needed on the cost-effectiveness, cost benefit and economic savings of outpatient MNT in other disease states.

AND Evidence Analysis Library: December 2007

## **RDN's in the Medical Home Model of Care**

*Since medical home tenets include disease prevention and management of co-morbidities, RDN participation is essential to improve patient health outcomes and reduce costs.*

-AND Medical Home Workgroup's "Patient-Centered Medical Home Strategic Plan"

Many PCMH models are in place across the country. A variety of groups, including payer groups, state medical boards, state and federal government agencies, and national medical associations have collaborated to develop local PCMH models. Most models are initiated as demonstration projects to assess the program's impact and cost-savings on a particular patient group, and in some cases the model targets specific disease conditions. **Registered Dietitian Nutritionist's** can be an integral part of the team that provides patient-centered care to individuals through the medical home.

The rationale for the benefits for PCMH has been found in:

- Greater access to needed services
- Better quality of care
- A greater focus on prevention
- Early management of health problems
- The cumulative effect of the main primary care delivery characteristics

- The role of primary care in reducing unnecessary and potentially harmful specialist care.
- Community and public health settings teaching monitoring, and advising the public, and helping to improve their quality of life through healthy eating habits.
- Universities and medical centers teach physicians, nurses, dietetic students, and others the sophisticated science of food and nutrition.
- Research areas in food and pharmaceutical companies, universities, and hospitals, directing or conducting experiments to answer critical nutrition questions and find alternative foods or nutrition recommendations for the public.



## **The Academy of Nutrition and Dietetics (AND)**

The Academy of Nutrition and Dietetics (AND) is the world's largest organization of food and nutrition professionals. Founded in 1917, AND is committed to improving the nation's health and advancing the profession of dietetics through research, education and advocacy.

Approximately 75 percent of AND's nearly 70,000 members are Registered Dietitian Nutritionist (RDN's). Other members include consultants, educators, researchers and students. Nearly half of all AND members hold advanced academic degrees.



## **Rhode Island Academy of Nutrition and Dietetics**

The Rhode Island Academy of Nutrition and Dietetics is a local affiliate of the Academy of Nutrition and Dietetics'.

Mission of the Rhode Island Academy of Nutrition and Dietetics: Empowering Registered Dietitian Nutritionists through advocacy and education to serve their communities as nutrition experts.

# The Benefits of Medical Nutrition Therapy

How effective is MNT provided by Registered Dietitian Nutritionists in the management of type 1 and type 2 diabetes?

## Conclusion

MNT has its greatest impact at diagnosis of diabetes. Eight studies evaluating the effectiveness of diabetes MNT at three to six months, reported reductions in A1C, ranging from 0.25% to 2.9%, depending on the type and duration of diabetes. Individual sessions ranging from one to five or a series of 10 to 12 group sessions were employed. A variety of nutrition therapy interventions, such as a reduced energy and fat intake, carbohydrate counting, simplified meal plans; healthy food choices, individualized meal planning strategies, exchange lists, insulin-to-carbohydrate ratios and behavioral strategies were implemented. The number of initial and follow-up sessions varies in all the studies. Studies reporting on effectiveness of MNT from six to twelve months report a variety in the number and type of MNT sessions that lead to improved outcomes. Therefore, the RDN needs to determine what is appropriate for individual clients. Seven studies report sustained improvements in A1C at 12 months and longer. All involved regular sessions with an RDN, ranging from monthly to three sessions per year. Seven studies report improvements in other outcomes, such as improved lipid profiles, weight management, decreased need for medications and reduced risk for onset and progression of comorbidities.

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What is the evidence to support effectiveness of MNT provided by a Registered Dietitian Nutritionist for overweight/obesity in otherwise healthy adults?

## Conclusion

Medical nutrition therapy (MNT) provided by a Registered Dietitian Nutritionist results in both statistically and clinically significant weight loss in otherwise healthy overweight and obese adults. Four studies regarding the effectiveness of MNT for under six months reported significant weight losses of approximately one to two pounds per week. Four studies regarding the effectiveness of MNT from six to twelve months reported significant mean weight losses of up to 10% of body weight. Four studies report maintenance of this weight loss beyond one year. In these, both individual and group sessions were employed with weekly and monthly sessions.

AND Evidence Analysis Library: February 2009

Registered Dietitian Nutritionists are the most qualified food and nutrition experts. According to the Institute of Medicine (IOM), MD's US Prevention Services Task Force (USPSTF).

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