UMES Dietetic Internship Mission, Goals and Objectives

Mission:

To provide a variety of experiential learning and professional development opportunities to enable program graduates to develop entry-level competence for dietetic practice in diverse communities.

Program Goals and Objectives:

The Dietetic Internship Program will:

1. provide a performance based generalist program designed to bridge the gap between didactic dietetics education and entry-level dietetics practice and enables an intern to successfully write the Registration Examination for Dietitians on the first attempt;
   
   **Outcome measures:**
   
   a. Five-year passage rates on the Registration Examination for Dietitians.
      A minimum of 80% of graduating interns will pass the Registration Examination for Dietitians on the first attempt.
   
   b. Five year averages for employer performance evaluation.
      A minimum of 80% of employers will rate graduating students as satisfactory or higher on survey items.
   
   c. A minimum of 80% of graduating interns will find full or part time employment in the field of nutrition and dietetics within 12 months after graduation or pursue an advanced degree in the field of dietetics.

2. promote successful completion of a variety of supervised practice experiences that promote an understanding of issues faced by a rural community with an emphasis in the area of diabetes management;
   
   **Outcome measures:**
   
   a. Five year program completion rates.
      A minimum of 80% of interns will successfully complete the dietetic internship within a 18 month period.
   
   b. Five year program assessment by interns.
      A minimum of 80% of interns will state they were prepared for their current job in the field of dietetics.

3. foster development of knowledge, skills, and competencies required for entry-level dietetics practice especially in the area of diabetes education and counseling that will enable program graduates to shape, direct, and control nutrition services in traditional and emerging employment settings.
   
   **Outcome measures:**
   
   a. Exit interview of interns and final diabetic rotation evaluation
      Interns will successfully complete a minimum of one diabetic rotation and receive an average of 3 or greater on their final competency evaluation.

Program outcomes data are available upon request from the program director.
The Dietetic Internship is a performance-based generalist program designed to bridge the gap between didactic education and entry-level professional dietetic practice. Approved by the Academy of Nutrition and Dietetics (A.N.D.), the program requires a minimum of 1200 clock hours of supervised practice in foodservice systems management, clinical nutrition, diabetes outpatient services and community nutrition with a concentration in Diabetes Education and Counseling. The Accreditation Council for Education in Nutrition and Dietetics (ASCEND) has approved the acceptance of a maximum of four dietetic interns each year at the University of Maryland Eastern Shore.

This program is accredited through the Accreditation Council for Nutrition and Dietetics (ACEND) which is the accrediting agency for the Academy of Nutrition and Dietetics. Currently, it is undergoing re-accreditation and will have a campus site visit to reaffirm accreditation on November 3-5, 2013. The Accreditation Council for Nutrition and Dietetics is located at the following address:

120 South Riverside Plaza
Suite 2000
Chicago, IL  60606-6995
800/877-1600, ext. 5400
312/899-0040
Fax: 312/899-4817
Email: acend@eatright.org
Website: http://www.eatright.org/ACEND/
Application Process:

UMES will participate in DICAS – the Dietetic Internship Centralized Application System. The application must be submitted through the A.N.D./CADE – Dietetic Internship Central Application System for the April matching period. Deadline for application to DICA is in February. One official transcript from each institution attended submitted through the DICAS system. A minimum DPD grade point average of 3.0 is required.

- Signed and dated Statement of Intent to Complete Degree Requirements for the Didactic Program
- Three A.N.D./CADE Recommendation forms, two of which are completed by major professors.
- A typewritten letter of application which includes a discussion of your interest in the profession, short-term goals and long-term goals, and a statement regarding your attributes and why you are uniquely suited for this program.
- Qualifying applicants will be contacted for a telephone interview.
- Students must submit the DPD Verification Statement and final transcript(s) showing awarded degree prior to starting the program.
- Application fee of $50.00 payable to “UMES” by check or money order (nonrefundable) sent separately to the Dietetic Internship Director indicating that an application was submitted to DICAS.
- Applicants must be student member of the Academy of Nutrition and Dietetics and must retain member during the dietetic internship.
- Please note that our internship program does not satisfy the requirements for a full time student on an F -1 visa or work visa. Please contact Admissions office or Human Resources for more information
Background Checks and Drug Testing:

Each facility which provides rotations for the UMES dietetic internship has unique requirements based on the individual facilities standards. Prior to each rotation the preceptor will notify the director concerning the need for a background check and/or a drug test. Coverage of costs will be determined on a case by case basis. The intern will be responsible for any costs incurred.

Professional Liability Insurance:

The University of Maryland Eastern Shore will provide student professional liability insurance. Additional insurance can be purchased individually at the discretion of the intern through the Academy of Nutrition and Dietetics administered by Marsh, a service of Seabury & Smith. Insurance is available for members of the Academy of Nutrition and Dietetics in the Student category. Cost of additional insurance will be the responsibility of the intern.

Membership in the Academy of Nutrition and Dietetics:

All interns must be a member of the Academy of Nutrition and Dietetics for the duration of the internship. This fee will be incurred by the intern. A copy of your membership card will be kept on file during the internship.
Health Record:

The intern will incur the cost of the required physical and immunizations. All health examinations and immunization must be current and it is suggested they be completed in June or July prior to the start of the internship.

Students are required to submit health history and immunization proof upon entry to the university.

Documentation of the following is required:

Completed health history form

MMR (Measles, Mumps and Rubella)----- 2 doses

PPD (Tuberculosis skin test)--------------- (for history of positive TB skin test, a chest x-ray is required) No earlier than July or August prior to the start of the internship

Meningitis Vaccine or waiver--------------(on campus student)

Hepatitis B Series

All required forms must be submitted in August prior to the start of the internship.
Medical Insurance:

Interns must have medical insurance during the complete duration of the program. Acquiring and maintaining insurance is the responsibility of the intern. Should an intern become ill or injured at the UMES campus or an outside rotation, the intern’s medical coverage will take effect to cover all costs. Health insurance that only provides catastrophic coverage is not acceptable.

Insurance is available for purchase through the university at njcservices.com.
Program Costs:

Program costs are estimated below and are subject to change without prior written notice.

<table>
<thead>
<tr>
<th>Part-time Graduate Tuition, Fees and Other Cost</th>
<th>Maryland Residents</th>
<th>Non- Maryland Resident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Fee</td>
<td>$ 50.00</td>
<td>$ 50.00</td>
</tr>
<tr>
<td>Tuition: 2 Credits (One credit for Fall semester and one credit for Spring semester)</td>
<td>574.00</td>
<td>944.00</td>
</tr>
<tr>
<td>Student Fee</td>
<td>66.00</td>
<td>66.00</td>
</tr>
<tr>
<td>Technology Fee</td>
<td>20.00</td>
<td>20.00</td>
</tr>
<tr>
<td>Program Fee</td>
<td>4500.00</td>
<td>4500.00</td>
</tr>
<tr>
<td>Academy of Nutrition and Dietetics Student Membership Fee</td>
<td>50.00</td>
<td>50.00</td>
</tr>
<tr>
<td>CPR Certification (Approx.)</td>
<td>60.00</td>
<td>60.00</td>
</tr>
<tr>
<td>Housing – off campus estimate *</td>
<td>6500.00</td>
<td>6500.00</td>
</tr>
<tr>
<td>Meals estimate</td>
<td>2000.00</td>
<td>2000.00</td>
</tr>
<tr>
<td>Books and Other Supplies</td>
<td>600.00</td>
<td>600.00</td>
</tr>
<tr>
<td>Transportation/Parking - estimate</td>
<td>2500.00</td>
<td>2500.00</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>500.00</td>
<td>500.00</td>
</tr>
<tr>
<td>Total</td>
<td>17,376.00</td>
<td>17,790.00</td>
</tr>
</tbody>
</table>
Fees and Expenses **

Payment of Fees

It is the policy of UMES not to defer payment on the basis of a pending application for financial assistance to an outside agency, including Veterans Administration benefits, bank loans, guaranteed student loan programs, etc.

Students whose accounts are in arrears will experience delays and holds in registration and in admittance to classes. Students indebted to the University are likewise prevented from having degrees conferred or transcripts released until the total debt is cleared.

The State of Maryland has a State Central Collections Unit, and in accordance with State law, UMES is required to refer all delinquent accounts to that office for collection and subsequent legal action.

Withdrawal and Tuition Refund (Regular Semester/Session)

A Cancellation of Registration, submitted to the undergraduate Admissions Office before the official first day of classes, entitles the student to a full credit or refund of semester/session tuition.

After classes begin, students who wish to terminate part or all of their registration must follow the drop class or withdrawal procedures of the Registrar and Academic Affairs. Students in USM intercampus enrollment must make certain they drop or withdraw at the host campus as well as at UMES. The effective date used in computing refunds is the date the drop and/or withdrawal form is filed.

Students dropping classes and/or withdrawing from the University during a semester will be credited for any allowable tuition charges, according to the following:

**Period from date Refundable Tuition**

**Instruction begins only (no other fees)**

Two weeks or less 80%

Between two and three weeks 60%

Between three and four weeks 40%

After four weeks No Refund
(This schedule is subject to change)

University Refund Statement (Regular Semester/Session)

Tuition is authorized for refund, according to a refund time schedule (see above), only if the student cancels registration before classes begin, or drops classes after classes begin, completes the prescribed procedures for withdrawal from classes for the semester, or is dismissed. Note that all of these conditions to be eligible for a tuition refund must be acted on during the refund schedule period.

**( UMES school of Graduate Studies  page 17)**

The DI Application fee and dietetic internship program fee are non-refundable. The DI program will assume responsibility for payment of the graduate school application fee.

Financial Aid:

Financial aid for the dietetic internship is not provided through UMES. Request for loan deferment is available from the DI director at the request of the intern.
**Housing Information:**

Interns are encouraged to secure housing in or around the Salisbury area, as this is the central location for the majority of rotations.

Salisbury, Maryland Chamber of Commerce  
http://www.salisburyarea.com/

**Student Health Services:**

The Charles R. Drew Health Center is located on the campus of the University of Maryland Eastern Shore in the Lida Brown building, directly behind Trigg Hall. The Health Center functions as a resource to help students achieve and maintain wellness, as well as a treatment center for health problems within the student population. The Student Health Center provides health care to the student population that is convenient, affordable and accessible within a pleasant, professional atmosphere.

The Student Health Center provides services from 8:00 am to 4:00 pm, Monday through Friday during the semesters. Students are seen on a walk-in basis from 8:00 am to 11 am and by appointment from 1 pm to 4 pm. Hours may vary during semester breaks and holidays.

Please refer to the UMES website for more detailed information.  www.umes.edu/studenthealth

**Student Support Services:**

The University of Maryland Eastern Shore provides a variety of student services available for graduate students including:

1. **Post Office** – located in Student Services Center. Window Hours: 8:00 a.m. - 5:00 p.m., Monday - Friday Mailbox Lobby Hours: 8:00 a.m. - 7:00 p.m., Monday – Friday, Phone: 410.651.6439.

2. **Media Services Center** located in the lower level of the Frederick Douglas Library. Hours: Monday-Friday 8am-5pm Telephone 410-651-6275/6154 Website:  
   www.fdl.umes.edu.

3. **Counseling Services**. Located in Student Development Center 2nd Floor Suite. Contact person Dr. Ronnie McLean. Phone 410-651-6449  
   Website: www.umes.edu/counselingcenter.

Provides individual counseling to all students, solves social and personal adjustment problems as well as counseling to students unsure about major degree and careers. Specializing in mental health counseling.
4. Center for Access and Academic Success (CAAS). Located in the Student Development Center 2nd floor suite. Phone 410-651-6215 or 6457. Contact person Ms Robin Burton, Ms. Betty Harmon, Mr Andrea Taylor, Mrs. Tselate Talley. Website: www.umes.edu/caas.

Provides academic coaching and strategies to retain all students. Provides assistance regarding programs of study, course selection and information on use of online catalog and registration.

5. Health and Wellness Program, Fitness Center Tawes Building Phone 410-651-8443, Contact Person Mike Hall. Website: www.umes.edu/wellnesscenter.

6. Office of Student Financial Aid located in the Student Development Center, Suite 1100 Princess Anne, MD 21853, telephone 410-651-6172, (fax) 410-651-7670 Contact person Mr. James Kellam, Website: www.umes.edu/financialaid.

7. Information Technology (IT) Services. Located in Waters Hall. Contact the Help Desk by phone at TECH (x8324 or 410-651-8324) Website:www.umes.edu/it.

8. Writing Center- Wilson Hall 1107, Contact person Dr. Terry Smith, Phone 410-621-3071. Provides assistance in all stages of the writing process. Mon-Thurs.: 10:00am-8:00PM; Fri 10:00am-2:00pm. Open to all students in all courses.

9. Student Health Services located in the Lida Brown Building. Contact person Mrs. Sharone Grant Phone 410-651-6597. Website: www.umes.edu/studenthealth (see above).

10. Disability Services located in the student services center second floor. Contact person Dr. Dorling Joseph. Phone 410-651-6172. Facilitate Equal opportunity for students with special needs. Advocacy to assist students in maximizing their academic potential; campus visits, pre-admissions, classroom accommodations, etc.

11. Registrar located in Student Development Center, first floor. Contact person Mrs. Cheryl Holden-Duffy. Phone 410-651-6414. Provides services all university academic records: issuances of transcripts, enrollment verifications, withdrawals form, the university, degree certification, change of majors, etc. Offers assistance with registration and/or problems entering data into HawkWeb.

12. Career Services located in Student Development Center second floor. Contact person Dr. Theresa Queenan Phone 410-651-6447.

13. Office of Graduate Studies located the Child Development Center Suite 1137. Contact person Dr. Jennifer Keane-Dawes, Dean. Phone 410-651-6507. Website: http://www.umes.edu/Grad.

Transportation and Parking:

It is the intern’s responsibility to have dependable transportation to all assigned rotations, joint classes and additional learning activities. Carpooling is suggested when possible to reduce travel costs. The intern must also carry automobile liability insurance throughout the program. The intern is responsible for all liability for safety in travel to or from assigned facilities.

A parking sticker or Visitor Pass is required for all personal vehicles parked on the UMES campus. Payment for parking stickers can be made at the campus Police Station. If you are using the Hawk Express Card, monies may be added to the card, and payment for the parking sticker can be deducted from the Hawk Express Card at the Office of Public Safety.

Each facility will have their own individual parking arrangements. The intern is responsible for securing parking information prior to the start of each rotation.
Program Schedule:

The program length is a minimum of 41 weeks. Interns are allowed to take 3 personal days during the program. Detailed tentative schedules will be presented to the interns during orientation at UMES.

Didactic and supervise practice experiences include approximately:

- Nutrition therapy: 480 hours
- Foodservice management: 300 hours
- Community nutrition: 420 hours
- Didactic and professional meetings: 200 hours

Affiliation Sites:

The program experiences are designed in categories of dietetic specialties from clinical nutrition, foodservice management and community nutrition. Some of the program partners include:

<table>
<thead>
<tr>
<th>Atlantic General Hospital &amp; Atlantic General Hospital Diabetes Program</th>
<th>Deer's Head Hospital Center</th>
<th>HealthSouth Chesapeake Rehabilitation Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid Shore WIC and Delaware WIC Program</td>
<td>Wicomico Nursing Home</td>
<td>Worcester County Schools Food and Nutrition Services</td>
</tr>
<tr>
<td>Nanticoke Memorial Hospital</td>
<td>Eastern Shore Area Health Education Center</td>
<td>Peninsula Regional Medical Center Diabetes Education Program</td>
</tr>
<tr>
<td>Peninsula Regional Medical Center</td>
<td>DaVita Dialysis Center</td>
<td>Holly Center</td>
</tr>
<tr>
<td>Wicomico County Schools Food and Nutrition Services</td>
<td>Harbor Health Nursing Center</td>
<td>MAC Inc., Area Agency on Aging</td>
</tr>
</tbody>
</table>
Competencies:

The learning outcomes for the supervised practice component of entry-Level dietitian education programs describe what graduates should be able to do at the end of the supervised practice program. Learning outcome statements developed by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics (A.N.D.) are listed below. According to ACEND, the minimum performance level for the competency is indicated by the action verb used at the beginning of the statement.

**DI 2012 ERAS**

*Expected Learning Outcome*

<table>
<thead>
<tr>
<th>1. Scientific and Evidence Base of Practice: integration of scientific information and research into practice.</th>
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<tbody>
<tr>
<td>Upon completion of the program, graduates are able to:</td>
</tr>
<tr>
<td>CRD 1.1</td>
</tr>
<tr>
<td>CRD 1.2</td>
</tr>
<tr>
<td>CRD 1.3</td>
</tr>
<tr>
<td>CRD 1.4</td>
</tr>
<tr>
<td>CRD 1.5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upon completion of the program, graduates are able to:</td>
</tr>
<tr>
<td>CRD 2.1</td>
</tr>
</tbody>
</table>
and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics

<table>
<thead>
<tr>
<th>CRD 2.2</th>
<th>Demonstrate professional writing skills in preparing professional communications (e.g. research manuscripts, project proposals, education materials, policies and procedures)</th>
</tr>
</thead>
</table>
| CRD 2.3 | Design, implement and evaluate presentations to a target audience  
Tip: A quality presentation considers life experiences, cultural diversity and educational background of the target audience |
| CRD 2.4 | Use effective education and counseling skills to facilitate behavior change |
| CRD 2.5 | Demonstrate active participation, teamwork and contributions in group settings |
| CRD 2.6 | Assign patient care activities to DTRs and/or support personnel as appropriate.  
(Tip: In completing the task, students/interns should consider the needs of the patient/client or situation, the ability of support personnel, jurisdictional law, practice guidelines and policies within the facility.) |
| CRD 2.7 | Refer clients and patients to other professionals and services when needs are beyond individual scope of practice |
| CRD 2.8 | Apply leadership skills to achieve desired outcomes |
| CRD 2.9 | Participate in professional and community organizations |
| CRD 2.10 | Establish collaborative relationships with other health professional and support personnel to deliver effective nutrition services  
(TIP: Other health professionals include physicians, nurses, pharmacists, etc.) |
| CRD 2.11 | Demonstrate professional attributes within various organizational cultures  
(Tip: Professional attributes include showing initiative and proactively developing solutions, advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic.) |
| CRD 2.12 | Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetics Registration |
| CRD 2.13 | Demonstrate negotiation skills  
(Tip: Demonstrating negotiating skills includes showing assertiveness when needed, while respecting the life experiences, cultural diversity and educational background of the other parties.) |

### 3. Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

Upon completion of the program, graduates are able to:

<table>
<thead>
<tr>
<th>CRD 3.1</th>
<th>Perform the Nutrition Care Process (a through d below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings</th>
</tr>
</thead>
</table>
| CRD 3.1.a | Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be
CRD 3.1.b: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements

CRD 3.1.c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention

CRD 3.1.d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis

CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting.

CRD 3.2 Demonstrate effective communications skills for clinical and customer services in a variety of formats.
(Tip: Formats include oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing.)

CRD 3.3 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
(Tip: Students/interns should consider health messages and interventions that integrate the consumer’s desire for taste, convenience and economy with the need for nutrition, food safety.)

CRD 3.4 Deliver respectful, science-based answers to consumer questions concerning emerging trends

CRD 3.5 Coordinate procurement, production, distribution and service of goods and services.
(Tip: Students/Interns should demonstrate and promote responsible use of resources including employees, money, time, water, energy, food and disposable goods.)

CRD 3.6 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals

4. Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

Upon completion of the program, graduates are able to:

CRD 4.1 Participate in management of human resources

CRD 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food

CRD 4.3 Participate in public policy activities, including both legislative and regulatory initiatives

CRD 4.4 Conduct clinical and customer service quality management activities
| CRD 4.5 | Use current informatics technology to develop, store, retrieve and disseminate information and data |
| CRD 4.6 | Analyze quality, financial or productivity data and develop a plan for intervention |
| CRD 4.7 | Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment |
| CRD 4.8 | Conduct feasibility studies for products, programs or services with consideration of costs and benefits. |
| CRD 4.9 | Analyze financial data to assess utilization of resources |
| CRD 4.10 | Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies |
| CRD 4.11 | Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers. |

Competencies specific for various rotations must be signed and dated by the assigned preceptor after the completion of each activity. Each activity will also be evaluated by the preceptor on the competency form. The completed form should be included in your portfolio.

**Rotation Preparation:**

The intern is required to complete the rotation checklist and assigned module prior to the start of each rotation. Reviewing topics which will be addressed and discussed during the rotation will best prepare the intern for that experience. Specific learning modules will be assigned during the internship prior to the beginning of the rotations. Additional readings may be required by the preceptor.

**Joint Classes:**

Joint classes are specified on the intern’s schedule and are mandatory. Each class provides a unique opportunity to attend various facilities in the Baltimore and Washington, DC area. Transportation to the joint classes will be the intern’s responsibility unless otherwise specified. The classes provide instruction on a variety of subjects including kosher dining, bariatric surgery and eating disorders, critical care, informatics, pediatrics, research and the human genome. If a joint class is missed the intern will review (4) four journal articles relating to the subject matter and will present the articles to the internship class. A report summarizing the articles will be included in the intern’s portfolio. Transportation to the classes are the students responsibility unless otherwise noted.

All joint classes will have a portfolio entry explaining briefly the content of each presenter, the relevance to practice, an evaluation of the day and a copy of the agenda.
Portfolio:

Each intern is responsible for completing a portfolio entry for every supervised practice activity and each didactic joint class/additional activity.

1) Purchase a 2” binder with section dividers for competencies, evaluations and time sheets and additional supplemental materials. The activity explanations will be submitted via email.

2) Part one of each entry should contain a copy of the completed competency/activity form signed and dated by the preceptor, along with supporting materials for each competency including an explanation of the activity, methodology, execution and results. Attach copies of nutritional assessments, nutrition education materials, copies of power point presentations, pictures of developed materials, etc.

3) Part two should include the interns’ explanation of each activity, whether the rotation has met your expectations and how this experience will enhance your practice.

4) Part three should include a copy of the evaluations. Self-assessment goals, mid-term evaluation (if completed), intern evaluation completed by the preceptor, intern evaluation of the rotation and intern evaluation of the preceptor.

5) The time sheet will be provided for each rotation and submitted with the signed competencies. Please make copies for each submission.

6) If there are corrections or additions recommended, the rotation entry will need to be corrected by the intern and re-submitted.

7) The portfolio binder and zip drive is the property of the University of Maryland Eastern Shore.

8) The portfolio will be submitted to the Internship Director after the completion of the rotation which includes the final evaluation by the preceptor. Portfolio submission is required at each assigned UMES class.

9) All activities including rotations, joint classes, MDA, GAIT programs, evening diabetes classes, modules, plus any additional meetings/classes you have attended should have an entry in your portfolio.

10) All rotation activities and evaluations should be submitted electronically to the director on the date of the UMES class. All components of the intern’s portfolio will be saved on a zip drive. Competencies, evaluations and time sheets will be printed, signed by the preceptor and intern and provided to the director for inclusion in the portfolio binder. The zip drive will become the property of the University of Maryland Eastern Shore upon completion of the internship.
11) Please list your name and date in the top corner of each page of all submitted items and date corrected items.

**Intern Evaluation and Graduation Requirement:**

Interns must satisfy 100% of the stated competencies at a proficiency level of beginner or higher in order to receive a Certificate of Program Completion and verification statement. Upon satisfactory completion of the graduation requirements verification to the Commission on Dietetic Registration will be submitted.

Interns will receive feedback on their performance in the practicum setting at least weekly. **Preceptors will determine whether competencies are satisfactorily met by achieving a 3 or higher on the evaluation form.** Competencies may need to be repeated until a level of 3 is met by the preceptor. Formal evaluations will occur at the end of each rotation. If an intern is unable to achieve the competencies at the level of beginner or higher, the preceptor and the program director will counsel him or her. If the intern has not made satisfactory progress by the end of a rotation, i.e. food service, clinical, or community, the rotation will be extended to an agreed upon length of time. An intern is granted only one extension during the internship experience and will be asked to withdraw from the program if extensions are deemed necessary for more than one rotation.

A summative evaluation will be conducted at the end of each rotation using the following criteria, along with individual feedback on each competency learning activity.

<table>
<thead>
<tr>
<th>N/O = NOT OBSERVED</th>
<th>1= NOVICE</th>
<th>2= BEGINNER</th>
<th>3= COMPETENT</th>
<th>4= PROFICIENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>No opportunity to observe intern performing a planned activity to meet this competency</td>
<td>Demonstrates knowledge of facts and details, but needs further development. Offers probable solutions to problems identified by preceptor.</td>
<td>Demonstrates synthesis of basic concepts related to problems resulting in a solution. Selects correct knowledge principles for problems. Identifies problem solving solutions</td>
<td>Consistently and independently incorporates knowledge into practice setting. Seeks out and critically analyses multifaceted problems areas.</td>
<td>Consistently exceeds expected level of skill, behavior, or knowledge in quality and ability.</td>
</tr>
</tbody>
</table>

The program director and program preceptors will utilize a variety of evaluation techniques to determine intern competency. Letter grades for the course will be based on composite scores derived from intern performance in the categories noted below:

- **Competency evaluations, portfolio** 50%
lane examinations, presentations and case studies 15%
♦ Final evaluation (A minimum of 75% is required) 35%

Interns must complete a minimum of 1200 supervised practice hours and 100% of all competencies with a level of beginner or higher on the performance matrix, a minimum score of 75% on the final examination and an average of 80% on all additional assignments including quizzes, class assignments, journal presentations, case studies to be considered for graduation from the dietetic internship program. If a quiz or assignment is scored below 80%, the intern will be required to repeat the assignment or test at a time and location designated by the director.

Time Sheet

The time sheet must be signed by the preceptor or designee after the completion of each day. **Please explain any irregular occurrence.** You are required to report a minimum of 1200 supervised practice hours. A copy of the time sheet must be included in your portfolio each time a rotation is submitted for review to the Internship Director.

Time for UMES classes and joint classes do not need to be documented. All other activities must be documented on the time sheet.

Request for time off documentation should be included on the evaluation form for the respective rotation.

Self-Assessment:

Each intern will prepare a self-assessment during orientation and after the completion of each rotation. This assessment will be part of the portfolio. Any weakness identified should be addressed in subsequent rotation and should also be the focus of the goals in later rotations. All self-assessment goals will be documented on page one of the Initial/Midterm Evaluation Form. Interns will keep a complete list of self-assessment goals with the respective rotations.

A draft of the intern’s self-assessment portfolio will be developed and presented at the exit interview. This portfolio should pattern the Commission on Dietetic Registration Professional Development Portfolio Guidelines including step one, two and three of the process. Website: [http://cdrnet.org/pdp](http://cdrnet.org/pdp).
Program Evaluation:

Interns will be required to complete an assessment of each rotation, joint classes, supplemental activities and preceptors. An exit interview evaluation of the internship is also required. These documents will be submitted as part of the intern’s portfolio and will be included in the summative program evaluation.

A mid-term evaluation will be completed on all rotations which are greater than 2 weeks in length. The mid-term evaluation date should be discussed with the preceptor on the first day of the rotations. The internship director will attend the mid-term evaluation and discuss the weaknesses and strengths identified by the preceptor. The Internship director may attend the final evaluation of a rotation.

Dress Code:

Interns will dress appropriately for their rotations, joint class experiences, workshops, and meetings. Interns will wear name tags provided by the internship or the facility during every rotation. It is the responsibility of the intern to follow the dress code of the particular facility they are assigned.

For the food production component, interns should wear appropriate, conservative street clothes with a clean white lab coat. Shoes must be leather, slip resistant, and closed at the toe. Clogs are not permitted. Hair must be restrained – hair nets are required for foodservice rotations.

For the clinical rotation, a clean, white full-length lab coat is required. Flat sole, comfortable shoes are appropriate. Nail enamel, fake fingernails, extensions, perfume or cologne are not allowed during the clinical or foodservice rotations. Excess jewelry should be avoided. This is facility policy and will be strictly enforced. When attending a joint class, interns are expected to dress professionally.

It is suggested that males wear a collared shirt, belt, dress trousers and clean white lab coat. T-shirts and sweatshirts are not permitted. Neckties should be omitted or secured if worn for foodservice rotations. Hair nets are required during food service rotations. Facial hair will also require a restraint when working in the food service department.

Please remember you are representing both yourself and the University to potential employers and other dietetic professionals.

Piercings and tattoos will be discussed on an individual basis. Most facilities require piercings to be covered except ear piercings. However it is the intern’s responsibility to comply with each individual facility policy regarding dress, hair, and accessories.
Attendance and Participation:
A schedule for the year will be presented to each intern during orientation. Please note that the schedule is tentative and may be changed at the directors discretion. Notification of changes will be provided by the director.

Preceptors and collaborating agencies are not compensated for their participation in the program. Their professional commitment to support dietetics education is compensated only by the degree to which you, the intern, are committed to this endeavor. For this reason, each intern is expected to report on time to the facility as assigned and remain there for the duration of the assignment each day. Each intern is responsible for maintaining an accurate time sheet and having it initialed daily by his/her preceptor or designated representative. You are required to work a minimum of 8 hours each day.

Should an emergency arise, you must notify the preceptor by phone, before the time you are scheduled to arrive. The internship director must also be notified, by phone prior to 9:00 AM. Emails and text messages are not an acceptable form of notification.

Participation in Joint Classes are mandatory unless otherwise specified.
Interns will be expected to follow-up each rotation and joint class with a thank you note to either the preceptor or program coordinators.

Personal Days:
Each intern is allowed (3) three personal/sick days before time must be made up in the internship. Leave forms for personal or anticipated sick leave (such as a medical appointment) must be submitted two weeks in advance for approval. Time missed beyond the three days must be made up. Make-up time will be scheduled after consultation with the preceptor and program director. Personal days must be approved by the director and then by the preceptor. Paper work should be completed and provided to the director a minimum of 2 weeks prior to the expected absence except in emergency situations. See sick/personal leave form.

Please do not request personal time during short rotations of 2 weeks or less.
Holidays:

The following holidays will be observed (Please note: we do not follow the university calendar for holidays and semester breaks):

Thanksgiving Day and the Friday following Thanksgiving, Christmas Eve, Christmas, the week between Christmas and New Year’s Day, New Year’s Day, Memorial Day, Spring Break (2 days around Easter). If you are scheduled to work any of these holidays you may request a day off at another time during the internship at the approval of the director.

Snow Days:

The intern is responsible for discussing the facility’s policy regarding snow days. Each individual facility policy will be observed. In the event of a class day or joint class, the policy is to follow the University of Maryland Eastern Shore snow policy as noted on the UMES website. Joint classes and supplemental activities will be decided by the internship director before 5:00 AM.

Absences Due To Bereavement:

The intern is excused for three (3) regularly scheduled program days when there is a death in his/her immediate family (spouse, child, broth, sister, mother, father, surrogate mother/father, grandparent, step child or spouse’s parent). The Internship Director reserves the right to request valid proof of death and relationship of immediate family member. Any request for additional days of absence is approved by the Internship Director. The schedule will be adjusted and additional days may need to be added to certain rotations at the discretion of the director.

Protection of Student Privacy:

Intern personnel files will be kept in a locked filing cabinet in the director’s office. Interns may request access to their particular file through the Internship Director.

Cell Phone and Electronic Communication Usage:

Cell phones and other electronic communication devises must be turned off or placed on silent while at the rotations, joint classes and UMES classes. It is the intern’s responsibility to identify and follow the facility policy concerning electronic communication devises during the rotations. Computers may be brought to the rotations however this is at the discretion of the preceptor. Computers should be used for rotation assignments only.
Reporting Code of Ethics Incident:

Each individual accepted into the dietetic internship must comply to the American Dietetic Association/Commission on Dietetic Registration Code of Ethics for the Profession of Dietetics.

In the event of an intern exhibiting unethical behavior, the following procedure will be followed.

1. Discuss the incident with the internship director.
2. Document the occurrence on the Level 1 Incident form.
3. Schedule a meeting to discuss the occurrence with the intern, preceptor and the internship director.
4. Discuss corrective action during the meeting and time frame if appropriate.
5. Prepare all paperwork for the Internship Director for inclusion in the Interns file.
6. The Internship Director will follow up with the preceptor concerning any additional action.
7. Level 2 Incident Form should be prepared if there is a repeat of the initial occurrence or the corrective action was not followed.
8. Meeting to discuss Level 2 incidence should be scheduled with the preceptor, intern and internship director.
UMES DIETETIC INTERNSHIP INCIDENT REPORT
LEVEL 1 INCIDENT
Report documenting Verbal Warning. Copy to Internship Director and placed in interns file.

Intern: ____________________________ Date of Incident: ________________

Site: ________________________________

Preceptor: ___________________________ Internship Director ___________________________

Person Reporting Incident/Title: ________________________________
Please describe incident indicating ADA Code of Ethics violation(s) as applicable:

Document corrective action plan discussed between intern and Preceptor and/or Internship Director:

__________________________________________________
Signature of Person Reporting Incident ____________________________ Date ________________

List of Attachments (if any):

I (intern) received a copy of this report on: ____________________________

Comments or Response (optional):

__________________________________________________
Intern Signature ____________________________ Date ________________
UMES DIETETIC INTERNSHIP INCIDENT REPORT
LEVEL 2 INCIDENT
Report to be sent to the Dietetic Internship Director and placed in interns file.

Intern: ___________________________ Date of Incident: ___________________________

Site: ___________________________

Preceptor: ___________________________ Internship Director ___________________________

Person Reporting Incident/Title: ___________________________

Please describe incident indicating ADA Code of Ethics violation(s) as applicable:

Describe how this incident was or will be addressed:

Should the UMES Dietetic Internship Program take further action? Yes _____ No _____

If yes, what do you suggest? (e.g. remediation, grade reduction, dismissal from the program)

________________________________________________________
Signature of Person Reporting Incident

List of Attachments (if any):
I received a copy of this report on: ___________________________

________________________________________________________
Intern Signature

_____________________________________________________________________

I received a copy of this report on: ___________________________

________________________________________________________
Signature of Dietetic Internship Director
Disability Statement:

Students capable of success, regardless of their disabilities are admitted to the university. The faculty and staff of the University of Maryland Eastern Shore work cooperatively to assist their students in achieving their educational goals. Moreover, students with disabilities are accommodated in accordance with both federal and state laws. To receive special accommodations for a disability, the student must register with Student Disability Services before any accommodations can be granted. At the time of registering for disability services, please bring documentation to support your claimed disability. The documentation must be within three years and provided by a licensed professional with expertise in the special disability area. If you have questions about disability services or accommodations, please contact Dr. Dorling Joseph at (410) 621-3446. The Student Disability Services office is located in the Student Services Center (SSC), Suite 2169.

Academic Honesty:

Academic honesty and integrity lie at the heart of any educational enterprise. Students are expected to do their own work and neither to give nor receive assistance during quizzes, examinations, or other class exercises. Because the university takes academic honesty seriously, penalties for violations may be severe, including failing the course and possibly being dismissed from the university. Students accused of academic dishonesty will be given due process before disciplinary action is taken. Please request most current policy and procedure followed when academic dishonesty accusations are lodged by faculty against students from the faculty member, the academic advisor, or the department chair.

Cheating and plagiarism are two of the most common forms of academic dishonesty and are described below:

Cheating includes but is not limited to:

a. giving answers to others in a testing situation without permission of the instructor;
b. taking or receiving answers from others in a test situation without permission of the instructor;
c. having possession of test materials without permission;
d. taking, giving, or receiving test materials prior to tests without permission;
e. having someone else take a test or perform an assignment for you;
f. submitting as your own work, work done by someone else;
g. permitting someone else to submit your work under that person’s name;
h. falsifying research data or other research material;
i. copying with or without permission any work, e.g., essays, short stories, poems, etc., from computer, hard drive or discs and presenting them as your own.
**Plagiarism** is the act of presenting as your own creation works actually created by others. Plagiarism consists of:

a. taking ideas from a source without clearly giving proper reference in a way that identifies the original source of the ideas and distinguishes them from your own;

b. indirectly quoting or paraphrasing material taken from a source without clearly giving proper reference in a way that identifies the original source and distinguishes the paraphrased material from your own compositions;

c. directly quoting or exactly copying material from a source without giving proper reference or otherwise presenting the copied material as your own creation.

**Grievance Procedures:**

Interns with grievance, complaints, concerns, or problems are encouraged to speak with the program director. If the problem cannot be resolved at this level, the intern should then make an appointment with the department chairperson to discuss the problem. To reach the department chairperson, please dial 410-651-6056. When possible, interns concerns are handled at the department level. However, the intern may pursue progressive recourse through the Office of the Dean of the School of Agricultural and Natural Sciences, or the Vice President for Academic Affairs or the President. All decisions are made in accordance with the policies and procedures outlined by the Board of Regents and the laws of the State of Maryland. Some discretionary powers may rest with the president’s office, as prescribed by policies of the Board of Regents of the University System of Maryland.

To reach ACEND, the address and phone number is: The Accreditation Council for Education in Nutrition and Dietetics (ASCEND) of the Academy of Nutrition and Dietetics: 120 South Riverside Plaza, Suite 2000, Chicago, IL 60606; (312) 899-5400.
Disciplinary/Termination Procedures:

Interns who consistently fail to demonstrate competency in the supervised practice, academic performance and/or appropriate personnel/professional characteristics risk dismissal from the program. Disciplinary action will be carried out in the following manner:

1. The preceptor, in consultation with the internship director files a Level 1 incident report. This report serves as a verbal warning and must be discussed with the intern. Together the preceptor and intern develop a corrective action plan. Space is provided for the intern’s response and signature.

2. A second infraction results in a Level 2 incident report and constitutes a written warning and must be signed by the intern, preceptor filing the report and clinical coordinator. This written documentation of the intern’s inadequate performance or improper behavior in the practicum setting is submitted to the program director for review.

3. After careful review of evidence, the program director makes a determination regarding the need for further disciplinary action or dismissal from the program.

4. If it is determined by the program director that there may be sufficient evidence for dismissal, a meeting of the Program Executive Committee, composed of the Chairperson of Department of Human Ecology and or Dean of the School of Agriculture and Natural Sciences, Dietetic Internship Program Director and the preceptor filing the level 2 incident report, will be convened. The committee will then meet with the intern for discussion.

5. The Program Executive Committee will make a recommendation, by secret vote, for intern dismissal or retention in the program.

6. A committee recommendation for dismissal will be submitted to Vice President for Academic Affairs for official action.

7. If the intern does not agree with the decision, and wishes to pursue the matter further, he or she may utilize the University Grievance Procedure outlined above.
Prior Learning/Supervised Practice Hours:

The University of Maryland Eastern Shore Dietetic Internship does not award any exemption from internship rotations/assignments for any prior education courses, and/or experiences. All competencies must be completed during the internship and signed off by the preceptor or dietetic internship director.

Employee Substitution:

Interns should not be considered as employee substitutes during their assigned rotations. The intern may be required to work with an employee or in an employee position to best understand their specific job responsibilities for a short period of time. Time in the facilities is considered supervised practice. If an intern questions the activities, they should contact the internship director as soon as possible.

Injury at Assigned Rotations

All injuries and/or accidents must be reported to the assigned preceptor and program director. The intern should obtain emergency medical care. An accident report will be completed as soon as possible and submitted to the facility preceptor, where the accident occurred and a copy will be faxed to the program director. Please complete the facility accident form and the University of Maryland Accident Form. Interns are responsible for all medical costs and treatment related to the occurrence.
Interns’ Responsibilities:

1) All competencies must be completed to the satisfaction of the assigned preceptor at an evaluation of novice (3) or greater. The planned learning activity should be presented to the preceptor in its completion, before the end of the rotation. **(You can fail a rotation!)**

2) Please speak with the preceptor on the first day of the rotation, concerning their expectations of each activity. All goals and expectations for the rotation should be discussed on the first day or during the first week of the rotation including evaluation date and competency submission dates.

3) Interns’ will be responsible for understanding the expectations of each preceptor. Discuss how each activity should be submitted i.e., in rough draft, formal document or verbal discussion. **Do not assume that all preceptors will be the same.**

4) Rotations which are two weeks or less in length will not have a mid-term evaluation. A final evaluation for these rotations will be required along with the competencies.

5) Interns will be allowed one late submission of their portfolio, one week following the class. Please contact the director the week before the assigned class. **Evaluation forms and competency forms must be submitted after every rotation, no exceptions.**

6) Do not ask for time to prepare your portfolio at the assigned rotations: This time is designated for supervised practice.

7) Do not plan on leaving early during a rotation. All travel arrangements should be made with these considerations in mind. A copy of the schedule is provided at the orientation of the internship. Do not purchase airline or train tickets without checking with the director concerning dates and times.

8) Please cc a copy of all email correspondence to the director.

9) If you have completed your assigned activities at a facility, this is your opportunity to observe the management of the employees. Walk around the facility and take note of sanitation and safety concerns, employee habits and interactions, etc. Ask if there is anything you can do to help. You should take every opportunity to experience the facility with the preceptors permission.
10) Preceptors are volunteers. Please send a thank-you note after completion of each assigned rotation, journal club and joint class.

11) Please contact the director as soon as possible concerning any preceptor issues or concerns. The director will address any issue after investigating the situation. Timeliness may facilitate a rotation replacement if needed.

Laws that Regulate Dietitians/Nutritionists

The forty-six states list below has laws that regulate dietitians or nutritionists through licensure, statutory certification, or registration. For state regulation purposes, these terms are defined as the following:

- **Licensing** — statutes include an explicitly defined scope of practice, and performance of the profession is illegal without first obtaining a license from the state.

- **Statutory certification** — limits use of particular titles to persons meeting predetermined requirements, while persons not certified can still practice the occupation or profession.

- **Registration** — is the least restrictive form of state regulation. As with certification, unregistered persons are permitted to practice the profession. Typically, exams are not given and enforcement of the registration requirement is minimal.

Dietetics practitioners are licensed by states to ensure that only qualified, trained professional provide nutrition services or advice to individuals requiring or seeking nutrition care or information. Only state — licensed dietetics professionals can provide nutrition counseling. No licensed practitioners may be subject to prosecution for practicing without a license. States with certification laws limit the use of particular titles (eg, dietitian or nutritionist) to persons meeting predetermined requirements; however, persons not certified can still practice. Consumers in these states who are seeking nutrition therapy assistance need to be more cautious and aware of the qualifications of the provider they choose.

Should you plan to practice dietetics in these states it is important that you
contact a state regulatory agency prior to practicing dietetics.

**Summary of Licensure Statutes * **

*Accessed on June 3, 2013*

**States with Laws that Regulate the Practice of Dietetics**

Alabama (1989)* - licensing of dietitian/nutritionist
Alaska (1999) - licensing of dietitian/nutritionist
Arkansas (1989) - licensing of dietitian
California (1995)* - registration* of dietitian
Connecticut (1994) - certification of dietitian
Delaware (1994) - certification of dietitian/nutritionist
District of Columbia (1986) - licensing of dietitian and nutritionist
Florida (1988) - licensing of dietitian, nutritionist and nutrition counselors
Georgia (1994)* - licensing of dietitian
Hawaii (2000)* - certification of dietitian
Idaho (1994) - licensing of dietitian
Illinois (1991) - licensing of dietitian and nutrition counselors
Indiana (1994) - certification of dietitian
Iowa (1985) - licensing of dietitian
Kansas (1989)* - licensing of dietitian
Kentucky (1994)* - licensing of dietitian and certification of nutritionist
Louisiana (1987)* - licensing of dietitian/nutritionist
Maine (1994)* - licensing of dietitian and dietetic technician
Maryland (1994)* - licensing of dietitian and nutritionist
Massachusetts (1999) - licensing of dietitian and nutritionist
Minnesota (1994) - licensing of dietitian and nutritionist
Mississippi (1994)* - licensing of dietitian and nutritionist title protection
Missouri (1998)* - certification of dietitian
Montana (1987)* - licensing of nutritionist and dietitian title protection
Nebraska (1995)* - licensing of medical nutrition therapists
Nevada (1995)* - certification of dietitian
New Hampshire (2000) - licensing of dietitian
New Mexico (1997) - licensing of dietitian, nutritionist and nutrition associates
New York (1991) - certification of dietitian and nutritionist
North Carolina (1991) - licensing of dietitian and nutritionist
North Dakota (1989)* - licensing of dietitian and certification of nutritionist
Ohio (1986) - licensing of dietitian
Oklahoma (1984) - licensing of dietitian
Oregon (1989) - certification of dietitian
Pennsylvania (2002) - licensing of dietitian-nutritionist
Puerto Rico (1974)* - licensing of dietitian and nutritionist
Rhode Island (1991)* - licensing of dietitian and nutritionist
South Dakota (1996) - licensing of dietitian and nutritionist
Tennessee (1987) - licensing of dietitian/nutritionist
Texas (1993)* - licensing of dietitian
Utah (1993) - certification of dietitian
Vermont (1993) - certification of dietitian
Virginia (1995)* - certification of dietitian and nutritionist
Washington (1988) - certification of dietitian and nutritionist
West Virginia (2000) - licensing of dietitian
Wisconsin (1994) - certification of dietitian
*Indicates year amended or reauthorized under sunset provisions

* (Taken from the Academy of Nutrition and Dietetics website)
http://www.eatright.org/HealthProfessionals

State licensure agency contact list also available at the above website.
**HIPPA**

During your various rotations it is imperative that you keep all information confidential. This information includes but is not limited to medical information about patients, patients which are in various facilities, billing information, costs from vendors, free and reduced lunch students, students attending various schools, contact information for clients, and computer access codes and passwords at rotations.

When preparing your competencies, please remember to remove the patient name and/or number for submission in your portfolio. You portfolio is a public document.

You may be asked to sign an agreement at assigned rotations concerning your HIPPA compliance.

**CPR**

Interns will be responsible for obtaining a current CPR certification prior to beginning the internship. The fee will be incurred by the intern. First aid certification is not required.

The following topics will be addressed during orientation prior to the rotation schedule. Additional topics may be added at the discretion of the director.

1. HIPPA
2. Sexual Harassment
3. Blood Borne Pathogens
4. Infection Control
5. Handling Hazardous Materials
6. Fire Safety
7. Safe lifting
EMERGENCY CONTACT INFORMATION

The Director of the Dietetic Internship Program is always available to assist the intern during the course of the internship. Questions, suggestions or concerns should be addressed as soon as they occur. Please do not hesitate to contact me at any time of the day or week.

Cathy Ferraro, MS, RD, LDN
Lecturer and Director of Dietetic Internship
University of Maryland Eastern Shore
2101 Richard A. Henson Center
Princess Anne, Maryland 21853
Work # 410-621-3080
Cell # 443-880-7958
Fax # 410-621-3550
Preferred email: caferraro@umes.edu
momworkout@yahoo.com

In an emergency, if you are unable to contact the director please contact:

Malinda Cecil, MS, RD, LDN
DPD Director
University of Maryland Eastern Shore
2101 Richard A. Henson Center
Princess Anne, Maryland 21853
Work # 410-651-7578
Cell # 443-783-3642
mdceceil@umes.edu

This handbook is subject to changes and corrections without prior notice. Interns will be notified of changes when they are implemented.

Updated 6/2013
PREAMBLE
The American Dietetic Association (ADA) and its credentialing agency, the Commission on Dietetic Registration (CDR), believe it is in the best interest of the profession and the public it serves to have a Code of Ethics in place that provides guidance to dietetics practitioners in their professional practice and conduct. Dietetics practitioners have voluntarily adopted this Code of Ethics to reflect the values and ethical principles guiding the dietetics profession and to set forth commitments and obligations of the dietetics practitioner to the public, clients, the profession, colleagues, and other professionals. The current Code of Ethics was approved on June 2, 2009, by the ADA Board of Directors, House of Delegates, and the Commission on Dietetic Registration.

APPLICATION
The Code of Ethics applies to the following practitioners:

(a) In its entirety to members of ADA who are Registered Dietitians (RDs) or Dietetic Technicians, Registered (DTRs);
(b) Except for sections dealing solely with the credential, to all members of ADA who are not RDs or DTRs; and
(c) Except for aspects dealing solely with membership, to all RDs and DTRs who are not members of ADA.

All individuals to whom the Code applies are referred to as “dietetics practitioners,” and all such individuals who are RDs and DTRs shall be known as “credentialed practitioners.” By accepting membership in ADA and/or accepting and maintaining CDR credentials, all members of ADA and credentialed dietetics practitioners agree to abide by the Code.

PRINCIPLES
Fundamental Principles
1. The dietetics practitioner conducts himself/herself with honesty, integrity, and fairness.
2. The dietetics practitioner supports and promotes high standards of professional practice. The dietetics practitioner accepts the obligation to protect clients, the public, and the profession by upholding the Code of Ethics for the Profession of Dietetics and by reporting perceived violations of the Code through the processes established by ADA and its credentialing agency, CDR.

Responsibilities to the Public
3. The dietetics practitioner considers the health, safety, and welfare of the public at all times. The dietetics practitioner will report inappropriate behavior or treatment of a client by another dietetics practitioner or other professionals.
4. The dietetics practitioner complies with all laws and regulations applicable or related to the profession or to the practitioner’s ethical obligations as described in this Code.
   a. The dietetics practitioner must not be convicted of a crime under the laws of the United States, whether a felony or a misdemeanor, an essential element of which is dishonesty.
   b. The dietetics practitioner must not be disciplined by a state for conduct that would violate one or more of these principles.
   c. The dietetics practitioner must not commit an act of misfeasance or malfeasance that is directly related to the practice of the profession as determined by a court of competent jurisdiction, a licensing board, or an agency of a governmental body.
5. The dietetics practitioner provides professional services with objectivity and with respect for the unique needs and values of individuals.
   a. The dietetics practitioner does not, in professional practice, discriminate against others on the basis of race, ethnicity, creed, religion, disability, gender, age, gender identity, sexual orientation, national origin, economic status, or any other legally protected category.
   b. The dietetics practitioner provides services in a manner that is sensitive to cultural differences.
   c. The dietetics practitioner does not engage in sexual harassment in connection with professional practice.
6. The dietetics practitioner does not engage in false or misleading practices or communications.
   a. The dietetics practitioner does not engage in false or deceptive advertising of his or her services.
   b. The dietetics practitioner promotes or endorses specific goods or products only in a manner that is not false and misleading.
   c. The dietetics practitioner provides accurate and truthful information in communicating with the public.
The dietetics practitioner withdraws from professional practice when unable to fulfill his or her professional duties and responsibilities to clients and others.

a. The dietetics practitioner withdraws from practice when he/she has engaged in abuse of a substance such that it could affect his or her practice.
b. The dietetics practitioner ceases practice when he or she has been adjudged by a court to be mentally incompetent.
c. The dietetics practitioner will not engage in practice when he or she has a condition that substantially impairs his or her ability to provide effective service to others.

The dietetics practitioner treats clients and patients with respect and consideration.

a. The dietetics practitioner provides sufficient information to enable clients and others to make their own informed decisions.
b. The dietetics practitioner respects the client’s right to make decisions regarding the recommended plan of care, including consent, modification, or refusal.

c. **Responsibilities to the Profession**

The dietetics practitioner practices dietetics based on evidence-based principles and current information.

The dietetics practitioner presents reliable and substantiated information and interprets controversial information without personal bias, recognizing that legitimate differences of opinion exist.

The dietetics practitioner assumes a life-long responsibility and accountability for personal competence in practice, consistent with accepted professional standards, continually striving to increase professional knowledge and skills and to apply them in practice.

The dietetics practitioner is alert to the occurrence of a real or potential conflict of interest and takes appropriate action whenever a conflict arises.

The dietetics practitioner permits the use of his or her name for the purpose of certifying that dietetics services have been rendered only if he or she has provided or supervised the provision of those services.

The dietetics practitioner accurately presents professional qualifications and credentials.

a. The dietetics practitioner, in seeking, maintaining, and using credentials provided by CDR, provides accurate information and complies with all requirements imposed by CDR. The dietetics practitioner uses CDR-awarded credentials (“RD” or “Registered Dietitian”; “DTR” or “Dietetic Technician, Registered”; “CS” or “Certified Specialist”; and “FADA” or “Fellow of the American Dietetic Association”) only when the credential is current and authorized by CDR.
b. The dietetics practitioner does not aid any other person in violating any CDR requirements, or in representing himself or herself as CDR-credentialed when he or she is not.

d. The dietetics practitioner does not invite, accept, or offer gifts, monetary incentives, or other considerations that affect or reasonably give an appearance of affecting his/her professional judgment.

**Clarification of Principle:**

a. Whether a gift, incentive, or other item of consideration shall be viewed to affect, or give the appearance of affecting a dietetics practitioner’s professional judgment is dependent on all factors relating to the transaction, including the amount or value of the consideration, the likelihood
that the practitioner's judgment will or is intended to be affected, the position held by the practitioner, and whether the consideration is offered or generally available to persons other than the practitioner.
b. It shall not be a violation of this principle for a dietetics
practitioner to accept compensation as a consultant or employee or as part of a research grant or corporate sponsorship program, provided the relationship is openly disclosed and the practitioner acts with integrity in performing the services or responsibilities.

c. This principle shall not preclude a dietetics practitioner from accepting gifts of nominal value, attendance at educational programs, meals in connection with educational exchanges of information, free samples of products, or similar items, as long as such items are not offered in exchange for or with the expectation of, and do not result in, conduct or services that are contrary to the practitioner’s professional judgment.

d. The test for appearance of impropriety is whether the conduct would create in reasonable minds a perception that the dietetics practitioner’s ability to carry out professional responsibilities with integrity, impartiality, and competence is impaired.

Responsibilities to Colleagues and Other Professionals

19. The dietetics practitioner demonstrates respect for the values, rights, knowledge, and skills of colleagues and other professionals.

a. The dietetics practitioner does not engage in dishonest, misleading, or inappropriate business practices that demonstrate a disregard for the rights or interests of others.

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

PROCESS FOR CONSIDERATION OF ETHICS ISSUES

In accordance with ADA’s Code of Ethics, a process has been established for consideration of ethics issues. This process defines the procedure for re-view of and response to ethics complaints, including hearings, disciplinary action, and appeals. The process was approved on June 2, 2009, by the ADA Board of Directors, the House of Delegates, and the Commission on Dietetic Registration.

Committee

A three (3)-person committee, comprised of members of ADA and/or CDR-credentialed practitioners, will be appointed to handle all ethics matters. One person will be appointed each year by the president-elect of ADA, the chairperson of CDR, or the speaker-elect of the House of Delegates (based on the expired term). Terms of office will be for three (3) years. Terms will be staggered to allow for continuity. The chairship will rotate among the three (3) committee members. The chairship will be awarded to the person moving into the third year of the three (3)-year term of office.

The Committee will have authority to consult with subject experts as necessary to conduct its business. The Committee may perform such other educational activities as might be necessary to assist members and credentialed practitioners to understand the Code of Ethics.

Ethics Opinions

The Committee may issue opinions on ethics issues under the Code of Ethics on its own initiative or in response to a member’s or credentialed practitioner’s request. These opinions will be available to members and credentialed practitioners to guide their conduct, and will also be available to the public. Situations may be factual or hypothetical, but no names will be disclosed.

Ethics Cases

Preamble. The enforcement procedures are intended to permit a fair resolution of disputes on ethical practices in a manner that protects the rights of individuals while promoting understanding and ethical practice. The Ethics Committee has the authority and flexibility to determine the best way to resolve a dispute, including educational means where appropriate.
1. **Complaint**

A complaint that a member or credentialed practitioner has allegedly violated the Code of Ethics for the Profession of Dietetics must be submitted in writing on the appropriate form to the Ethics Committee.

The complaint must be made within one (1) year of the date that the complainant (person making complaint) first became aware of the alleged violation or within one (1) year from the issuance of a final decision in an administrative, licensure board, or judicial action involving the facts asserted in the complaint.

The complainant need not be a member of ADA nor a practitioner credentialed by CDR.

The complaint must contain details on the activities complained of; the basis for complainant’s knowledge of these activities; names, addresses, and telephone numbers of all persons involved or who might have knowledge of the activities; and whether the complaint has been submitted to a court, an administrative body, or a state licensure board. The complaint must also cite the section(s) of the Code of Ethics for the Profession of Dietetics allegedly violated.

The complaint must be signed and sworn to by the complainant(s).

2. **Preliminary Review of Complaint**

The chair of the Ethics Committee, legal counsel for ADA, and appropriate staff will review the complaint to determine whether all the required information has been submitted by the complainant and whether an ethics question is involved.

If a complaint is made regarding an alleged violation of the Code of Ethics for the Profession of Dietetics and a similar complaint is already under consideration regarding the same individual by a state licensure board of examiners, an administrative body, or a court of law, the Ethics Committee will not process the complaint until a final decision has been issued.

3. **Response**

If the preliminary review determines that the process should proceed, the ADA staff or chair of...
the Ethics Committee will notify the respondent (person against whom the complaint is made) that a complaint has been made. The notice will be sent from the staff via certified mail, return-receipt requested. The respondent will be sent a copy of the complaint, the Code of Ethics for the Profession of Dietetics, the Review Process, and the Response to Complaint form.

The respondent will have thirty (30) days from receipt of the notification in which to submit a response. The response must be signed and sworn to by the respondent(s).

If the Ethics Committee does not receive a response, the chair of the Ethics Committee or his or her designee will contact the respondent by telephone. If contact with the respondent is still not made, a written notice will be sent. Failure to reach the respondent will not prevent the Committee from proceeding with the investigation.

The response submitted to the Ethics Committee by the respondent, may, upon request by the complainant, be provided to the complainant following the decision of the Committee.

4. Ethics Committee Review

The chair of the Ethics Committee will add the complaint and response to the Committee’s agenda, after consultation with legal counsel and appropriate staff. The complaint and the response will be reviewed by the Ethics Committee.

The Committee has broad discretion to determine how to proceed, including, but not limited to, dismissing the complaint, requesting further information from the parties, resolving the case through educational activities, holding a hearing as specified hereafter, or in any other way deemed advisable. The Committee may use experts to assist it in reviewing the complaint and response and determining further action.

At the appropriate time, the Ethics Committee will notify the complainant and the respondent of its decision, which may include the Committee’s preliminary opinion with a request that the respondent take certain actions, including, but not limited to, successful completion of continuing professional education in designated areas, or supervised practice based on the terms to be set forth by the Committee.

The Ethics Committee may also recommend appropriate remedial action to the parties, which if undertaken, would resolve the matter.

The Ethics Committee may recommend, in its discretion, that a hearing be held subject to the other provisions of these procedures.

5. Licensure Board Action or Final Judicial or Administrative Action

When the Ethics Committee is informed by a state licensure body that a person subject to the Code of Ethics for the Profession of Dietetics has had his or her license suspended or revoked for reasons covered by the Code, the Committee may take appropriate disciplinary action without a formal hearing.

When a person has been finally adjudged or has admitted to committing a misdemeanor or felony as specified in Principle 4 of the Code, the Committee may take appropriate disciplinary action without a formal hearing.

6. Hearings

A. General

Hearings shall be held as determined by the Ethics Committee under the following guidelines.

Hearing dates will be established by the chairman of the Ethics Committee. All hearings will be held in Chicago, IL.

The Ethics Committee will notify the respondent and the complainant by certified mail, return-receipt requested, of the date, time, and place of the hearing.

The respondent may request a copy of the file on the case and will be allowed at least one postponement, provided the request for postponement is received by ADA at least fourteen (14) days before the hearing date.

B. Conduct of Hearings

The chair of the Ethics Committee will conduct a hearing with appropriate staff and legal counsel present. Individuals who have no conflict of interest will be appointed.

In the event that any Ethics Committee member cannot serve on the hearing panel for any reason, a replacement will be appointed by the representative of the original body that made the appointment, either the ADA president, the CDR chairperson, or the speaker of the House of Delegates as appropriate.

The parties shall have the right to appear, to present witnesses and evidence, to cross-examine the opposing party and adverse witnesses, and to have legal counsel present. Legal counsel for the parties may advise their clients, but may only participate in the hearings with the permission of the chair.

The hearing is the sole opportunity for the participants to present their positions.

Three members of the Ethics Committee shall constitute a quorum. Affirmative vote of two thirds (2/3) of the members voting will be required to reach a decision.

A transcript will be prepared and will be available to the parties at cost.

C. Costs

ADA will bear the costs for the Ethics Committee, legal counsel, staff, and any other parties called by ADA. ADA will bear the travel costs and one (1) night’s hotel expenses for the complainant and respondent and one person that each chooses to bring, provided that such person is necessary to the conduct of the
hearing as determined by the chair of the Ethics Committee. The Ethics Committee shall issue regulations to govern the payment of these expenses, which shall be incorporated and made part of these procedures.

The respondent and the complainant will be responsible for all costs and fees incurred in their preparation for and attendance at the hearing.
ing, except expenses for travel and hotel as stated above.

D. Decision

The Ethics Committee will render a written decision specifying the reasons therefore and citing the provision(s) of the Code of Ethics for the Profession of Dietetics that may have been violated. The Committee will decide that:

1) the respondent is acquitted;
2) educational opportunities are pursued;
3) the respondent is censured, placed on probation, suspended, or expelled from ADA; and/or
4) the credential of the respondent is suspended or revoked by the CDR of the ADA.

The decision of the Ethics Committee will be sent to the respondent and the complainant as soon as practicable after the hearing.

7. Request by Complainant for Review of Respondent’s Response

The Ethics Committee will, except where the response contains information that the Committee determines for good reasons should not be shared, grant the request of a complainant to review the response received from the respondent in an ethics case, provided the request is made within thirty (30) days of notification of the final action of the Ethics Committee. The complainant will be required to maintain confidentiality of the documentation and to refrain from sharing it with any other third parties or individuals. The complainant will have twenty (20) days to advise the Ethics Committee as to any comments, concerns, or issues with regard to the respondent’s response, but the Committee shall have no obligation to take further action. The respondent will be notified of the Committee’s action to release the response to the complainant.

A. The materials describing the ethics complaint process, including those materials provided to the complainants and respondents, shall be amended to disclose the fact that a respondent’s response may be made available to the complainant.

B. Any request to review the respondent’s response must be submitted in writing (electronic or mail) no later than thirty (30) days after final action by the Committee.

C. ADA staff will notify the Ethics Committee of the request and will provide a timeline for addressing it.

D. Within five (5) business days of the request being received, the Committee will advise the respondent that the complainant has made the request and is being given access to the response. The requested documentation will be sent to the complainant via express mail to ensure delivery.

E. The complainant will be required to commit in writing to maintain the confidentiality of the documentation by signing a statement to this effect.

F. Any comments, concerns, or issues with the respondent’s response must be communicated to ADA staff within twenty (20) days in writing (electronic or mail). ADA staff will add the complainant’s comments, concerns, or issues to the agenda of the next Ethics Committee conference call or meeting. The Committee will determine whether further action is necessary and shall communicate its determination to the complainant.

G. The complainant will return the documents after review via UPS at the expense of ADA within twenty-five (25) days.

8. Definitions of Disciplinary Action

Censure: A written reprimand expressing disapproval of conduct. It carries no loss of membership or registration status, but may result in removal from office at the national, state, and district levels and from committee membership.

Time frame: Not applicable to the disciplinary action.

Probation: A directive to allow for correction of behavior specified in Principle 7 of the Code of Ethics for the Profession of Dietetics. It may include mandatory participation in remedial programs (e.g., education, professional counseling, and peer assistance). Failure to successfully complete these programs may result in other disciplinary action being taken. It carries no loss of membership or registration status, but may result in removal from office at the national, state, and district levels and from committee membership.

Time frame: Specified time to be decided on a case-by-case basis.

Suspension: Temporary loss of membership and all membership benefits and privileges for a specified period with the exception of retention of coverage under health and disability insurance. ADA group malpractice insurance will not be available and will not be renewed during the suspension period.

Time frame: Specified time to be decided on a case-by-case basis.

Suspension of Registration: Temporary loss of credential and all benefits and privileges for a specified period. It may include mandatory participation in remedial programs (e.g., education, professional counseling, and peer assistance).

At the end of the specified suspension period, membership and registration benefits and privileges are automatically restored.

Time frame: Specified time to be decided on a case-by-case basis.

Expulsion: Removal from membership and a loss of all benefits and privileges.

Time frame: May apply for reinstatement after a five (5)-year period has elapsed or sooner if the basis for the expulsion has been removed, with payment of a reinstatement fee. The individual must meet membership require-
ments in effect at the time of the application for reinstatement.

Revocation of Credential: Loss of registration status and removal from registry; loss of all benefits and privileges. Upon revocation, the former credentialed practitioner shall return the registration identification card to CDR.

Time frame: Specified time for reapplication to be decided on a case-by-case basis, but, at minimum, current recertification re-
quirements would need to be met. A credential will not be issued until CDR determines that the reasons for revocation have been removed.

9. Appeals
A. General
Only the respondent may appeal an adverse decision to ADA. During the appeals process, the membership and registration status of the respondent remains unchanged.

The ADA president, the chairperson of CDR, and the speaker of the House of Delegates shall each appoint one person to hear the appeal. These individuals shall constitute the Appeals Committee for that particular case. Individuals who have no conflict of interest will be appointed.

B. Recourse to the Appeals Committee
To request a hearing before the Appeals Committee, the respondent/appellant shall notify the appropriate staff at ADA headquarters, by certified mail, return-receipt requested, that the respondent wishes to appeal the decision. This notification must be received within thirty (30) calendar days after receipt of the letter advising the respondent/appellant of the Ethics Committee’s decision.

C. Contents
The appeal must be in writing and contain, at a minimum, the following information:
1. The decision being appealed.
2. The date of the decision.
3. Why the individual feels the decision is wrong or was improperly rendered (See E, “Scope of Review”).
4. The redress sought by the individual.
5. The appeal will be signed and sworn to.

If the appeal does not contain the information listed above, it will be returned to the individual who will be given ten (10) calendar days to resubmit. Failure to furnish the required information within ten (10) calendar days will result in the appeal being waived.

D. Procedures
Upon receipt of this notification, appropriate staff shall promptly notify the chair of the Appeals Committee that the respondent/appellant is appealing a decision made by the Ethics Committee.

The Appeals Committee chair shall acknowledge the appeal and request a copy of the relevant written information on the case from appropriate staff.

1. Location and participants
   a. All appeals hearings will be held in Chicago, IL.
   b. The complainant/appellee, the respondent/appellant, and the chair of the Ethics Committee will have the opportunity to participate in the appeals hearing.
   c. The parties may have legal counsel present, who may advise their clients, but may only participate in the hearings with the permission of the chair.
   d. Attendance at the hearing will be limited to persons determined by the chair to have a direct connection with the appeal and appropriate staff and legal counsel.

2. Conduct of the hearing
   The three (3) parties involved in the appeal will be given the opportunity to state why the decision and/or disciplinary action of the Ethics Committee should be upheld, modified, or reversed.

E. Scope of Review
   The Appeals Committee will only determine whether the Ethics Committee committed procedural error that affected its decision, whether the Ethics Committee’s decision was contrary to the weight of the evidence presented to it, or whether there is new and substantial evidence that would likely have affected the Ethics Committee’s decision that was unavailable to the parties at the time of the Ethics Committee’s hearing for reasons beyond their control.

   In reviewing the decision of the Ethics Committee, the Appeals Committee shall consider only the transcript of the hearing and the evidence presented to the Ethics Committee.

F. Record of Hearing
   A transcript will be prepared and will be maintained in the case file.

G. Decision of Appeals Committee
   1. The Appeals Committee shall prepare a written decision stating the reasons therefore. The decision shall be to affirm, modify, or reject the decision and/or disciplinary action of the Ethics Committee or to remand the case to the Ethics Committee with instructions for further proceedings.

   2. Decisions of the Appeals Committee will be final.

H. Costs
   ADA will bear the costs for the Appeals Committee, staff, and legal counsel, and any parties called by ADA. ADA will bear the travel and one night’s hotel expenses for the respondent/appellant, the complainant/appellee, and the chair of the Ethics Committee. The Ethics Committee shall issue regulations to govern the payment of these expenses, which shall be incorporated and made part of this procedure.

   The respondent/appellant and the complainant/appellee will be responsible for all costs and fees incurred in their preparation for and attendance at the hearing, except expenses for travel and hotel as stated above.

10. Notification of Adverse Action
If the respondent is disciplined by the Ethics Committee and does not appeal the decision, the chair of the Ethics Committee will notify the appropriate ADA organizational units, CDR, the affiliate dietetic association, appropriate licensure boards, and governmental and private bodies within thirty (30) days after notification of the final decision.

In the event the respondent ap-
peals a decision to discipline him or her and the Ethics Committee decision is affirmed or modified, similar notification will be made by the chair of the Ethics Committee.

In response to an inquiry about registration status, the Office on Dietetic Credentialing will state only whether a person is currently registered.

11. Record Keeping

A. Records will be kept for a period of time after the disposition of the case in accordance with ADA’s record retention policy.

B. Information will be provided only upon written request and affirmative response from ADA’s legal counsel.

12. Confidentiality Procedures

The following procedures have been developed to protect the confidentiality of both the complainant and the respondent in the investigation of a complaint of an alleged violation of the Code of Ethics for the Profession of Dietetics:

A. The need for confidentiality will be stressed in initial communications with all parties.

B. Committee members will refrain from discussing the complaint and hearing outside of official committee business pertaining to the complaint and hearing.

C. If the hearing on a complaint carries over to the next Committee, the complaint will be heard by the original Committee to hear the complaint.

D. Communication with ADA witnesses will be the responsibility of the Committee chair or staff liaison.

E. Witnesses who testify on behalf of ADA will be informed of the confidentiality requirements and agree to abide by them.

F. The Committee chair will stress the importance of confidentiality at the time of the hearing.

G. To ensure confidentiality, the only record of the hearing will be the official transcript and accompanying materials, which will be kept at ADA offices. All other materials that were mailed or distributed to committee members should be returned to ADA staff, along with any notes taken by Committee members.

H. The transcript will be available if there is an appeal of the Ethics Committee’s decision and only to the parties, Ethics Committee members, Appeals Committee members, ADA legal counsel, and staff directly involved with the appeal.

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Permission has been granted for reproduction of the above article taken from the Journal of American Dietetic Association from the Academy of Nutrition and Dietetics for educational purposes. Please refer to the eatright.org website.

Recognition is given to the members of the Code of Ethics Task Force for their contributions: Marianne Smith Edge, MS, RD, LD, FADA, Chair; Alice Beth J. Fornari, EdD, RD; Cheryl A Bittle, PhD, RD, LD; Doris Derelian, PhD, JD, RD, FADA; Jana Kicklighter, PhD, RD, LD; Leonard Pringle, DTR; Harold Holler, RD, LDN, ADA Staff; Chris Reidy, RD, CDR Staff; J. Craig Busey, JD, former ADA Legal Counsel.
UNIVERSITY OF MARYLAND EASTERN SHORE
DIETETIC INTERNSHIP

Intern: ____________________________________________________________

<table>
<thead>
<tr>
<th>Goal</th>
<th>Rotation</th>
<th>Completion Date</th>
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6/2012
INITIAL/MID TERM EVALUATION

<table>
<thead>
<tr>
<th>Dietetic Intern ____________________________</th>
<th>Rotation ______________________________</th>
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<tbody>
<tr>
<td>Preceptor _________________________________</td>
<td>Dates of Rotation ______________________</td>
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**PART 1**
On the first day of the rotation, review the competencies and activities for the rotation. Discuss with preceptor expectations for the rotation.

### Expectations for Rotation (May use back of form for additional space)

**Goals:**

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

How will the competencies be submitted for review to the preceptor?

- Snow day policy reviewed: ____________________________
- Cell phone and communications device policy reviewed: ____________
- Date for mid-term: ____________________________
- Date for final evaluation: ____________________________
- Orientation to facility: ____________________________
- Contact person if preceptor is unavailable: ____________
### EXPLAINATION FOR LEAVE OF ABSENCE FROM ROTATION*

<table>
<thead>
<tr>
<th>DATE</th>
<th>LENGTH OF TIME</th>
<th>REASON</th>
<th>PRECEPTOR SIGNATURE</th>
<th>MAKE UP DATE</th>
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*ATTACH PAPERWORK

### PART 2

At the **mid point** of the rotation, please evaluate the intern on each skill, behavior, or knowledge prior to the site visit by the internship director. **For a rating of 1, please comment below.**

<table>
<thead>
<tr>
<th>RATING SCALE</th>
<th>1 = Improvement Required</th>
<th>2 = Satisfactory</th>
<th>3- Exceeds Expectations</th>
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#### PROFESSIONALISM

<table>
<thead>
<tr>
<th>PROFESSIONALISM</th>
<th>1</th>
<th>2</th>
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<tbody>
<tr>
<td>Displays professional appearance and behavior</td>
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<td>Maintains confidentiality of information</td>
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<td>Sets and enforces high standards of professional ethics</td>
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<tr>
<td>Fosters teamwork and interacts well with staff and interns</td>
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<td>Reports to work on time and does not leave until designated time</td>
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<tr>
<td>Takes initiative to do more than what is expected</td>
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<tr>
<td>Accepts responsibility for his/her actions</td>
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#### PERSONAL MANAGEMENT SKILLS

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<th>PERSONAL MANAGEMENT SKILLS</th>
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<tbody>
<tr>
<td>Appropriately prioritizes work assignments and tasks</td>
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<td>Comes prepared daily for rotation</td>
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<tr>
<td>Follows directions</td>
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<tr>
<td>Demonstrates initiative</td>
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#### COMMUNICATION SKILLS

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<th>COMMUNICATION SKILLS</th>
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<tr>
<td>Writes effectively (clear, organized, appropriate grammar and spelling)</td>
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<tr>
<td>Voices understanding of the preceptors expectations</td>
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<tr>
<td>Speaks in a clear professional manner to convey accurate information</td>
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<tr>
<td>Responds appropriately to nonverbal cues</td>
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#### KNOWLEDGE BASE

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<th>KNOWLEDGE BASE</th>
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<th>3</th>
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<tbody>
<tr>
<td>Demonstrates capacity to acquire knowledge and grasp concepts</td>
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<tr>
<td>Demonstrates appropriate knowledge and expertise in assigned tasks</td>
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<tr>
<td>Asks questions for clarification of issues</td>
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</table>
COMMENTS

AREAS OF STRENGTH:

AREAS NEEDING FURTHER DEVELOPMENT:

Preceptor___________________________ Date__________  Intern___________________________ Date__________

Internship Director_____________________________ Date__________

Rev.6/12
CLINICAL ROTATION COMPONENTS

I. ORIENTATION TO UNIT:
   ______ Review Self-Evaluation
   ______ Discuss expectations and assignments

Ratings:
1 = NEEDS IMPROVEMENT (Needs basic concepts repeated, repeatedly demonstrates a poor level of retention and comprehension)
2 = FAIR, NECESSITATING IMPROVEMENT (Requires ongoing supervision and guidance to complete tasks)
3 = MEETS STANDARD (Completes assignments with minimal supervision, proficient quality of work, competent in knowledge necessary to perform required tasks, able to utilize resources to meet requirements outlined by the rotation)
4 = EXCEEDS STANDARD (Exceptional quality of tasks completed, tasks completed with total independence, intellectual and inquisitive, gathers information above expectations and is able to utilize in a conceptual manner)
N/A = not applicable

COMPETENCY TASK/Criteria RATING COMMENTS

II. NUTRITIONAL ASSESSMENT

A. Obtain all pertinent data from clinical record, client, health care team and family.
   1. Clinical record review
   2. Interview client (diet hx).
   3. Consult with the health care team. (via conferences, informal, etc.)

B. Analyze and interpret all pertinent information.
   1. Discuss data collected.
   2. Make sound clinical judgments about significance.

C. Assess nutritional status.
   1. Identify nutritional dx/problems.
   2. Determine needs of the client.
   3. Calculations are accurate.

D. Describe implications of disease.
   1. Is knowledgeable and able to apply sound medical nutrition therapy.
   2. Discuss disease (Pt. Care Studies).
<table>
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<tr>
<th>COMPETENCY</th>
<th>TASK/CRITERIA</th>
<th>RATING</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td>III. NUTRITIONAL CARE PLANNING</td>
<td>A. Determine appropriate clinical outcomes objectives)</td>
<td>1. Discuss objectives of care.</td>
<td></td>
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</tbody>
</table>
| | B. Develop appropriate medical nutrition therapy and tx intervention. | 1. Discuss treatment plans and recommendations.  
2. Implement treatment plans.  
3. Utilize and apply appropriate Standard of Care.  
4. EN, TPN, complex pts, transitional feeding. | | |
<p>| | C. Evaluate client progress. | 1. Client progress is effectively monitored. | | |</p>
<table>
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<tr>
<th>COMPETENCY</th>
<th>TASK/CRITERIA</th>
<th>RATING</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td><strong>IV. COMMUNICATION</strong></td>
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<tr>
<td>A. Clinical record documentation is completed.</td>
<td>1. Form is completed accurately and thoroughly. 2. Notes are written with clarity and use appropriate terminology.</td>
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<tr>
<td>B. Nutritional care recommendations are communicated.</td>
<td>1. Care plans and recommendations are developed in collaboration with tx team. 2. Develop meal plans. 3. Dietary staff are instructed about meal patterns, nourishments, etc. 4. Referrals for D/C planning appropriate</td>
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<td>C. Attends conferences and meetings to discuss clients.</td>
<td>1. Participates in conferences. 2. Interacts and provides input.</td>
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<td>D. Interview and counsel clients.</td>
<td>1. Provide diet instruction. 2. Provide counseling. 3. Provide food-drug and discharge counseling. 4. Assess and chart pt understanding and readiness to change.</td>
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<td>E. Provide nutrition education.</td>
<td>1. Present nutrition classes 2. Provide in-service training to staff.</td>
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<td>F. Interacts/collaborates/works cooperatively with others.</td>
<td>1. Participates in meetings within and outside the department. 2. Is effective in relating to others, clients, and staff.</td>
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<tr>
<td>COMPETENCY</td>
<td>TASK/CRITERIA</td>
<td>RATING</td>
<td>COMMENTS</td>
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<td><strong>V. OTHERS</strong></td>
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<tr>
<td>A. Computer skills</td>
<td>1. Is competent in the use of computer.</td>
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</table>
| B. Work Capacity | 1. Plans and Prioritizes Work appropriately  
2. Workload documented per facility policy  
3. Workload ( # of assessments per day appropriate to time spent). | | |
| B. Research | 1. Is able to utilize and apply evidence based practice and research.  
2. Is able to critically evaluate and interpret scientific literature. | | |
| C. Professional practice activities | 1. Participates in committees.  
| **VI. STANDARDS OF PROFESSIONAL RESPONSIBILITY AND PRACTICE** | | | |
| A. Professional Practice | 1. Completes work in a timely and professional manner.  
2. Is responsible, reliable.  
4. Preserves confidentiality of all patients. | | |
| **VII. INITIATES SELF-DIRECTED LEARNING** | | | |
| A. Self-directed learning | 1. Seeks out resources, obtains knowledge independently.  
2. Makes and takes opportunities to learn. | | |
SICK LEAVE/PERSONAL LEAVE DOCUMENTATION FORM

Application for excused absences for sick leave requires that this form be completed to include all signatures 2 weeks prior to your requested sick day (e.g., doctor’s appointment) or the next business day for reporting of time missed because of a sick leave related event. If you are in a rotation, you should have the form signed by your preceptor and the internship director. A copy of the completed form should be provided to the internship director.

Anything beyond the 3 personal days allowed in this internship must be made up to insure that you have met the required number of hours for this internship.

(1) Name: ___________________________ Date Form Completed: ________________

Date: ______________________________

(2) Period of Leave and Total Hours = ________________________________

 o Leave START Date and Time for which you are requesting or reporting sick/personal leave:

______________________________________________________________

 o Leave END Date and Time for which you are requesting or reporting sick/personal leave:

______________________________________________________________

(3) Please describe what obligations or responsibilities that will be (or were) missed during the requested/reported sick/personal leave period:

______________________________________________________________

If applicable, describe how these obligations or responsibilities will be met or covered:

______________________________________________________________

(4) For cases of unanticipated/emergency sick leave, please describe the timing and mechanism by which you notified any parties affected by your absence:

______________________________________________________________

(5) Intern Signature: ___________________________

______________________________________________________________

Use reverse side of this sheet for notes or conditions related to excusal for sick leave request/report (optional)

Signatures should be obtained in this order:

□ Excused □ Not Excused

______________________________________________________________

Internship Director Signature/Date

□ Excused □ Not Excused

______________________________________________________________

Preceptor Signature/Date
University of Maryland Eastern Shore
Dietetic Internship Program
Program Evaluations

Intern’s Name ________________________________ Date ________________
Facility _____________________________ Rotation ____________________________

1. To what extent did this rotation contribute to your professional development?
   A. Contributed greatly
   B. Contributed somewhat
   C. Contributed little

2. a. Which learning activities were most valuable to you?
   b. Why do you feel this valuable, and in what way did it contribute development (information, insight, experience, etc.)?

3. Which activities were least valuable (explain)?

4. Were there experiences which you feel were repetitious of those you had in other situations? Yes _____ No ______
   Comments:

5. Did you feel that the time provided for the rotation was adequate? Yes ___ No ___

6. Did the sequence of the activities allow for maximum development Yes ___ No ___
   What changes would you suggest?
7. Did the preceptor/faculty member make his/her expectations clear to you?  
   Yes _____  No ______  Explain:

8. Was the preceptor/faculty member supportive of your efforts to learn?  
   Yes _____  No _____  Explain:

9. Were you sufficiently prepared for the rotation?  Yes ______  No ________

10. Overall opinion and comments:
Please complete one form for each site, evaluating the major preceptor at that site. If you spent a substantial amount of time with more than one supervisor, complete a SEPARATE FORM for each.

Name of Preceptor: ___________________________ Facility: ___________________________
Date: ___________________________ Rotation: ___________________________

Using the scale below check the box that best reflects your assessment of this preceptor. If you have insufficient information to judge an item, circle 0 (not applicable). Provide comments to explain any ratings of 1 or 2.

0 = Not applicable/not appropriate for this site/insufficient information
1 = Unacceptable
2 = Needs improvement
3 = Good
4 = Excellent

For each of the following items, rate your supervisor’s performance.

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<tr>
<th>Quality</th>
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<th>1</th>
<th>2</th>
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<tr>
<td>1. Amount of time spent with intern.</td>
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<td>2. Effective use of time.</td>
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<td>3. Availability and willingness to answer questions.</td>
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<td>4. Communicated knowledge of appropriate professional information.</td>
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<td>5. Discussed his/her job and the basis for performance.</td>
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<td>6. Referred you to appropriate resources relevant to the rotation area.</td>
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<td>7. Helped you see your strengths and weaknesses more clearly.</td>
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<td>8. Encouraged you to function independently.</td>
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<td>9. Discussed administrative and organizational aspects of site.</td>
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<td>10. Reviewed objectives and performance expectations as necessary.</td>
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<td>11. Made assignments appropriate to objective.</td>
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<td>12. Modeled communication styles with other professionals.</td>
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<td>13. Modeled communication styles with clients.</td>
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<td>14. Modeled management skills.</td>
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<td>15. Modeled clinical skills.</td>
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<td>16. Modeled counseling skills.</td>
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<td>17. Assisted you with completing rotation objectives.</td>
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<td>18. OVERALL, the supervisor’s performance was:</td>
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Preceptor Evaluation (cont.)

Comments:
UNIVERSITY OF MARYLAND EASTERN SHORE
DIETETIC INTERNSHIP PROGRAM

I, ______________________________________ have read and understand the UMES Dietetic Internship Handbook and have been instructed on its contents. I agree to follow the established dietetic internship handbook, the ADA/Commission on Dietetic Registration Code of Ethics for the Profession of Dietetics and each individual facilities policies and procedure for the duration of the University of Maryland Eastern Shore Dietetic Internship.

____________________________________                               ______________________
Signature of Intern                                                                                           Date

____________________________________                               ______________________
Signature of Program Director                                                                         Date
University of Maryland Eastern Shore
Accident Form

Date of Report:  
Time:  
Date of Accident:

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<tr>
<th>Name:</th>
<th>Age:</th>
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<tr>
<td>Home Address:</td>
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<tr>
<td>Residence Address:</td>
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<tr>
<th>Home Phone:</th>
<th>Residence Phone:</th>
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</thead>
</table>

Place of Accident (On or Off Campus and location in facility. Explain):

Describe what occurred:

Injuries Sustained:

Witness Name:  
Witness Phone:  
Witness Address:

First Aid Provided:  Yes  No

First Aid Provided By Whom:

Referral To: (Health Services, Emergency Room, Physician):

Name of Person Completing Form:

Title of person Completing the form:

6/2013
Professional Activity Evaluation

Title of Program: ________________________________________________________________

Date of Program ___________ Program Sponsor _________________________________

Program Clock Hours ________________________________________________________

Include a copy of the agenda for the program. Evaluate each presenter using the following questions as a guide.

1. Educational Outcomes:

2. What program competencies were addressed in this program (list the competency number(s) as described in the course syllabus.

3. On a scale of 1 (low) to 10 (high), rate the quality of the presentation content and presenter. What do you think were the strengths and/or weaknesses? Do you have any ideas as to how it may have been improved?

8/2012
Rotation Descriptions

Peninsula Regional Medical Center

Address:
Peninsula Regional Medical Center  
100 E. Carroll Street  
Salisbury, MD 21801  
410-546-6400

Type of rotation: Food Service  
Preceptor: Michelle Leatherbury, CDM  michelle.leatherbury@peninsula.org  
410-543-7429

Type of rotation: Clinical  
Preceptor: Carol Giampietro, MS, RD, LDN, CNS  carol.giampietro@peninsula.org  
Grace Wilson, MS, RD, LDN  
410-546-6400 ext. 4646

Peninsula Regional Medical Center is an acute care facility offering a multitude of services including cardio-thoracic surgery, trauma, critical care, NICU, cancer therapy, rehabilitation as well as outpatient clinics for ALS, pulmonary rehab, cardiac rehab, wound center, endoscopy.

Peninsula Regional Medical Center Diabetes Education Program

Address:
Peninsula Regional Medical Center  
Avery Hall  
100 Carroll Street  
Salisbury, MD 21801  
410-543-7601

Type of Rotation: Community  
Preceptor: Susan Cottongim, RD, LDN, CDE  susan.cottongim@peninsula.org

The diabetes education program at PRMC provides outpatient and inpatient diabetes self-management, education programs for children, adults and women with gestational diabetes or preexisting diabetes during pregnancy. Outpatient Medical Nutrition Therapy is available for a variety of nutrition conditions such as diabetes, weight management, lipid management, hypertension, celiac disease, pediatric
nutrition. They also provide diabetes risk screening at health fairs and provide support groups, insulin pump club and kid and teen diabetes support group.

**Health South Chesapeake Rehabilitation Hospital**

**Address**

HealthSouth Chesapeake rehabilitation Center  
220 Tilghman Road  
Salisbury, MD 21804  
410-410-546-4600

**Type of rotation:** Clinical

**Preceptor:** Mike Kirtsos, MS, RD, LDN  
Michael.Kirtsos@healthsouth.com

HealthSouth is an acute rehabilitation hospital with a 2-3 week average length of stay. They treat a variety of diagnosis including CVA, multi trauma, spinal cord injury and TBI. There is an interdisciplinary team of professional including various rehabilitation services such as physical therapy, occupational therapy, and speech and language pathology. Outpatient services are available in addition to aqua therapy.

**Holly Center**

**Address**

926 Snow Hill Road  
Salisbury, MD 21804  
410-546-2181

**Type of Rotation:** Clinical

**Preceptor:** Shelly Cohen, RD, LDN  
smcohen@dhmh.state.md.us  
Stacey Kirchen, RD, LDN

The Holly Center is a specialized long term care facility for develop mentally disabled adults. A variety of services are provided including vocational, educational, medical, dental, physical therapy, occupational therapy, speech language, audiological, psychological, psychiatric, neurological, dietary, recreational activities, respiratory and 24-hour nursing. These services are tailored to the unique needs of each individual by a team of professionals representing many specialties.
Atlantic General Hospital

Address:
9733 Healthway Drive
Berlin, MD 21811
410-641-9773

Type of Rotation: Clinical

Preceptor: Theresa Murray, RD, LDN  tmurray@atlanticgeneral.org

Atlantic General Hospital is a 62 bed acute care community hospital. The intern will be providing direct patient care to a wide variety of patients including ICU, diabetes, cardiac, GI, cancer, pulmonary, etc. providing Medical Nutrition Therapy, education and counseling.

Deer’s Head Hospital Center

Address:
351 Deer’s Head Hospital Road
Salisbury, MD 21801
410-543-4063

Type of Rotation: Food Service

Preceptor: Hemali Mehta, RD, LDN  hmehta@dhmh.state.md.us

Deer’s Head Hospital Centre is a state of Maryland long term care and acute rehabilitation hospital. There is an inpatient and outpatient dialysis center and the only facility in Maryland offering negative pressure rooms for TB patients.
**MAC, Inc.**

**Address:**
909 Progress Circle, Suite 100  
Salisbury, MD 21804  
410-742-0505

**Type of Rotation:** Community

**Preceptor:** Karla Beardsley, RD, LDN  
Ksb2@macinc.org

Maintaining Active Citizens (MAC) an area agency on aging provides services for Dorchester, Somerset, Wicomico and Worcester Counties in Maryland. Programs include: Legal services, Ombudsman services (advocacy for nursing homes and assisted living residents and their families), Guardianship, Senior Health Insurance Program, Senior Community Services Employment Program, Wellness Center, In Home Services, Nutrition (meals on wheels and meals for adult senior centers), Day care Program and Volunteer Services.

**DaVita Dialysis Centers**

**Address:**
314 Franklin Avenue  
Berlin, Maryland 21811  
410-641-9466
300 Byrn Street  
Cambridge, Maryland 21613  
410-228-9024

**Type of Rotation:** Community/Clinical

**Preceptor:** Beth Jernigan, RD, LDN  
Beth.Jernigan@davita.com

DaVita provides services for individuals such as inpatient peritoneal dialysis and hemodialysis. Additional services include disease management, prescription management, travel support and Kidney education classes. Beth is responsible for the Berlin and Cambridge offices in Maryland.
**Wicomico County School Nutrition**

**Address:** 101 Long Street, P.O. Box 1538  
Salisbury, MD  21802  
410-677-4545

**Type of rotation:** Community

**Preceptors:**  
Eric Goslee  
agoslee@wcboe.org  
Judy Dzimiera, MEd, RD, LDN  
jdzimiera@msde.state.md.us

This school district encompasses 25 various schools from elementary to high school and services over 14,000 students in Wicomico County. The school provides breakfast, lunch and snacks to students and participates in the National School Lunch and Breakfast programs. The school rotations are unique in that the rotation involves two preceptors. If time allows, you will visit the Maryland State Department of Education and explore its role in the school food programs.

**Worcester County School Nutrition**

**Address:** 6270 Worcester Highway  
Newark, Maryland  21841  
410-632-5028  
410-632-5015

**Type of rotation:** Community

**Preceptors:**  
Scott Blackburn  
dsblackburn@mail.worcester.k12.md.us  
Judy Dzimiera, MEd, RD, LDN  
jdzimiera@msde.state.md.us

This school district encompasses 14 various schools from elementary to high school and services over 6,000 students in Worcester County. The school provides breakfast, lunch and snacks to students and participates in the National School Lunch and Breakfast programs. The school rotations are unique in that the rotation involves two preceptors. If time allows, you will visit the Maryland State Department of Education and explore its role in the school food programs.
Nanticoke Memorial Hospital

Address: 801 Milford Street
Seaford, Delaware 19973
302-629-6611 EXT 2063

Type of Rotation: Clinical
Preceptor: Wendy Polk, RD, LDN   rwpolk@comcast.net

An award-winning community hospital, providing exceptional clinical care while maintaining a friendly, caring and compassionate environment. A nationally certified and award-winning stroke program that is designated as a Primary Stroke Center by The Joint Commission. An excellent cardiology program including well-known and respected cardiologists. A comprehensive cancer care center providing treatment and access to clinical trials in Seaford, Delaware. A Level III Trauma Center.

A medical staff with over 120 active and community affiliate physicians providing care in nearly 40 specialties.

AHEC - Area Health and Education Center (Eastern Shore Area)

Address: 814 Chesapeake Drive
Cambridge, Maryland 21613
410-221-2600

Type of rotation: Community
Preceptor: Jeanne Bromwell

AHEC works to recruit and retain health professionals in the medically underserved areas on the Eastern Shore and offers health care education programs for health professionals in the service area and students from colleges and universities in Maryland and surrounding areas.

AHEC develops community-based programs covering:

- Clinical Education
- Continuing Education
• Health careers

Goals of the programs include:

• Increasing clinical awareness and practice in rural areas
• Recruiting and retaining health care personnel
• Exposing participants to health career opportunities

AHEC also coordinates GAIT which is the Geriatric Assessment Interdisciplinary Team.

**WIC**

**Address:** Wicomico County Health Department

**Type of Rotation:** Community

**Preceptor:** Terrie Mulens, RD, LDN  
801 N. Salisbury Blvd  
Salisbury, Maryland 21801  
(410) 749-2488

WIC provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk.

The WIC food packages provide supplemental foods designed to meet the special nutritional needs of low-income pregnant, breastfeeding, non-breastfeeding postpartum women, infants and children up to five years of age who are at nutritional risk. WIC food packages and nutrition education are the chief means by which WIC affects the dietary quality and habits of participants.
ROTATION CHECKLIST    ROTATION__________________

___1. Review the competencies for the rotation 1-2 days before beginning the rotation.
___2. Prepare your individual goals for the rotation and list them on the mid-term evaluation form.
___3. Read and review the specific topics relative to that rotation.
___4. Contact the preceptor at least 2 working days before the rotation begins. Try not to call on a Friday.
___5. On the first day of the rotation review the competencies and goals with your preceptor. **Changes can be made to the activities with the preceptor’s approval only.**
___6. Discuss the policies for dress code, sick days, snow days, cell phone use, etc.
___7. Discuss the preceptor’s expectations and address any questions you have **prior** to beginning a particular activity. It is the intern’s responsibility to understand the expectations of the preceptor.
___8. At the mid-point, the program director will meet with you and the preceptor. Please have the mid-term evaluation form completed **prior** to the meeting.
___9. Submit your completed competencies to your preceptor **before** the end of the rotation. Discuss the preceptors preference concerning the submission of each activity for review. This should be clarified on the first day of the rotation with the preceptor.
___10. Review the final evaluation with your preceptor.
___11. Evaluate your preceptor and the rotation.
___12. Place signed competencies, activities including your explanation of how each activity will impact your practice, evaluations, checklist and time sheet in your portfolio.
___13. Remember to have the preceptor initial your time sheet each day.
___14. Send a thank-you note to the preceptor.

**Revised 1/12**
# PORTFOLIO EVALUATION

<table>
<thead>
<tr>
<th>DATE</th>
<th>ROTATION</th>
<th>REFLECTIVE STATEMENT</th>
<th>SUMMARY OF EXPERIENCES</th>
<th>INTERN EXPLANATION OF ACTIVITY</th>
<th>EVALUATIONS</th>
<th>TIME SHEET</th>
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6/2013