**Recommendations:**

- Registered Dietitians are accountable to the public and to their provincial regulatory body for their conduct, quality of care and the nutrition services they provide.
- Individuals who are at high risk of malnutrition or who have a medical condition that is impacted by nutrition should receive Registered Dietitian (RD) intervention.

**Key Questions**

**What is a Registered Dietitian?**

Registered Dietitians are:

- Well educated in the science of food and human nutrition.
- Able to combine knowledge of nutrition with knowledge from other areas such as health and social sciences, education, communication and management.
- Responsible for ongoing professional development to ensure that they provide safe, ethical, and high quality services.
- Trained to apply their knowledge of food and nutrition in a range of settings and to build respectful relationships with individuals in their care.¹

The education and professional requirements for Registered Dietitians are:

- A bachelor’s degree with major credits in Foods and Nutrition from a university offering a Dietitians of Canada Accredited Dietetic Education Program.
- Completion of an accredited dietetic education program (or equivalent).
- Completion of an accredited practicum experience (or equivalent).
- Successful completion of an exam to assess competence to practice in Canada.
- Complete continuing professional educational requirements to maintain registration with the provincial regulatory body, The College of Dietitians of Alberta.¹

**Why consult a Registered Dietitian?**

The Registered Dietitian provides leadership in the management of medical nutritional therapy (MNT) to ensure that individuals receive optimal and appropriate nutrition care and education.²

Through the integration and application of the sciences of biology, pathology, food and nutrition, Registered Dietitians are able to create strategies for optimal nutrition. Registered Dietitians assess the nutritional status of individuals with a condition, illness or injury that puts them at nutritional risk, determine the nutrition diagnosis, determine and implement a customized nutrition intervention, and then in subsequent visits, monitor and evaluate the individual's progress.²

Registered Dietitians provide quality care based on evidence-based nutrition practice guidelines and protocols, and clinical judgment skills.²
When should a Registered Dietitian be consulted?

Adults with the following conditions will likely benefit from nutrition intervention:

- Allergies impacting nutritional adequacy of diet
  - Example would include avoidance of one or more food groups
  - Multiple food restrictions increasing likelihood of nutritionally inadequate diet
- Celiac Disease
- Diabetes
- Chronic Kidney Disease
- Dyslipidemia
- Dysphagia
- Eating Disorder
  - Anorexia Nervosa (purging or non-purging)
  - Bulimia Nervosa
  - Binge Eating Disorder/Compulsive Eating
- Hypertension
- Impaired Glucose Tolerance
- Inflammatory Bowel Disease
  - Crohn's Disease
  - Colitis
- Malnutrition
  - Unintentional weight loss >5% in 1 month or >10% in 6 months
  - Body Mass Index (BMI) <18.5 for ≤65 years or <22 for older than 65 years
- Obesity
  - Body Mass Index (BMI) >30
- Osteoporosis
- Pregnancy
  - Low pre-pregnancy weight: <90% of desirable body weight or Body Mass Index (BMI) <18.5
  - Poor weight gain 2nd/3rd trimester: <0.25 kg (0.5 lbs) per week (for normal weight women) and <0.5 kg (1 lb) per week for multiple gestation and underweight women
  - Teen pregnancy: <15 years old or less than 3 years since onset of menses
  - History of low birth weight infant
  - Multiple gestation (i.e. twins/triplets)
- Restricted diet resulting in nutrient deficiencies
  - Examples include Vegan diet or Irritable Bowel Syndrome
Children with the following conditions will likely benefit from nutrition intervention:

- Allergies impacting nutritional adequacy of diet
  - Example would include avoidance of 1 or more food groups
  - Multiple food restrictions increasing likelihood of nutritionally inadequate diet
- Celiac Disease
- Diabetes
- Dyslipidemia
- Dysphagia
- Eating Disorder
  - Anorexia Nervosa (purging or non-purging)
  - Bulimia Nervosa
  - Binge Eating Disorder/Compulsive Eating
- Failure to Thrive/Malnutrition:
  - <3rd %ile weight for height
  - Or weight crosses 2 major percentiles downward
  - Or Body Mass Index (BMI) <5th %ile for age
- Hypertension
- Inappropriate diet for age
- Inflammatory Bowel Disease
  - Crohn's Disease
  - Colitis
- Iron Deficiency Anemia
- Overweight:
  - Body Mass Index (BMI) >85th percentile (%ile) for age
  - Increase in BMI of 3-4 units per year
- Pregnancy
  - Low pre-pregnancy weight: <90% of desirable body weight or Body Mass Index (BMI) <18.5
  - Poor weight gain 2nd/3rd trimester: <0.25 kg (0.5 lbs) per week (for normal weight women) and <0.5 kg (1 lb) per week for multiple gestation and underweight women
  - Teen pregnancy: <15 years old or less than 3 years since onset of menses
  - History of low birth weight infant
  - Multiple gestation (i.e. twins/triplets)
- Restricted diet resulting in nutrient deficiencies
  - Examples include Vegan diet or Irritable Bowel Syndrome
References
