Thank You

For Your Willingness to Serve as a Preceptor for Interns in the

Brigham Young University Dietetic Internship

For questions contact:

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INTERN NAMES AND SCHEDULE

The next page shows the master schedule for BYU Interns at Intermountain Urban South Region
BYU Interns Fall 2015

- Sarah Callison
- Carrie Draney
- Emily Krueger
- Wesley Mathison
- Allisa Olsen
- Joy Phillips
- Jennifer Reynolds
- Anneli Robinaugh

Schedule

Clinical
Dates: Aug 18-Sep 11
Days: Tuesday through Friday
Times: Preceptor defines start and stop times. Generally start at 8 or 9 am and end at 4 or 5 pm.
Exception: On a few days interns return to campus. The main clinical preceptor will receive a list of exceptions.

Management
Dates: Aug 17, 24, and 31
Days: Monday
Times: Preceptor defines start and stop times. Generally start 6:00 am and end 1:00 pm
The interns have completed a bachelor’s degree in dietetics prior to starting rotations. The next pages give a brief overview of supervised practice rotations and a summary of completed dietetics coursework.
Interns will complete 1,200 hours of supervised practice during the BYU Internship. The tables below show an overview of each semester.

<table>
<thead>
<tr>
<th>Rotation</th>
<th>Brief Description</th>
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<tbody>
<tr>
<td><strong>Clinical I</strong></td>
<td><strong>NDFS 521</strong> 4 Weeks (NDFS 520R) 5 weeks</td>
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|                                  | • Utah Valley Regional Medical Center  
• 4-days per week working with clinical dietitians in various areas of the hospital.  
• 1-day per week working with foodservice managers                                                                 |
| **Management I**                 | **BYU Food Production Management Lab (FPML)** (NDFS 522) 7 Weeks  
The FPML is a university cafeteria that serves approximately 200 meals per day.  
• 4-1/2 days/week working under the supervision of a faculty dietitian  
• Each intern completes management tasks in one of the following management roles:  
  • Procurement Manager  
  • Production Manager  
  • Service/Sanitation Manager  
  • Finance Manager                                                                 |
| **Community**                    | (NDFS 520R) 5 weeks  
• WIC, School Districts, State Health Department, or other community sites  
• 4-days a week working with dietitians and nutrition professionals                                                                 |
| **Extended Care**                | (520R) 1-2 Weeks  
• Various extended care or long-term care facilities  
• 4-days per week working with dietitians at facilities                                                                 |
| **Clinical II**                  | 6 Weeks  
• Primary Children’s Medical Center, McKay-Dee Hospital, Intermountain Urban Central Region  
• 4-days per week working with clinical dietitians in various areas                                                                 |
| **Management II**                | 4 Weeks  
• Primary Children’s Medical Center or Intermountain Urban Central Region  
• 4-days per week working with dietitians in various management areas                                                                 |
| **Renal**                        | 0-1 Week  
• Various outpatient dialysis centers  
• 4-days per week working with a renal dietitian  
• Not all interns complete a renal rotation                                                                 |
| **Leadership**                   | 3 Weeks  
• Various facilities  
• 4-days per week working with a dietitian or nutrition professional who is a leader in their field  
• Interns learn about the day-to-day work as well as leadership                                                                 |
| **Nutrition Education**          | ~60 hours Completed over several weeks  
BYU Nutritional Assessment Lab  
• Under the direction of dietetics faculty the interns teach the following topics to undergraduate dietetic students: anthropometry, biochemical (finger sticks and urine analysis), nutrition focused physical assessment, indirect calorimetry, vital signs, and nutrition interviewing  
BYU Wellness  
• Under the direction of dietetics faculty the interns teach a wide variety of nutrition and wellness topics to university faculty and staff  
• Teach the Y-Weight Class (a 12-week long weight management series)                                                                 |
| **Research or Project**          | ~40 hours Completed over several weeks  
• Interns complete a research or facility project  
The research/project is completed over an 8 month period  
• Topics for research/project vary and are completed under the direction of dietetic faculty                                                                 |
Completed Course-Work Summary

The following outline pertinent dietetics courses the interns had as undergraduates (in other words, what they should be familiar with and/or able to do as they come to you).

Food Production Management
- Principles of quantity production applied to meats, dairy products, baked goods, vegetables, soups, fresh produce.
- Types of foodservice systems and delivery/service.
- Recipe expansion and costing.
- Eleven weeks (8 hrs/wk) lab experience in conventional foodservice operation, rotating through all production and service areas, equipment use.

Foodservice Systems
- Overview of systems theory and the foodservice system
- Detailed examination of functional subsystems: procurement, production, distribution/service, and sanitation/maintenance.
- Product selection, including value analysis and sensory analysis.
- Vendor selection and purchase specifications.
- The marketing channel and "value added" concept.

Management in Dietetics
- Group dynamics and work group formation.
- Principles of effective communication.
- Decision making and tools used in decision making.
- Planning, organizing, directing, & controlling functions of managers applied to dietetics.
- Principles of human resource management.
- Performance appraisal.
- Theories of management/leadership and motivation.

Community Nutrition
- Community resources
- Program planning and evaluation
- At-risk populations and special needs
- Cultural/ethnic food patterns
- National Health Objectives
- Group and individual counseling
- Legislative and political process

Medical Nutrition Therapy (I & II)
- Medical terminology
- Principles of and rationale for medical nutrition therapy in disease states
- Basics of nutrition support; supplements, enteral and parenteral nutrition
- Basics of nutrition counseling

Essentials of Human Nutrition, Nutrient Metabolism, and Nutritional Biochemistry
- Normal nutrition, from very basic to nutrition at the cellular level
Nutrition in the Lifecycle
- Nutritional needs in pregnancy, lactation, infancy, childhood, and the elderly

Teaching Methods in Dietetics
- Establishing learning objectives, concepts, and lesson plans
- Utilization of a variety of teaching methods
- Support of learning through visual aids

Research Methods in Dietetics
- Types of research and their appropriate use
- Resources for research and reports
- Proposal preparation
- Interpretation and evaluation of research reports in the literature

Advanced Dietetics Practice
- Hypermetabolism and nutritional assessment in critical care
- Nutrition support in critical care, home care, and extended care facilities
- AIDS
- Thermal injury
- High risk pregnancy and infants
- Pediatric diseases, inborn errors of metabolism
- Budgeting, cost/benefit analysis
- Menu engineering, pricing
- Foodservice department set-up

Nutrition Assessment Lab
Skills and techniques in the following:
- Anthropometry—skin folds, adult and infant height and weight, head circumference, growth charts
- Biochemical assessment—blood glucose, hemoglobin, hematocrit, lipid profiles, and urine analysis
- Indirect calorimetry
- Functional assessment and nutrition-focused physical assessment
- Vital signs, including blood pressure certification with Utah State Health Dept.
This section includes overall tips for being an effective preceptor including orientating, teaching, scheduling, and evaluating dietetic interns.
Overall Tips for Preceptors

Orientation

Provide a clear orientation on the first day of the rotation. Some items to include in orientation are:

- Establish ground rules
- Define expectations
- Be purposeful and focused
- Explain work norms at your facility
- Explain what is expected of intern
- Identify the role or importance of your work in the organization – show enthusiasm
- Solicit information – have interns:
  - List and explain previous experiences
  - Describe their experiences
  - Describe how their goals mesh with the rotation goals

Preceptors as Teachers

Students are taught knowledge and reasoning skills in school, but the supervised practice setting is where interns begin to apply their knowledge. Preceptors become teachers in an applied work setting. A possible method to aid in teaching interns is following the Experiential Learning Model as outlined below.

Experiential Learning Model

Experiences alone do not lead to learning. Experiences lead to learning when the intern understands the tasks, sees patterns of observation, can generalize from those observations, and understands how to use those observations and generalizations in future situations. The Experiential Learning Model consists of five steps:

1. Experience
2. Share
3. Process
4. Generalize
5. Apply

Experience. The intern experiences the activity – perform or do something. The preceptor may need to demonstrate the activity or experience first. For example in a clinical rotation a preceptor may need to demonstrate how to find items in the electronic medical record. Examples: the intern completes a nutrition assessment; the intern creates a staff schedule; the intern reviews a menu plan

Share. The intern shares the experience by describing what happened. They tell what they did, saw, felt, etc. The interns may describe what was difficult or what was easy. Examples: the intern meets with the preceptor to discuss what she or he did.

Process. The intern processes the experience to determine what was most important and identify common themes. Examples: the intern and preceptor debrief the experience. The preceptor provides specific feedback, hints or shortcuts. The preceptor may quiz the intern. The intern corrects any errors made based on feedback. The intern thinks about the process or procedure used to complete the activity.
**Generalize.** The intern generalizes from the experience and relates it to their work. The intern focuses on what was learned from the experience. Example: the intern connects what they learned in undergraduate courses with completed the experience.

**Apply.** The intern thinks about how to apply what they learned from the experience to future tasks. Examples: The intern learns a quick way to view medications in the medical record; the intern learns to double check the schedule for overtime hours; the intern learns to check menus against regulatory standards.

**Scheduling**

The key word to remember in scheduling is FLEXIBILITY. Develop a “skeleton schedule” that directs the intern’s time, but feel free to alter it as unique opportunities arise. The intern’s week, and occasionally even day, may certainly be split between types of activity if something noteworthy occurs.

**Evaluations**

**Evaluation of Interns by Preceptors**
A very important part of the intern’s learning comes from thoughtful and honest evaluations. Feedback should be provided throughout the rotation with a formal evaluation at the mid and final points. A copy of evaluation forms are found in the “Evaluation Section” of this handbook and online at dietetics.byu.edu. Interns will provide a form prior to the evaluation. (Note at UVRMC only a Clinical Evaluation form is required, a management evaluation form is not required). A BYU instructor may ask to be present for the evaluations.

Listed below are some tips for evaluation
- Feedback should be an ongoing process during the rotation to help interns modify their skills and behavior.
- Evaluation is part of the learning process and can help build confidence.
- Midterm evaluations provide information on how to improve and what to keep doing.
- Final evaluations, at the end of the rotation, tell interns how to strengthen or modify their skills in the future. Corrected behavior does not need to be brought up in the final evaluation.
- The results of the evaluation at the end of the rotation should NEVER come as a complete surprise.
- Evaluations are helpful for the preceptor. They provide feedback about what you do that makes the learning experience beneficial for the interns and what could make it better.

**Evaluation of Preceptor and Facility by Interns**
Interns will evaluate their experience at rotation sites. These evaluations will be sent to preceptors. A copy of the “Site Evaluation” used can be found in the “Evaluation Section” of this handbook.
Management Rotations Guidelines and Tips

Management Overview
Purpose: To provide an opportunity for interns to explore the complexity of foodservice operations in a health care environment.

Learning Outcomes: Management competencies and learning outcomes can be found in the competency section of this handbook. Among the points interns should grasp are
- The scheduling of patient feeding with cafeteria and catering function
- The interface of clinical and foodservice needs
- The role of each member of the management team
- The time is short, so the expectation is for overview understanding, not in-depth performance.

Tips for Management Preceptor

- Begin with an orientation to your position and responsibilities. Orientation ideas include
  - Walk them through a typical day, and some of the “critical control points” you check on at various points in the day.
  - Share some of the reports you generate and explain the purpose of the reports.
- Discuss some of the personnel issues you deal with, how you inspire good performance from your employees, and how you carry out evaluations.
- Share some of the on-going problems you deal with and some of the solutions you have implemented.
- If the intern is scheduled to work with one of your employees, please prepare the employee by reviewing the purpose of that rotation and encouraging the employee to let the intern “jump right in” after an explanation and demonstration of what to do.

In preparation for working with the interns, you might want to think through the following questions and be ready to discuss (and show) the answers with/to them:
- What are my primary responsibilities?
- What skills are most important for me to carry out my responsibilities?
- How does my work contribute to the desired outcomes of the department?
- Who reports to me and to whom do I report? How do those interactions take place?
- What do I look for when hiring employees, and how do I handle the interview?
- What type of training do I give to the employees in my stewardship?
- How do I handle discipline issues with my employees?
- How do I “keep up” with my area of responsibility, how do I learn about new developments, methods, products, etc.?
- What are the key interactions I have outside of the department?
- What laws, regulations, codes, etc., are important in my work?

Evaluations

- No formal written evaluation is required for the management project and experience
  - The interns should receive ongoing formative evaluation through the rotation. Ongoing feedback is important for interns to understand what they are doing well and what they need to improve.
Clinical Rotation Guidelines and Tips

**Purpose**: The purpose of the clinical rotation is for the interns to gain experience in/exposure to the various areas of nutrition care in the medical center. It is NOT expected that the interns will gain entry level competence or do staff relief during this rotation. However, they should be able to complete assessments, prepare nutrition care plans, provide education, and document care in the medical record.

**Learning Outcomes**: Clinical competencies and learning outcomes can be found in the competency section of this handbook.

**Tips for Clinical Preceptor**
In preparation for working with the interns, consider the following questions and be ready to discuss (and show) the answers with/to the interns.

- What are my primary responsibilities?
- What skills are most important for me to carry out my responsibilities?
- How do I “keep up” with my area of responsibility, how do I learn about new developments, methods, products, etc.?
- What are the key interactions I have outside the department?
- How do I communicate with other members of the patient care team, with the other dietitians and technicians, with foodservice managers?
- How do I prioritize my activities each day?
- What resources do I use (people, texts, media, etc.) when I need help in completing a task?
- What “tricks of the trade” do I use to help me accomplish various aspects of my job?

As opportunities arise, model various activities you perform, such as assessments, diet instructions, charting, physician interaction, etc. Then, allow the intern to perform the same activities under your supervision. As competency develops, the intern’s work load can be increased and more complex tasks assigned.

**Clinical Activities**
The main portion of time of an intern’s time will be spent understanding and performing the duties of a clinical dietitian. In addition, the interns could participate in some of the following enriching activities:

- Spend time with a diet tech
- Participate in daily clinical conference reports
- Visit with and observe other disciplines
- Participate in multidisciplinary teams

The interns should complete the following

- **Case Study.** The intern will present an oral and written case study to faculty and students on the BYU campus.
- **Basic Competency checklist** (form is in competency section). The intern will be responsible to complete the Basic Competency Check List – communicating with his/her preceptors regarding competencies still to be achieved. We understand some learning activities may not be available at all times.
Daily Clinical Conferences/Reports

As part of the learning process, accountability for performance, and evaluation each intern should be responsible for a “clinical conference/report” with their preceptor. The report can be at the end of the day, at completion of a floor or area, or throughout the day. Brevity should be emphasized. The purpose of the report is for interns to share clinical knowledge and receive feedback.

Ideas for reports may include:

1. Report on nutrition care activities provided for each patient including parts of the Nutrition Care Process:
   a. Assessment
   b. Diagnosis
   c. Intervention
   d. Monitoring and Evaluation
2. In-depth report and review on any patients that provide a “good learning opportunity”. Preceptors may utilize this time to provide additional insights/training based on their clinical experience.
3. Review of medications, labs, or clinical procedures that are unfamiliar to the intern
4. The intern will be responsible to see that all information regarding follow-up with assigned patients is communicated completely – both in oral and written format

Evaluations

- The interns should receive ongoing formative evaluation through the rotation.
  - Ongoing feedback is important for interns to understand what they are doing well and what they need to improve.
  - Interns should have an opportunity to make improvements throughout the rotation according to feedback.
- The preceptor should complete a formal final evaluation form/report and review with the intern.
  - Nothing should come as a surprise on the final evaluation if ongoing evaluations are completed.
- Both the intern and preceptor should sign the evaluation.
- A BYU faculty member may request to be present at the evaluation.
COMPETENCIES AND LEARNING OUTCOMES

The Accreditation Council for Education in Nutrition and Dietetics (ACEND) has established competencies and learning outcomes for dietetic interns. A copy of the competencies and learning outcomes, are shown in the pages that follow. After completion of a rotation, interns should list learning activities in which they participated that helped them to meet the listed learning objective

In addition to the ACEND competencies interns should complete the Basic Competency checklist as part of their NDFS 521 course work.
Dietetic Internship Core Competencies for the RD
Accreditation Council for Education in Nutrition and
Dietetics (ACEND)

1. **Scientific and Evidence Base of Practice: integration of scientific information and research into practice.**
   Upon completion of the DI, graduates are able to:
   CRD 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
   *(Tip: Outcomes may include clinical, programmatic, quality, productivity, economic, or other outcomes in wellness, management, sports, clinical settings, etc.)*
   CRD 1.2 Apply evidence-based guidelines, systematic reviews and scientific literature (such as the Academy’s Evidence Analysis Library and Evidence-based Nutrition Practice guidelines, the Cochrane Database or Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites) in the nutrition care process and model and other areas of dietetics practice.
   CRD 1.2 Justify programs, products, services, and care using appropriate evidence or data.
   CRD 1.4 Evaluate emerging research for application in dietetics practice.
   CRD 1.5 Conduct research projects using appropriate research methods, ethical procedures, and data analysis.

2. **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.**
   Upon completion of the DI, graduates are able to:
   CRD 2.1 Practice in compliance with current federal regulations and state statutes 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.
   CRD 2.2 Demonstrate professional writing skills in preparing professional communications.
   *(Tip: Examples include research manuscripts, project proposals, education materials, policies, and procedures).*
   CRD 2.3 Design, implement, and evaluate presentations to a 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 appropriate 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 principles effectively to achieve desired outcomes.
   CRD 2.9 Participate in professional and community organizations.
   CRD 2.10 Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services.
   *(Tip: Other health professional includes 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 DI, graduates are able to:

CRD 3.1 Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups, and populations of differing ages and health status, in a variety of settings.

a. Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered

b. Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements

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

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

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 communication 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 DI, 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.
Basic Competency Check List  
(To be completed by intern and returned to Dr. Fullmer)  
Name__________________________

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<thead>
<tr>
<th>Condition</th>
<th>Nutritional Assessment, Monitoring &amp; Evaluation</th>
<th>Nutrition Intervention (e.g. diet instruction, oral supplement, nutrition support, diet change, etc.)</th>
<th>Chart Note</th>
<th>Preceptor Initials</th>
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<tr>
<td>Gastric disorder/surgery</td>
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<tr>
<td>Intestinal disorders/surgery</td>
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<td>Normal nutrition/weight loss</td>
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<tr>
<td>Cancer</td>
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<td>Kidney disease (ARF, CRF, dialysis)</td>
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<td>Wound healing, pressure ulcer</td>
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<td>Atherosclerosis/MI</td>
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**Expectation:** Intern will complete the three components of nutrition care for at least 8 of the 11 conditions listed.

**Other requirements/learning activities**

- Interview 50 patients
- Perform a calorie count
- Calculate a TPN
- Calculate a TF
- Develop and implement a transitional feeding plan
- Observe a dressing change
- Observe an NG placement
- Consult with an MD about a patient
- Consult with an RN about a patient
- Consult with another health care professional (SLP, OT, PT, RPH, MSW) about a patient
EVALUATION FORMS

This section contains copies of the Clinical evaluation form. Interns will provide preceptors with a hard copy of the evaluation forms for mid and final evaluations. Tips for completing evaluations can be found in the “Preceptor Guideline” section.

A copy of the site evaluation form interns complete is also found in this section
**Clinical Evaluation**

**Utah Dietetic Education Consortium**

Facility ______________________________ Date _______________________
Preceptor ____________________________ Student/Intern _______________________

- Please evaluate the student/intern on the following areas of performance
- Please circle the number corresponding to your rating

**Scale:**

1 – Very weak, needs more work  
2 – Weak, needs more work  
3 – Doing well, performing as expected for student/intern level  
4 – Above average, doing better than expected  
5 – Outstanding, doing much better than expected for level  
N/A – not applicable to this rotation

- Add comments in each area for particularly strong or weak performance

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<td>Implement conversion of one form of nutrition support to another. Implement changes in feeding from ECF or home.</td>
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<td>Able to interpret data collected</td>
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<td>Accurate diet/oral supplement/calorie count calculations</td>
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<td>Checks work for errors</td>
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<tr>
<td>Appropriate, accurate, complete instructional/counseling materials and methods</td>
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<td>Appropriate teaching level for pt/family understanding; family involvement</td>
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<td>Evaluates, pt/client’s level of understanding, motivation</td>
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<td>Establishes, coordinates, implements follow up care short and/or long-term</td>
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<td>Appropriate involvement and coordination with health care for nutrition interventions</td>
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<td>Participates in coding/billing of dietetics/nutrition services</td>
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<td>Culturally sensitive</td>
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<td>Utilizes current research in formal presentations to professionals and interactions with pt/clients</td>
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Please comment on the student/intern’s overall performance:

Strengths

Areas for further work

Signatures:

Preceptor: ________________________________  Student/Intern ________________________________
SUPERVISED PRACTICE SITE EVALUATION
Brigham Young University Dietetic Internship

Interns complete for all rotation sites, form must be typed. The BYU Dietetic Internship program will send the completed site evaluation to preceptors.

Site:_____________________________________
Dates of Assignment:_______________________
Name:___________________________________

Please circle/bold the most appropriate response to the following statements.

1. The orientation I received to the site (its policies, procedures, resources, etc.) was
   1. very poor
   2. poor
   3. adequate
   4. very good
   5. excellent

2. Because of my experience at this site, my knowledge increased
   1. very little
   2. somewhat
   3. moderately
   4. substantially
   5. dramatically

3. Because of my experience at this site, my skill improved
   1. very little
   2. somewhat
   3. moderately
   4. substantially
   5. dramatically

4. The training I received at this site helped me meet the objectives for this rotation
   1. very poorly
   2. poorly
   3. adequately
   4. very well
   5. exceptionally well

5. I understood my role and my responsibilities at this site
   1. almost never
   2. seldom
   3. sometimes
   4. frequently
   5. almost always
Rate the following characteristics of overall experience at this site.

Overall, my experience was:

1. very tense 1 2 3 4 5 very relaxed
2. very easy 1 2 3 4 5 very demanding
3. very unorganized 1 2 3 4 5 very organized
4. very boring 1 2 3 4 5 very stimulating
5. very irrelevant 1 2 3 4 5 very valuable
6. very frustrating 1 2 3 4 5 very enjoyable
7. very closely supervised 1 2 3 4 5 very loosely supervised

Comments: