



CNS Practice Experience for Nutrition Professionals Case Study Report Template & Instructions

General Instructions:

- Please ensure that all client data has been de-identified and that you have obtained the client's informed consent and/or institution's permission, if necessary.
- Complete one report for each of the five cases in accordance with the Case Study Template below.
- Include only cases that meet the following criteria –
 - Involves a chronic health issue or weight management/obesity for which a significant part of the treatment plan includes dietary and nutritional supplement components. (See CNS Supervised Practice Experience Handbook pages 8-12 for competencies.)
 - Involves a minimum of four sessions with the client to allow for sufficient monitoring and follow-up regarding outcomes of your treatment plan.
- Your report must document your development of competencies in each of 3 categories –
 - Nutrition Assessment;
 - Nutrition Intervention, Counseling and Management; and
 - Nutrition Monitoring and Evaluation.

Please see CNS Practice Experience Competencies (in the CNS SPE Handbook) for details.



Case Study Report Template for Nutrition Professionals

Your name, email and phone

Description of the practice setting that applies to the case (e.g. clinical practice, community setting, practicum as part of a fellowship or medical internship program, institution setting, other)

Introduction. Briefly summarize the background and context of this case report.

Presenting Information. Describe the client's characteristics (demographics, age, gender, ethnicity, occupation, living situation, etc.) and presenting concerns with relevant details of past interventions.

Category A, Nutrition Assessment. Include health history, diet and lifestyle history, biochemical and laboratory assessment, genetic/genomic factors, anthropometrics, assessment of diet impact on health status, and identification of diagnosis and clinical status.

Date:

Client: Age: Ht: Wt:

BMI: BP:

Waist Circumference: Hip Circumference: Waist-to-Hip Ratio:

BMR:

BIA:

Purpose of Visit: Initial nutrition visit to address:

- 1.
- 2.
- 3.



Readiness for change	Scale of 1-5 (1= not willing, 5= very willing)
Change diet, record foods	
Exercise	
Stress Management protocols	
Sleep	
Taking supplements	

Summary of Client's Relevant History:

Conditions or medical diagnoses provided by HCP:

Relevant Lab Work

Nutritional Meaning/Findings

Relevant Lab Work	Nutritional Meaning/Findings

Genetic Information known on client:

Known Allergies:



Family history includes:

Birth information (i.e. vaginal/c section, breastfed or bottle fed)

Food Log/Diet Review (Consider using a software program/apps like Chronometer, my fitness pal, etc.)

- Key nutritional findings: (% of protein, fat and carbs, excess or deficient in what micros.)
- Food Aversions:
- Food Intolerances:
- Typical eating patterns (eats under stress, bulk of calories late in day, emotional eater, etc.)

Digestion, elimination:

Physical Activity:

Daily stressors and rating of stress by the client:

Sleep:

For Females: (provide details on cycle, pregnancies)

Medication	Interaction	Nutrient Depletions



Supplement	Dose	Reason for taking

Nutrition Focused Physical Exam (NFPE)

This NFPE is either done in person or by using detailed questions in the intake to help identify possible nutrient insufficiencies/deficiencies. **Most** of these things can be seen by you as a provider.

Area	Potential Nutritional deficiency/insufficiency
<i>Example: Face</i> <i>Acne</i> <i>Yellow face</i>	<i>Zinc, allergy, Vit A, EFAs, selenium, B12</i>
Face	
Eyes	



Mouth	
Tongue	
Lips	
Teeth	
Nose	
Throat	
Skin	
Hair	
Hands, fingernails, fingers	
Skeletal	
Respiratory	
Circulation	
GI Tract	
Muscular	
Cardiovascular	
Nervous System	
General	



Summary of Systems Findings and Meanings for you as a nutrition professional

HEAD, EYES, NOSE, EARS:

MOOD/NERVES:

RESPIRATORY:

DIGESTION:

CARDIOVASCULAR:

SKIN:

ENERGY/ACTIVITY:

WEIGHT/EATING:

JOINT/MUSCLE:

URINARY:

REPRODUCTIVE:

OTHER:

Questionnaires: Note nutritional relevance/findings

MSQ Score:

HAQ findings:

Other questionnaires

Category B, Nutrition Intervention Plan and Method of Implementation.

Describe in detail the applicable dietary and nutraceutical and supplement interventions for prevention, modulation and management of the relevant health issues. Include relevant references to scientific literature. Address relevant nutrient/drug interactions, interactions between nutrients, dietary therapeutics and behavior optimization, cultural issues, ethical standards and boundaries.

Date:

Nutrition Goals:



Dietary Recommendations/Intervention: (Be sure to use all the tools at your disposal to provide detailed plans)

Food/Food Plan	Handout

Calorie Goal: BMR=

Comments/Special Instructions:

Physical Activity/Lifestyle Recommendations:

Physical Activity/Lifestyle Recommendations	Purpose	Repetitions	Sets	Frequency	Duration	Notes

Comments/Special Instructions:

Stress management recommendations:

Suggestions	Handout



Sleep Recommendations

Suggestions	Handout

Supplement Recommendations: (include brands and doses, indicating when the client is to take them.
Be sure you have checked for interactions with Rx or other supplements!)

Supplement	Waking	B-fast	Mid am	Lunch	Mid PM	Dinner	Before bed

Comments/Special Instructions:

List educational handouts provided:

Referrals to other HCPs:

Follow up scheduled for:



Category C, Nutrition Monitoring and Evaluation (follow-up and outcomes). Describe the clinical course of this case including all follow-up visits, and how you re-evaluated the treatment plan and modified it accordingly. Discuss positive as well as adverse outcomes or unanticipated events. Include client-reported outcomes as well as those clinically assessed and reported.

Timeline. Indicate the dates you meet with the client and the purpose and duration of each session.

Discussion. Describe the key clinical “take-aways” and main findings. Discuss the strengths and limitations of this case report, including your rationale. What would you do differently or the same when faced with a similar case?

Signature: _____ Date: _____