CNS Practice Experience for MD/DOs Case Study Report Instructions

General Instructions:
• Please ensure all patient data has been de-identified and that you have obtained the patient’s informed consent and/or institution’s permission, if necessary.
• Complete one report for each of five cases in accordance with the template below.
• Include only cases that meet the following criteria:
  o Involves a chronic health issue for which a significant part of the treatment plan includes dietary and nutritional supplement components (see CNS Practice Experience Competencies form, Part II, section 1 for list of health issues.)
  o Involves a minimum of four sessions with the patient 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 three categories:
  o Nutrition Assessment;
  o Nutrition Intervention, Counseling and Management; and
  o Nutrition Monitoring and Evaluation.
  Please see the CNS Practice Experience Competencies form for details.

Case Study Template: Medical Nutrition Therapy

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 patient’s characteristics (demographics, age, gender, ethnicity, occupation, living situation, etc.) and presenting concerns with relevant details of past interventions.


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.
**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 patient-reported outcomes as well as those clinically assessed and reported.

**Timeline:** Indicate the dates you meet with the patient 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?

**Submission of Application and Documentation:**
Please submit these materials to Applications@NutritionSpecialists.org.