

2022-2023 Final Case Study Presentation/Defense Guidelines for the Completion of the Non-Thesis MS in Human Nutrition or Clinical and Community in the Department of Food Science and Human Nutrition (FSHN)

Purpose and Overview:

The final case presentation/defense will allow graduate students completing their Non-Thesis MS in Human Nutrition in FSHN to apply what they learned from their master's degree. This final case study presentation/defense is the last requirement for completing the Non-Thesis MS in Human Nutrition or Clinical and Community Nutrition and serves as the exit defense for degree completion.

The case study presentation should be based on a fictitious patient from a focus area in Clinical Dietetics, Human Nutrition, or Community Nutrition (*see guidelines on page 3*). The student is to create a patient to include one of the life stages (preconception, pregnancy, lactation, children, adults, or older adults) and one disease states (Diabetes, Hyperlipidemia, Htn, MI, CVA, CRF, CA, COVID-19, etc.) that were covered during their graduate coursework. During the presentation, the student must describe how they (as a RDN/nutrition professional) would treat this patient nutritionally. The student will record their presentation in Zoom with their camera on, edit in Mediaspace, and upload to the appropriate Mediaspace Channel:

<https://mediaspace.illinois.edu/channel/2022%2BFinal%2BCase%2BStudy%2BPresentation%2BVideos%2BMS%2Bin%2BHBN/252325553> before their scheduled Defense day during finals week. The recorded presentation cannot exceed 20 minutes. Students are not allowed to use any information from an actual patient that they treated during their dietetic internship due to HIPPA; however, they may be inspired by multiple patients treated and modify their histories and any potentially identifiable information (e.g., date of birth, age, laboratory values, history) accordingly to create a new case study patient for this final case study.

Process:

Outline of Case Study

1. The student must first create an outline of their case study based upon the guidelines below and approved by one of the FSHN RDN Faculty members: <https://fshn.illinois.edu/directory/faculty>, and these include Sharon Donovan, Hannah Holscher, Melissa Pflugh Prescott, or Jessica Madson.
2. The outline shall be submitted to the RDN faculty member as a Word document at least 30 days before finals week to review and provide track changes to the student.
3. The student and faculty member should briefly meet to discuss the recommended changes to the case study. After the meeting, the RDN Faculty member will approve the outline online via the departmental form. <https://forms.illinois.edu/sec/1039751921>
4. The outline with the RDN faculty member's comments and the departmental approval form will be forwarded to the standing committee members at least one week before the final presentation/defense.
5. The student should sign up for **ONE** 60-minute Final Case Study Presentation/Defense slot via the Google form based on their availability: will be updated soon for May/August 2023 finals weeks
6. The student should schedule at least **ONE** practice session of their case study presentation with their RDN advisor, another RDN Faculty Member that is assigned to them, (contact Dr. Karduck for the name of the assigned RDN faculty member), and

other graduate students during the two weeks before finals week to prepare for the final presentation/defense.

After the meeting, the RDN Faculty member will approve the practice session online via the departmental form. <https://forms.illinois.edu/sec/1076101625> Failure to submit the last outline and documents to the committee one week before the final presentation/defense will result in the exam's postponement until the following semester.

Case Study Presentation:

1. The final case study presentation should last no longer than 20 minutes and be uploaded to the appropriate Mediaspace channel.
2. The final case study presentation slides should also be uploaded to the Box folder by noon on Reading Day of the Finals Week:
<https://uofi.box.com/s/agn6nh3nbdbr0ca5jj6bcsqq2fa5r1ea>
3. Faculty members on the standing committee will review the Mediaspace videos and slides after they are uploaded by the student to Box, preparing for the 30-minute Final Defense Q & A sessions during finals week. The faculty members will use the below FSHN Non-Thesis Final Case Study Evaluation Tool to grade the student videos in preparation for the Final Defense Session.
4. The student is responsible for setting up the Zoom meeting and sharing the appropriate Zoom login information with the standing committee at least 24 hours before the presentation.
5. Students should include AMA in-text citations on the appropriate slides and a reference list at the end of the presentation. Sources should be listed on the slide per AMA guidelines for all text and photos/tables used. The reference cited needs to come from evidence-based guidelines (Academy of Nutrition and Dietetics, American Diabetes Association, American Heart Association, etc.), systematic reviews, and scientific literature with at least two peer-reviewed publications. Students might find help at the ADA Evidence Analysis Library, Cochrane Database of Systematic Reviews, and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, or National Guideline Clearinghouse web sites. Slides will be scored for professionalism. Photos and images that are related to the content and appropriately referenced are required.

Evaluation:

1. A standing committee of three FSHN faculty will evaluate the final case study presentation/defense and will decide if the student passes or fails the last presentation/defense based upon the below criteria and the Excel grading rubric (in Box).
2. Students who fail the defense will be allowed to redo the presentation/defense once in 30 days in agreement with the standing committee.

OUTLINE FOR CASE STUDY PRESENTATION

Three nutrition outlines (Clinical Nutrition RDN-focused, Human Nutrition-Focused, or Community Nutrition-Focused) are provided on pages 3-6 as guides for developing your final case study presentation.

The outline with your patient/client information to be submitted to your RDN Faculty Member must follow one of the formats below. Each central topic area needs to be addressed, but the order and detail can be modified to fit the specific case study. Each student should create a fictitious patient in their area of interest (clinical or community) and include the following information.

Clinical Nutrition RDN-Focused Case Study

- I. General information: (5 minutes)
 - a. Patient's initials
 - b. Patient's demographics (age, gender, race/ethnicity, marital status, number of children, occupation, educational level, housing, etc.)
 - c. Reason for outpatient appointment with RDN or reason patient was admitted to the hospital.
 - d. Date of admission or appointment with the patient
 - e. Present illness - onset, duration
 - f. Medical Diagnosis
 - g. The general condition upon admission or appointment with the patient
 - h. Available orders- diet, medication, drugs, nutritional supplements, etc.
- II. Special History (2-5 minutes)
 - a. Past Medical History
 - b. Family History
 - c. Social conditions affecting health – SES, economic including food security status, family support, emotional, and psychological issues
 - d. Assessment of self-care behaviors
- III. Nutrition Care Process (10 minutes)
 - a. Nutrition Assessment
 - i. Anthropometric Data (Ht, Wt, BMI, IBW, IBW%, UBW, Wt changes, % wt change)
 - ii. Pertinent Laboratory- explain what the value indicates, give normal ranges and bold abnormal values, defend your interpretation of the lab and recommend additional labs if needed
 - iii. Nutrition-Focused Physical Findings
 - iv. Clinical Signs and symptoms
 - v. Dietary History and dietary recall
 - vi. Medications, supplements, and potential drug and nutrient interactions
 - vii. Knowledge/beliefs/attitudes/cultural assessment related to food and nutrition
 - viii. Target body weight based on clinical practice guidelines and appropriateness for the pt
 - ix. Estimated nutritional needs (calories, macronutrients, essential micronutrients that relate to the patient's diagnosis, hydration needs)
 - b. Nutrition Diagnosis (PES Statement included NCP terminology), this should be limited to one to two diagnoses
 - c. Nutrition Intervention (Prescription)-What is your "prescription" or the overall recommendations for the patient? Justify your intervention.
 - i. Describe:
 1. Nutrition education or counseling - describe educational or counseling encounters, including at least:
 - a. One Behavioral Theory used
 - b. Two Nutrition Education Materials used in the session or sent home with the patient
 - c. List SMART goals that are patient-focused, measurable, achievable, and time-defined.
 - d. Identify barriers that may prevent the intervention strategies from being successful, if any

- ii. Coordination of care - discuss other professionals referred to during the patient's nutrition care; discuss any discharge planning and transfer of nutrition care from one level or location of care to another

IV. Nutrition Monitoring and Evaluation with goals (3 minutes)

- a. List specific indicators/measures that could be monitored/evaluated to determine the progress of the patient. These should link back to the diagnoses, prescription, goals, intervention strategies, standards, and initial assessment findings.
- b. Briefly discuss a one-month follow-up visit that you have with the patient and the effectiveness of your nutrition intervention thus far

Summary (2 minutes)

- A. Summarize the prognosis of the patient and the effectiveness of the nutrition care plan.

References

Human Nutrition-Focused Case Study

Sections I-IV should be no more than five minutes.

I. General information:

- A. Patient's initials
- B. Patient's demographics (age, gender, race/ethnicity, marital status, number of children, occupation, educational level, housing, etc.)

II. Report on Admission/Patient Appointment

- C. Date of admission or appointment with the patient
- D. Reason for Visit (e.g., nutrition-related disease, sports nutrition consult, picky eating).
- E. History of the problem (duration, symptoms, etc.)
- F. Identified goal/intervention stated by patient/client
- G. Present general condition of patient/client
- H. Overview of current diet, medication, drugs, nutritional supplements, etc.

III. Special History

- I. Past Medical History
- J. Family History
- K. Social conditions affecting health – economic including food security status, familial, emotional, and psychological issues

IV. Discussion of disease, condition, or reason for the visit

- L. History & Incidence
- M. Etiology if known
- N. Symptoms (Identify those reversible with nutritional intervention.)
 - Discuss how the disease/condition/issue impacts the nutritional status and needs of the patient
 - Explain the rationale for dietary modifications and current recommended evidence-based MNT
- O. Treatment (Discuss those applicable) - medical, surgical, chemotherapy, dietary, psychosocial
- P. Prognosis

V. Nutrition Care Process (8-10 minutes)

Q. Nutrition Assessment

- 1. Anthropometric Data (Ht, Wt, BMI, IBW, IBW%, UBW, Wt changes, % wt change)
- 2. Pertinent Laboratory- explain what the value indicates, give normal ranges and bold abnormal values
- 3. Clinical Signs and symptoms
- 4. Dietary History and dietary recall
- 5. Medications, supplements, and potential drug and nutrient interaction
- 6. Knowledge/beliefs/attitudes/cultural assessment related to food and nutrition
- 7. Estimated nutritional needs (calories, macronutrients, essential micronutrients that relate to the patient's diagnosis, hydration needs)

R. Nutrition Diagnosis/Nutrition Related Disease to be Treated

S. Nutrition Intervention with goals

- 8. Nutrition Prescription – What is your "prescription" or the overall recommendations for the patient? Include the patient's individualized recommendations for energy, protein, fluids, specific foods or nutrients (as appropriate), based on current reference standards and guidelines and the patient's health condition and nutrition diagnosis.

- a. Justify your intervention by providing an overview of the mechanism by which the nutritional treatment will remedy the disease/condition/issue's signs/symptoms.
9. Describe:
 - b. Nutrition education - describe educational encounters and how verbal and nonverbal communication and cultural competency will be prioritized during the patient's conversation.
10. List goals that are patient-focused, measurable, achievable, and time-defined.
11. Identify barriers that may prevent the intervention strategies from being successful, if any
- T. Nutrition Monitoring and Evaluation with goals
 12. List specific indicators/measures that could be monitored/evaluated to determine the progress of the patient. These should link back to the diagnoses/disease, prescription, goals, intervention strategies, standards, and initial assessment findings.

VI. Summary (2 minutes)

- U. Summarize the prognosis of the patient and the effectiveness of the nutrition care plan.

VII. References

Community Nutrition-Focused Case Study

This outline is to be used as a guide for developing your Final Case Study and M.S. Defense Presentation. The design with your community nutrition program's information will be submitted to your RDN Faculty Advisor and follow the format below. Each major topic needs to be addressed, but the orders and details can be changed to fit the specific case study. Each student should create a fictitious community nutrition program to prevent, treat, or provide survivorship care for a health-related issue of their choice (i.e., obesity, diabetes, cancer, etc.) and include the below information.

Sections I-II (~5 minutes)

I. General information on a selected health issue:

- A. Definition and diagnosis criteria
- B. Current incidence and prevalence statistics in the United States
 - 1. Including segments of the population most at risk
- C. Briefly summarize evidence or provide statistics suggesting that this health issue is a significant problem
- D. Risk factors for disease

II. Overview of Selected Target Population: Identify a target population and location (~5 minutes)

- E. Specify any defining demographic or health characteristics (age/developmental stage, race, spoken language, disease diagnosis, etc.)
- F. Provide a brief overview of the fictitious or real region

III. Community Needs Assessment: Provide an overview of the types of information you will seek to plan your program. End this section by summarizing some fictitious results from your Community Needs Assessment. (~1 minute)

- V. Epidemiologic data & local health district data
- G. Needs for this Community Program
- H. Key Informants or Stakeholders that you will involve

IV. Theoretical Framework: Identify one or more behavior change theories or frameworks that will help you promote desired behavior change in your target population provide a brief of overview relevant theory

- I. Identify how you will use the theory to promote change in your population

V. Program Goals and Objectives: Create a fictitious program to address your selected health issue in your fictional target population

- J. Identify one overall goal
- K. Identify 2-3 objectives to support this goal. Purposes must be specific, measurable, achievable, relevant, and timely.
 - 1. Must include at least one short-term and one medium or long-term objective
 - 2. Your explanation must tie your goals and objectives to the health concern you selected

VI. Program Planning:

- L. Propose instructional methods/activities that will promote nutrition behavior change and relate to the program goals and objectives

- M. Explain how your program will be culturally appropriate
- N. Identify fictitious community partners that will be involved with your schedule and their duties

VII. Evaluation

- O. Identify existing or fictitious measurement tools that will be used to determine if your objectives are being met and reflect your behavior theory
 - 1. Describe how valid and reliable each survey or dietary assessment tool is. Cite quality sources that suggest evidence-based methods of collecting anthropometric or other clinical data.
 - 2. Note: You do not have to create a new tool. You would only need to describe the process you would undergo to make a recent survey or other means.

VIII. Summary (1 minute)

- P. Summarize the potential of the program to meet the goals and objectives
- Q. Discuss how likely the program would be to achieve collective impact in the target population

IX. References

FSHN Non-Thesis Final Case Study

Faculty Evaluation Tool

**Name of
Presenter:** _____

**Name of
Evaluator:** _____

Scoring Rubric:

<u>Content & Presentation (100 points maximum)</u>	Max Points	Points Earne d	Comments
Based on current primary sources, research & review articles (since 2010), correct AMA Journal citations from reputable journals/books.	20 (-5 pt. for each article older than 2010, -2 for each incorrect citation)		
Use of technical language (medical terms, abbreviations prn, etc.)	20		
Follow correct steps and progression for class presentation (General Information, Special Hx, Nutrition Care Process including ADIME, Summary, References)	10 (-5 pts for each missing step)		
Scientific accuracy, quality, and thoroughness of the information presented	100		
Relevant topic & relates to current nutrition problem includes practical applications	10 (-5 pts if does not have practical applications)		
Out of 150	Total from Page One		
<u>Comments:</u>			

Visuals (30 pts. maximum)			
Slides and props are bold, clear, concise, serve a purpose, including infographics, no grammar or spelling errors	10 (-5 pt. if not clear, not bolded, grammar/spelling errors, lack of infographics, pictures)		
Speaker Presentation (40 pts max)			
Doesn't read from notes verbatim, makes eye contact, smiles uses good audience connection techniques; your camera must be on so we can see you	10 (-5 pt. if not making eye contact, reading slides verbatim, etc.)		
Speaks loudly, clearly, and forcefully	10 (-5 pt. if too quiet or stumbles over words often)		
Answers questions appropriately, confidently	20 (-5 pt. if lacks confidence in the answer)		
Out of 50	Total from Page 2		
Out of 150	Total from Page 1		
Total (out of 200)	Total from both pages		

What did presenter/presentation do effectively? _____

Area/s of improvement? _____

Other Comments: _____

