"To benefit as many as possible" appears on the seal of the Academy of Nutrition and Dietetics (Academy). It is an even more relevant goal of the profession today than it was in 1940 when the seal was first adopted by what was then called the American Dietetic Association. The scope of professional practice is continually widening, and the knowledge base of nutrition is deepening. Since the first meeting in Cleveland, OH, in 1917, the Academy has grown to be the largest food and nutrition organization in the world. This growth has occurred because members have diverse educational and experiential foundations, which allow them to practice in a myriad of areas.

What is dietetics? What makes it a profession? Who are today’s Registered Dietitian Nutritionists (RDNs)? Who are today’s Nutrition and Dietetic Technicians, Registered (NDTRs)? Where do these professionals work? What do they do? What compensation and benefits do they enjoy in their positions? What are some of the issues facing the profession today? These are the questions that are addressed in this chapter.

What Is Dietetics?

At the center of the professional association seal (Figure 1-1) are images representing the three main characteristics of the profession: (1) a balance, representing science as the foundation of dietetics; (2) a caduceus, representing the close relationship between dietetics and medicine; and (3) a cooking vessel, representing cooking and food preparation. Surrounding these are a shaft of wheat, representing bread as the staff of life; acanthus leaves, representing growth and life; and a cornucopia, representing an abundant food supply.

The name of the association and its founding date are printed around the edge. The seal appears on registration certificates for both RDNs and
NDTRs, and on the gold member pin. Consider the following dictionary definitions of dietetics:

- “The scientific study of food preparation and intake”
- “The science of applying nutritional principles to the planning and preparation of foods and regulation of the diet in relation to both health and disease”

These definitions seem woefully inadequate for what the profession has become. The basis of dietetics is the firm belief that optimal nutrition is essential for the health and well-being of every individual. This is why dietetics is an important component of healthcare. A team effort by doctors, nurses, dietitians, and other healthcare providers is usually necessary to help a patient return to health. It is plausible that no other profession offers so many diverse opportunities outside the traditional healthcare arena as does the field of dietetics. Early dietetics practitioners were typically found in institutional kitchens, a position for which the dictionary definitions would have been adequate. Today, dietitians can be found almost anywhere! For this reason, a 2019 survey of dietetics practitioners provided a very broad definition of dietetics:

A dietetics-related position is considered to be any position that requires or makes use of your education, training, and/or experience in dietetics or nutrition, including situations outside of “traditional” dietetics practice.

What Is a Profession?

A general definition of a profession might be “an occupation for which preliminary training is intellectual in character, involving knowledge and learning as distinguished from mere skill, which is pursued largely for others and not merely for oneself and in which financial return is not an accepted measure of success.”

The Goals Committee of the Academy interpreted a profession as a calling requiring the following:

- Specialized knowledge and often long and intensive preparation
- Maintenance, by force of organization or concerted opinion, of high standards of achievement and conduct
What Is a Registered Dietitian Nutritionist?

A dietitian has been defined as “a professional person who is a translator of the science and art of foods, nutrition, and dietetics in the service of people—whether individually or in families or larger groups; healthy or sick; and at all stages of the life cycle.” Another definition proposed by the Academy is: “RDNs are the food and nutrition experts who can translate the science of nutrition into practical solutions for healthy living. RDNs use their nutrition expertise to help individuals make unique, positive lifestyle changes. They work throughout the community in hospitals, schools, public health clinics, nursing homes, fitness centers, food management, food industry, universities, research and private practice. RDNs are advocates for advancing the nutritional status of Americans and people around the world.”

Some titles need to be clarified at this point: dietitian; registered dietitian; registered dietitian nutritionist; nutritionist; and licensed dietitian. There is no difference between a registered dietitian (RD) and a registered dietitian nutritionist (RDN). The Academy and the Commission on Dietetic Registration (CDR) have given RDs the option to use RDN because it highlights expertise in nutrition which may be a more understandable term to the public than just “dietitian.” For the sake of simplicity, the acronym RDN will be used throughout this book.

An RDN has completed the required academic training (Chapter 3) and supervised practice program (Chapter 4), and has successfully passed the national credentialing exam. Additionally, RDNs must complete 75 hours of continuing education every 5 years and some must be licensed in the state where they work. There are no such requirements for the title “nutritionist”; the term has no standards of education or training. “All registered dietitians are nutritionists, but...
not all nutritionists are registered dietitians.” This means that almost anyone can use the title “nutritionist” with little or no training in the field—and many do. This is just one reason why many states have regulatory laws that either require or permit dietitians to be licensed if they wish to practice as a RDN in that state. A licensed dietitian (LD) or licensed dietitian nutritionist (LDN) is a professional who has been licensed by a specific state to ensure competence. Varying state requirements for licensure are frequently met through the same education, training, and national examination required for RDNs. Licensure will be discussed more in Chapter 5.

Some RDNs have additional certification in specialized areas of practice, such as pediatric nutrition (CSP, Board Certified Specialist in Pediatric Nutrition), pediatric critical care nutrition (CSPCC, Certified Specialist in Pediatric Critical Care Nutrition), obesity and weight management (CSOWM, Interdisciplinary Specialist in Obesity and Weight Management), renal nutrition (CSR, Board Certified Specialist in Renal Nutrition), sports dietetics (CSSD, Board Certified Specialist in Sports Dietetics), gerontological nutrition (CSG, Board Certified Specialist in Gerontological Nutrition), and oncology nutrition (CSO, Board Certified Specialist in Oncology Nutrition).

What Is a Nutrition and Dietetics Technician, Registered?

There is no difference between a dietetic technician, registered (DTR) and a nutrition and dietetics technician, registered (NDTR), again, if the professional wishes to showcase the nutrition aspect of their work. For the sake of simplicity, the acronym NDTR will be used throughout this book (Figure 1-2). NDTRs are trained in food and nutrition and should be an integral part of healthcare and foodservice management teams. Like RDNs, NDTRs must complete an academic program and a supervised practice experience, then pass a national written examination in order to use the title.7

The Academy provides this definition of the NDTR: “NDTRs are educated and trained at the technical level of nutrition and dietetics practice for the delivery of safe, culturally competent, quality food and nutrition services. They are nationally credentialed and are an integral part of healthcare and foodservice management teams. They work under the supervision of a registered dietitian nutritionist when in direct patient/client nutrition care; and they may work independently in providing general nutrition education to healthy populations.”7

Dietetics practice is based on the application of principles derived from the integration of knowledge from many disciplines. Successful dietetics practitioners, including both RDNs and NDTRs, apply skills and attitudes to translate this knowledge in order to help people achieve and maintain optimal health. Figure 1-3 is a graphic depiction of the knowledge areas, skills, and attitudes essential for successful dietetics practice.
Who Are Dietitians?

A 2019 survey of 8,765 dietetics practitioners, conducted by the Academy, found that 95% of dietetics professionals are female, with a median age of 41 years. The field is predominantly white; 10% of respondents indicated a race other than white and 6% identified themselves as Hispanic. The median number of years of work experience for RDNs was 12, and for NDTRs 10. All RDNs hold bachelor’s degrees, with 50% holding a master’s degree and 3% a doctorate. Forty-five percent of RDNs are members of the Academy, 39% have a state license, and 23% hold one or more specialty certifications.³

Fifty-five percent of NDTRs hold a bachelor’s degree or higher, and 27% are members of the Academy. Four percent of NDTRs have a state license, and 10% hold one or more specialty certifications.³
Where Do Dietetics Professionals Work and What Do They Do?

Dietetics practice can be divided into seven key areas: clinical—acute care/inpatient, clinical—ambulatory care, clinical—long-term care, food and nutrition management, community, consultation and business, and education and research. Within these seven areas, 60 different job titles account for 93% of all dietetics employment. The percentage breakdown for those working in these seven practice areas is shown in Table 1-1.
The following are the most common position titles in dietetics practice:

**Clinical Nutrition—Acute Care/Inpatient**
- Dietetic Technician, Clinical
- Clinical Dietitian
- Clinical Dietitian, Specialist—Bariatrics
- Clinical Dietitian, Specialist—Cardiac
- Clinical Dietitian, Specialist—Developmental Disorders
- Clinical Dietitian, Specialist—Diabetes
- Clinical Dietitian, Specialist—Eating Disorders
- Clinical Dietitian, Specialist—HIV/AIDS
- Clinical Dietitian, Specialist—Oncology
- Clinical Dietitian, Specialist—Psychiatric
- Clinical Dietitian, Specialist—Renal
- Clinical Dietitian, Specialist—Substance Abuse
- Clinical Dietitian, Specialist—Surgery
- Clinical Dietitian, Specialist—Transplant
- Pediatric/Neonatal Dietitian
- Nutrition Support Dietitian

**Clinical Nutrition—Ambulatory Care**
- Outpatient Dietitian, General
- Outpatient Dietitian, Specialist—Allergy
- Outpatient Dietitian, Specialist—Cardiac Rehabilitation
- Outpatient Dietitian, Specialist—Diabetes
- Outpatient Dietitian, Specialist—Eating Disorders
- Outpatient Dietitian, Specialist—Oncology
- Outpatient Dietitian, Specialist—Pediatrics

---

**Table 1-1**

**Percentage of Professionals in the Seven Practice Areas Within Dietetics**

<table>
<thead>
<tr>
<th>Practice Area</th>
<th>RDNs</th>
<th>NDTRs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Nutrition—Acute Care/Inpatient</td>
<td>40%</td>
<td>42%</td>
</tr>
<tr>
<td>Clinical Nutrition—Ambulatory Care</td>
<td>14%</td>
<td>0%</td>
</tr>
<tr>
<td>Clinical Nutrition—Long-Term Care</td>
<td>6%</td>
<td>8%</td>
</tr>
<tr>
<td>Food and Nutrition Management</td>
<td>9%</td>
<td>20%</td>
</tr>
<tr>
<td>Community</td>
<td>9%</td>
<td>18%</td>
</tr>
<tr>
<td>Consultation and Business</td>
<td>9%</td>
<td>2%</td>
</tr>
<tr>
<td>Education and Research</td>
<td>6%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Outpatient Dietitian, Specialist—Renal
Outpatient Dietitian, Specialist—Weight Management
Home Care Dietitian

Clinical Nutrition—Long-Term Care
Clinical Dietitian, Long-Term Care
Dietetic Technician, Long-Term Care

Food and Nutrition Management
Executive-Level Professional
Director of Food and Nutrition Services
Director of Clinical Nutrition
Clinical Nutrition Manager
Assistant Foodservice Director
School Foodservice Director
Dietetic Technician, Foodservice Management
Nutrition Informatics Specialist/Analyst

Community
Women, Infants, and Children (WIC) Nutritionist
Public Health Nutritionist
Cooperative Extension Educator/Specialist
School/Child Care Nutritionist
Correction Dietitian
Nutrition Coordinator for Head Start Program
Nutritionist for Food Bank or Assistance Program

Consultation and Business
Private Practice Dietitian—Patient/Client Nutrition Care
Consultant—Community and/or Corporate Programs
Consultant—Communications
Sales Representative
Public Relations and/or Marketing Professional
Corporate Dietitian
Research and Development Nutritionist
Manager of Nutrition Communications
Director of Nutrition

Education and Research
Instructor/Lecturer
Assistant Professor
Associate Professor
Professor
Administrator, Higher Education
Didactic Program Director
Dietetics Internship Director
Research Dietitian

Other Positions Not Listed

3
In summary, most RDNs are found in the following settings:

- **Hospitals** (Figure 1–4)
  - Educate patients about nutrition.
  - Provide nutrition support.
  - Manage medical nutrition therapy (MNT).
  - Oversee foodservice operations.

- **Schools**
  - Manage the foodservice operations to include purchasing food, supervising preparation, directing the staff, and controlling the budget (Figure 1–5).
  - Create healthy menus, update wellness programs, and create nutrition programming.

- **Community and Public Health Centers**
  - Educate, monitor, and advise various populations about healthy eating to improve their life quality.
  - Guide nutrition programs through organizations such as Head Start.

*Figure 1–4* A clinical registered dietitian nutritionist (RDN). © Stock-Asso/Shutterstock
Chapter 1  The Dietetics Profession

- **Senior Living Facilities**
  - Consult with Certified Dietary Manager, Certified Food Protection Professionals (CDM®, CFPPs®) about foodservice management to include menu evaluation.
  - Engage with the healthcare team to monitor the nutritional status of high-risk residents.

- **Fitness Centers, Sports Nutrition, and Corporate Wellness Programs**
  - Educate members and employees about nutrition and fitness.
  - Work with sports teams and dance companies to enhance members’ training and performance (Figure 1–6).

- **Food and Nutrition-Related Businesses**
  - Work in communications, consumer affairs, public relations, marketing, and product development.
  - Consult with chefs in both commercial and academic settings.
  - Provide point-of-sale nutrition education in supermarkets.

- **Universities**
  - Teach current and future members of the healthcare team to include physicians, physician assistants, nurses, dietetics students and interns, dentists, and others.
  - Engage in research.

- **Research Settings**
  - Direct and collaborate on experimental research to answer critical questions for food and pharmaceutical companies, universities, and hospitals.

*Figure 1-5* A RDN who works in school foodservice and one of her employees. © Monkey Business Images/Shutterstock
- **Private Practice and Consulting Services**
  - Contract with healthcare and food companies.
  - Provide services to restaurant and foodservice managers, food vendors and distributors, athletes, long-term care residents, and company employees.
  - Provide individualized nutrition counseling to clients in a variety of settings to include physician offices that provide MNT.

- **Culinary**
  - Combine the scientific and practical applications of food and nutrition.
  - Link their passions for both food and nutrition in dual careers as chefs and dietetics professionals.

- **Media**
  - Serve as formal spokespersons for the Academy or as experts on food and nutrition for multiple media outlets.
  - Engage as editors for both print and online publications or author books.

- **Integrative and Functional Medicine**
  - Focus on a holistic approach to wellness.
  - Personalize therapies centered on whole foods, specific supplements, and mind-body techniques.

- **Nutrition Informatics**
  - Retrieve, organize, store, and optimize use of data for enhanced problem-solving and decision-making in the food and nutrition arena.\(^\text{10}\)
NDTRs may also be found working independently or in teams with RDNs in a variety of work settings to include healthcare, business and industry, public and community health, foodservice, and research. NDTRs commonly work in:

- **Hospitals, HMOs, clinics, long-term care facilities, retirement communities, hospices, home healthcare agencies, and research facilities**
  - Help treat and prevent disease by assisting the RDN with multiple critical tasks.

- **Schools, day care centers, correctional facilities, restaurants, healthcare facilities, corporations, and hospitals**
  - Manage foodservice operations to include food purchasing and preparation, supervising employees, and teaching nutrition classes (Figure 1-7).

- **WIC programs, public health agencies, Meals on Wheels, and other community health programs**
  - Develop and teach nutrition classes for the specific population served.

- **Health clubs, weight-management clinics, and community wellness centers**
  - Educate clients about food, fitness, and health.

- **Food companies, contract food management companies, food vendors, and food distribution companies**
  - Develop menus, oversee foodservice sanitation and food safety, and prepare food labeling information and nutrient analysis.\(^\text{10}\)

![Figure 1-7](image.jpg) A NDTR teaching a nutrition class for preschoolers. Courtesy of Sharmin Sampat.
What Is the Salary Range for RDNs and NDTRs?

As is true for most professions, salary ranges and fees charged vary by region of the country, employment setting, scope of responsibility, and supply and demand. According to the professional association’s 2019 Compensation and Benefits Survey, the median annual income in the U.S. for RDNs who have been working at least 1 year is $68,000 and, for NDTRs who have been working in a position for at least 1 year, $45,800.3 The U.S. Bureau of Labor Statistics 2020 data reported the median salary for RDNs was $61,270 and the median salary for NDTRs in 2019 was $28,400.11 These discrepancies in salary exist based on timing of surveys, the population included, those reporting their salaries, and more. It is important to have an educated understanding of the wage and benefits landscape where you wish to be employed for the best snapshot of compensation in a specific setting. The statistics generated by the 2019 survey from the Academy show that the salary for both RDNs and NDTRs increases as the number of years of experience increases, as the level and scope of supervisory responsibility increases, and as the size of the budget that is managed increases. While a master’s degree will be required for all new RDNs in 2024, graduate degrees have minimal impact on salaries at this time. However, the area of practice does matter! The highest paying practice areas for RDNs are consultation and business, food and nutrition management, education, and research. The lowest paying areas are clinical nutrition, community nutrition, and long-term care. For NDTRs, the highest paying practice area is food and nutrition management with community nutrition positions paying the least.3 Again, survey your locale for salaries which can quickly change given the shifting political and economic horizons.

In addition to pay, fringe benefits are an important employment consideration. When compared with the benefits of other professional and technical employees in private industry, dietetics professionals’ benefits are very favorable.

What Are Some of the Current Issues Facing Dietetics Practice?

This is an exciting time to be a food and nutrition professional. According to the U.S. Bureau of Labor Statistics, the employment of dietitians and nutritionists is projected to grow 11% from 2018 to 2028, almost twice as fast as the average 5% for all occupations.11 The role of food in preventing and treating diseases, such as diabetes and heart disease, is well known. Understanding that lifestyle choices, such as diet and exercise, can make a dramatic difference in quality of life is widespread. People are eager for information that can give them an edge in competitive sports; improve their appearance; and make them feel better, live longer, and enjoy more productive lives. What we eat can dramatically affect our health, creating a demand for those who can provide accurate information. Everybody needs qualified dietetics professionals!
The Centers for Disease Control and Prevention (CDC) relays that “six in ten Americans live with at least one chronic disease, like heart disease and stroke, cancer, and diabetes” and that “four in ten adults have two or more.” These chronic diseases are often related to the worldwide health issue of obesity. In the U.S. alone, the obesity rate jumped from 30.5% in 1999–2000 to 42.4% in 2017–2018. A government-sponsored research study showed that the annual healthcare cost of obesity in the U.S. doubled in less than a decade and may be as high as $147 billion a year.

Job growth in healthcare continues to be strong. Between 2018 and 2028, positions in healthcare fields are expected to grow by 14%, almost three times that of other occupations. A number of factors accounts for this growth. The “graying of America” will create the need for more specialized medical care, home healthcare, and geriatric specialists. Also, the increasing focus on wellness and preventive medicine has contributed to the expanding healthcare field. According to one expert, “While fast food and customer service may churn out a greater total volume of new jobs, those in healthcare are almost as plentiful and offer better pay, prospects, and benefits, plus the stability of a nearly recession-proof industry.”

Job growth in dietetics and nutrition will result from an increasing emphasis on disease prevention through improved dietary habits. The aging population will boost demand for nutritional counseling in hospitals, residential care facilities, prisons, community health programs, and home healthcare agencies...and that is just one example! The public’s growing interest in nutrition, health, and prudent lifestyles will continue to increase demand. In addition, Medicare now covers MNT and some related services for those with diabetes and renal disease. Dietitians with specialized training and certifications beyond minimum requirements may enjoy even better job opportunities. Those specializing in renal disease, diabetes, or gerontology will benefit from the growing number of people with diabetes and the aging population.

Aside from patients who need MNT, opportunities abound for persons simply interested in better health. The 2020 COVID-19 pandemic, for example, resulted in more Americans cooking at home, often including their children in meal preparation. RDNs have reported anecdotally that their clients are taking better care of themselves in terms of food and lifestyle choices, and more people have become interested in where their food is sourced. Even in a jarring time, RDNs have found positive outcomes as they help clients who are coping with rising food costs, supply chain issues, income uncertainty, and food insecurity.

There may be some clouds on the otherwise rosy horizon of the healthcare industry. Cost-containment measures, such as budget cutting, downsizing, realignments, outsourcing, and mergers, may affect growth. Some predict that funding for Medicare programs will be reduced, forcing Medicare patients to pay for some costs themselves. Negative factors specifically affecting job opportunities in dietetics and nutrition include employers who may substitute...
less-educated and lower-paid workers to do nutrition-related work. Also, the
demand for nutrition counseling is related to the client’s ability to pay, either
out-of-pocket or through insurance reimbursement. Insurance coverage for
nutrition services varies widely. Hospitals and long-term care facilities employ
large numbers of RDNs and NDTRs, but they increasingly contract with outside
firms to run their foodservice operations.

Although dietetics practitioners are regarded as experts in nutrition, they
continue to lack public recognition of their knowledge and skills. While the
American public has increased its knowledge and understanding of food and
nutrition, misinformation abounds. Social media and popular magazines are full
of attention-grabbing, but often inaccurate, nutrition messages. Many people
lack the educational background to discriminate between fact and fiction. Many
believe that if it is in “print,” it must be true. Buyer, beware!

Summary

The horizon leans forward
Offering you space
To place new steps of change

—Excerpt from “On the Pulse of Morning,” 1993 presidential
inaugural poem by Maya Angelou

The scope of dietetics practice is almost limitless. The creation of new, exciting
positions that require food and nutrition education and training will continue
as long as members of the profession have the imagination and determination to
succeed.

“The world is happier, healthier, [and] better off because of the work you do,”
proclaimed Rabbi Harold S. Kushner to the dietetics professionals gathered at a
1991 dietetics association national conference. The work of dietetics is considered
a profession because it requires a specialized body of knowledge; because members
render specialized services to society; because their obligations to serve override
personal considerations; and because members consider competence, honor, con-
tinuing education, research, and sharing of knowledge for the common good to be
necessary.

Dietetics practice encompasses nutrition therapy, the food industry, health pro-
motion and disease prevention, foodservice systems, entrepreneurship, education,
and more. Applying their training and knowledge in the fields of science, leader-
ship, technology, research, and management, dietetics professionals communicate
and collaborate to provide food and nutrition services for individuals, groups, and
communities.
Dietetics practitioners work in private practices or hospitals, with patients referred by physicians for help in implementing necessary nutritional modifications. They serve as consultants in corporate wellness programs, weight loss programs, and eating disorder clinics. Professional athletes and athletic teams often have full-time RDNs on their training staffs.

Dietetics practitioners are also involved in scientific research and education. Increasing numbers of dietitians have careers in sales, marketing, and public relations. They work in the food industry; for pharmaceutical and computer companies; for software developers, pharmaceutical, and computer companies; and for equipment manufacturers. They are involved in many areas of community outreach, especially with pregnant women, women with infants and young children, and the elderly.

These practitioners are particularly qualified to manage foodservice operations in hospitals, nursing homes, colleges and universities, public schools, commercial restaurants, correctional facilities, catering operations, airline commissaries, and community programs. Interest is growing in combining nutrition credentials with other degrees, such as those in business, law, nursing, physical fitness, and the culinary arts.

Societal needs are best served by having a population that is adequately nourished. The profession of dietetics serves people by offering correct and current information so that individuals can make informed choices. Through their specialized education and training, dietetics professionals are uniquely qualified to “benefit as many as possible” in the global arena of food and nutrition.

Profile of a Professional
Aarti Batavia, MS, RDN, CLT, CFSP, IFMCP
Nutrition & Wellness Consulting LLC
Novi, MI

What is your favorite aspect of being a Registered Dietitian Nutritionist, working in your area of dietetics practice?
Being a RDN and certified functional medicine practitioner has been a rewarding profession intellectually, emotionally, and spiritually. It has helped me to see chronic health issues from a holistic perspective and understand my patients better. It has also been a means of ethical earning, helping the community and having leadership roles within our dietetics community. My favorite aspect about being a Registered Dietitian Nutritionist is to help individuals achieve their higher selves. Once the patients feel better, they do not have to think about their pain and suffering but rather focus on their family, personal goals, and other important aspects of their being which they were unable to do when they were unwell. It also gives me an opportunity to explore and share my passion for creating new recipes for my patients. It’s rewarding for me to experiment with food while creating interesting menus for my patients. Being an expert in the field of nutrition and functional medicine has also opened doors with
regards to speaking engagements. This helps me share my knowledge and experience with my fellow colleagues and students and elevates our profession.

What advice/wisdom do you have for students who are considering a career in dietetics?

1. Be honest and sincere with yourself.
2. Treat people with respect.
3. Network during FNCE and other nutrition-related conferences, seminars, and workshops.
4. Sky is the limit. Follow your heart and your dreams and you are bound to succeed.
5. Do only what you are passionate about.
6. Enjoy what you do. If it doesn’t make you happy, quit. Do yourself and people around you a favor and don’t make everyday a drag.
7. Be on top of your game. Research your subject well.
8. Play along and take small breaks.
9. Not sure if work–life balance exists but make sure you are centered.
10. Enjoy being on planet EARTH.
Profile of a Professional
Kyle J. Lamprecht, MS, RD, CSP, CSR, CD
Metabolic/Outpatient Pediatric Specialty Dietitian
University of Vermont Medical Center
Burlington, VT

What is your favorite aspect of being a Registered Dietitian, working in your area of dietetics practice?
My favorite aspect of being a RD is having the opportunity to influence our youth through nutrition education and interventions. Working in Pediatric Nephrology grants me the excitement and clinical intensity of renal nutrition as well as the humbling experience of supporting pediatric patients’ growth and development as well as families overall. RDs play an enormous role in the care of pediatric patients with complex conditions and I am beyond thankful to have the opportunity to impact these patients’ lives.

What advice/wisdom do you have for students who are considering a career in dietetics?
The field of dietetics is forever evolving with new opportunities and ways for nutrition professionals to impact lives for the better. Additionally, nutrition is preventative medicine, which continues to grow in importance and value within our healthcare system. If you have a passion for helping and healing others and believe in the power of food and nutrition, then a career in dietetics is your calling. We welcome fresh minds, energy, and passion to continue to drive our mission for improving global health and the well-being of all.

Selected Websites
- www.eatright.org (The public site of The Academy of Nutrition and Dietetics, the world’s largest organization of food and nutrition professionals)
- www.bls.gov (The U.S. Bureau of Labor Statistics has data about occupations, job growth, salaries, etc.)
- www.cdrnet.org (The Commission on Dietetic Registration is the credentialing agency for dietetics professionals in the U.S.)

Discussion Starters
1. What areas of practice interest you the most? What kinds of salaries are offered in these areas based on the geographic region where you want to work?

2. Dietetic Practice Groups (DPGs) are a good way to network with professionals who work in specific areas of dietetics. Refer to the list of DPGs in Chapter 8 and see if there are any which interest you. Do they have accessible websites? Are there practitioners in your community who are members
of these DPGs? If so, are you able to shadow them in their workplaces to start building your professional network?

3. Did any of the practice areas surprise you? Are there additional workplaces which *should* employ dietetics professionals and why?

References