

Having worked in an acute care hospital for 5 years and having educated newly graduated Dietetic Interns, I think this change in the scope of practice is crucial to improving the health of Canadians. For example, within the surgery unit of the hospital I worked, patients would be left without nutritional intervention for 7+ days in some circumstances. Being able to prescribe total parenteral nutrition (TPN) was crucial in not only improving their nutritional status but also overall medical condition, physical well-being (essential for rehab in some cases) and also helped reduce the length of hospital admissions. Expertise in Nutritional requirements for macro and micro nutrients is essential to the correct TPN Rx and Dietitians are experts in this area. Another example of improved patient care would hinge upon the RDs ability to monitor and change insulin and OAHA medications. Very often the patients are following their prescribed nutritional therapy but blood sugars are still not controlled. Sometimes with weight loss patients are having episodes of hypoglycemia. If RDs were able to adjust insulin and OAHA this would improve patient compliance and patient care.

I applaud the initiatives of Dietitians of Canada and support these changes.

Thank you,