



**Post Test**

*“Nutrition Therapy Across the Recovery Spectrum”*

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Credit: One (1) Continuing Education Credit Awarded

**Post-Test (For reference only. You must take and pass the test online for CE credit.)**

- 1) What is the Dietitian’s Role in treating people with eating disorders?
  - a. Assess intake
  - b. Assess need for weight restoration
  - c. Set meal plan
  - d. Challenge/Dispel myths & fears about food
  - e. Direct client to medical care to discern allergies vs food avoidance
  - f. All of the above
  
- 2) The dietitian’s goals are always the same as the patient’s goals.
  - a. True
  - b. False
  
- 3) Nutrition assessment of the Client does NOT include:
  - a. Eating disorder history
  - b. Relationship with mother and father
  - c. Severity of eating disorder behaviors
  - d. Frequency of purging (# of times a day)
  - e. How purging induced (finger, object, chemical)
  
- 4) A BMI goal of 18.5 is high enough to support recovery from an eating disorder.
  - a. True
  - b. False
  
- 5) Which of the following is a part of weekly goals?
  - a. Have the patient *write* in “I commit to...” form
  - b. Create structure and meal support
  - c. Create a plan for self-correction
  - d. Goals really don’t matter in nutrition counseling
  - e. a, b, and c
  
- 6) What are some indicators that patients are approaching their natural weight:
  - a. Menstruation returns/starts
  - b. Depression and anxiety improve
  - c. Body image improves
  - d. Thermoregulation returns
  - e. None of the above
  - f. All of the above
  
- 7) According to the CFC study, which patients improved in Intuitive Eating?
  - a. Those with Anorexia Nervosa
  - b. Those with Bulimia Nervosa
  - c. Those with EDNOS (OSFED)
  - d. All of the above
  
- 8) How many eating disorder behaviors can a patient keep and still recover?
  - a. 5
  - b. 2
  - c. 0
  - d. 10
  
- 9) What information should clients include on their Recovery Vision Board?
  - a. Desired weight
  - b. Foods to avoid
  - c. Marathon goal
  - d. How they want to experience food, their body and exercise in recovery
  
- 10) What can clinicians/dietitians do for self-care in this challenging arena?
  - a. Individual supervision
  - b. Accept blame for the patient’s pain and frustration in their recovery
  - c. Love, honor and care for your body
  - d. Keep patients even when they require a higher level of care
  - e. A & C