

IDA REGISTERED DIETITIAN EXAMINATION

8th February 2020

Paper II - (Nutrition, Dietetics and Food Service Management)

Time: 2 & 1/2 Hours

Marks: 100

Answer All Questions

(Section A – 20 Marks)

I) Answer the following: (10 x 2=20 marks)

1. Expand GRAS & ERAS
2. What is Acanthosis Nigricans, how is it reversible?
3. The % age of SFA in Coconut oil
 - a. 73
 - b. 63
 - c. 99
 - d. 91
4. Expand & give uses of RUCO
5. MCT is preferred form of fat in
 - a. Irritable Bowel Syndrome
 - b. Chyle Leak and Cholangiocarcinoma
 - c. Chronic Gastritis and Phynoderma
 - d. Hepatitis A
6. Glycemic Load of one exchange of which of the following is almost Zero
 1. Capsicum 2. Tomato 3. Spinach 4. All the three
7. Esophageal Varices is seen in-
 - a) NASH b) Celiac disease c) Crohn's Disease d) Cirrhosis
8. a) Neuro Nutrients are:
Glucose, B vitamins (B1, B6, B12) and _____
b) List long term complications Post organ transplantation
9. Tick correct answer: Potassium friendly fruits with equal potassium content
 - a) Apple & Guava b) Apple & Pear c) Guava & Papaya
10. Give barriers and contraindications for organ transplant w.r.t BMI

Section B – 50 marks:

II. All the questions are compulsory.

A. Choose the correct answer.

(5 X1 = 5 marks)

1. Dawn Phenomenon is associated with
 - a) Insulin resistance
 - b) Type 1 Dm
2. Vitamin B12 requirement in pregnancy _____ micrograms/day
 - i. 1.2
 - ii. 1.3
 - iii. 1.4
 - iv 1.5 (mcg)
3. Proteinuria is a classical symptom of
 - i. Lymphadenopathy
 - ii. Renal Calculi
 - iii. Nephrotic Syndrome
 - iv. Cirrhosis
4. Celiac disease immunogenic trigger in Barley is
 - i) Gliadin
 - ii) Secalin
 - iii) Hordein
5. 51.28 mmol of potassium is = ----- mg.

B. Answer the following

(2 X 5 = 10 marks)

1. Explain FODMAP Diet
2. Briefly outline Factors affecting Menu Planning
3. a. Expand IDPN and write formula for calculating calories from Dialysate
b. Nutrition prescription for CKD
4. Post Total Gastrectomy Nutrition Guidelines
5. Give the full form WASH, ISF, BAT, NRS

C. State if the following statements are True or False, giving reasons for your choice.

(5 X1 = 5 marks)

1. Sodium restriction is mandatory in CLD
2. Long term consumption of NNS predisposes to gut dysbiosis
3. AHA advises replacement of SFA with MUFA to reduce CVD risk.
4. Feeding when in severe Hypoglycemia and hyponatremia can increase the risk of Pulmonary aspiration.
5. Whole grams is to be avoided in Gout

D. Fill in the blanks:**(5x1 = 5 marks)**

1. Beetroot is an important source of a particular B vitamin _____
2. Mild Ascites reduces present body weight by ____ kgs for DBW calculations.
3. Expand PICCLE
4. Sodium free means _____mg/serving
5. Protein requirement in Adult with Nephrotic Syndrome is _____

E. Explain the following:**(5×5 = 25 marks)**

1. Significance of Nutrition in first 1000 days of life
2. a. Nutritional management of Decompensated Liver Disease
b. Nutritional management in Congestive Heart Failure
3. a. Nutritional Management of GERD with Metabolic Syndrome
b. Purine restricted Diet
4. Checklist for food safety- routine inspection in a hospital dietary kitchen

OR

Nutrition prescription and management of Chronic Pancreatitis

5. Write the values for the following
 - a. Almonds 15g = _____Kcals
 - b. Normal Serum Calcium:
 - c. Target Post Prandial value in GDM:
 - d. Normal BUN value:
 - e. Normal Serum Magnesium:

Section C – (30 marks)**(15 X 2 = 30 marks)****Note:**

ANSWER BOTH Q.1 AND Q.2.

BOTH QUESTIONS HAVE TWO CASES. FROM EACH QUESTION ANSWER ANY ONE CASE

Q. 1.**Case 1**

Mrs. S, 69 year old, Home Maker, known case of type 2 DM and Chronic Hypertensive, admitted with RBS - 350 mgs/dl, High grade fever, facial puffiness, minimal bilateral pleural effusion, polyuria and burning micturition, discharged on recovery from UTI followed by Pyelonephritis. Referred to Nutritionist for discharge diet.

Details:

Food habits: Mixed diet, Height: 151cm, Present Weight: 48 Kg

Hb - 12.5gm%, Blood urea 31 mg/dl, Creatinine: 1.1 mg/dl, Na: 130meq/l, K: 5.1 meq/l,

Albumin: 3.9gm/dl, FBS 75mgs/dl

Input / Output: adequate

Treatment: (Premeal) Inj. Actrapid 6 U – 6 U – 7U

(Bed Time) Lantus 5U

On statins and anti-hypertensive drugs

1. Interpret the case based on given information (1)
2. List down the MNT goals and MNT regimen for nutritional management. (2)
3. Calculate Energy, macronutrient and fluid requirement. (4)
4. Plan a day's diet (4)
5. List the foods to be avoided (2)
6. Explain the insulin action, peak and onset (2)

OR-**case-2**

A 57 year old male was diagnosed with Liver Cirrhosis 3 months back and is currently on medication. He has mild ascites and mild edema. He is also a K/C/O Type 2 DM and nephropathy. His caloric consumption is lesser than 1000Kcal/ day, due to nausea and dysgeusia. His daughter is educated and understands the importance of nutrition; hence wanted to meet a qualified Dietitian for his/her expert advice on Medical Nutrition Therapy for her father's recovery

Height 172 cms; Weight 75 Kgs (with mild ascites)

Biochemical parameters include:

FBS 157mg/dL PPBS- 197mg/dL: Sodium 137mEq/L Potassium 5.48mEq/L Urea 87mg/dL Creatinine 1.75 mg/dL

Explain the following:

- a. Nutrition assessment tool to be used with justification (2)
- b. Calculate Dry body weight (1)
- c. MNT goals and MNT regime (2)
- d. Nutritional plan to meet the requirements /day of (3)

Calories

Protein

Carbohydrate

Fat

Salt

Fluid

Potassium

e. Normal Biochemical values (2)

f. Meal plan: Draft a Menu with Exchange list, Justification and the list the foods to be included and excluded. (5)

Q-2:

case-1

A 58 year old female was admitted with symptoms of breathlessness and dysphagia. She is a K/C/O DCMP (EF-30%) and Type 2 Diabetes Mellitus for the last 15 years with HbA1c of 10.1% on anti-diabetic medication. For 2 days she has consumed lesser than 500 Kcal/day. The biochemical parameters are Urea- 229mg/dL; Creatinine- 3.58 mg/dL; Sodium- 116 mEq/L; Potassium- 5.4 mEq/L; Albumin- 1.8 g/dL; RBS- 272 mg/dL. With previous reports it was found that the renal parameters were within normal range 10 days ago. Nephrologists have requested a call over for the Dietitian to plan NG feed for the patient with Fluid restriction 1.2 L/day.

Height- 150 cms; Weight- 40Kgs

Explain the following:

Medical diagnosis (1)

Assessment tool to be used with justification (2)

Normal Biochemical Values (2)

Nutrition Care Process with Nutrition diagnosis (2)

Nutritional goals and MNT regimen (2)

Nutritional recommendations (2)

Discharge diet plan (4)

OR

Case-2

A 20 week pregnant woman, walks into a clinic with complaints of giddiness on and off throughout the day with mild oedema. Her biochemical parameters are FBS- 106mg/dL; 1 hour PP- 197mg/dL; Hb- 12.1%. Blood Pressure: 150/90mm of Hg.

The patient has irregular meal timings and sleep pattern. The patient is on Iron, folic acid and calcium supplements. Initiated on Tab. Aldactone for PIH

Height- 154 cms; Pre-pregnancy weight: 66 Kgs; Current weight: 69 Kgs

Explain the following:

- Pre pregnancy BMI (1)
- Target fasting and pre meal blood glucose levels (2)
 - 1 hour post meal
 - 2 hour post meal
- Nutrition Goals and MNT regimen (2)
- Nutritional recommendation with respect to the following to meet the daily requirements: (3)
 - Calories
 - Carbohydrates
 - Protein
 - Fibre
 - Salt
 - Carbohydrate distribution throughout the day
 - Fluids
 - Importance of physical activity

- Diet chart: (5)

Food groups	Foods to be included	Foods to be excluded
Cereals		
Pulses		
Vegetables		
Fruits		
Milk and milk products		
Non- vegetarian foods		
Fats & oils		
Artificial sweeteners		

- Justification: (2)

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