

PRACTICE TIPS: NDTRs and Autonomy

How do NDTRs know if they can work independently from an RDN?

All credentialed nutrition and dietetics practitioners are ethically and legally responsible for maintaining competence in professional activities and practicing within their legal and individual scope of practice.¹ The Revised [2024 Scope and Standards of Practice for Nutrition and Dietetics Technicians, Registered \(NDTR\)](#)² outlines the expectations for practice of the NDTR. Other resources identified in this Practice Tips provide additional information to assist in determining whether a desired activity may be performed. This is particularly important when practicing as a solo practitioner without direct access to a registered dietitian nutritionist (RDN) for consultation and referral when providing nutrition care to patients/clients. First consideration is always patient/client safety and quality of outcomes.

If you can answer “Yes” to all the following questions, you may be able to work autonomously – without direct supervision of an RDN when engaging in nutrition activities involving direct care to patients/clients. Present all your facts and research to your supervisor or the hiring organization’s representative.

<u>Questions</u>	<u>Resources to help you answer the questions.</u>
With the education, training, and applicable continuing education, am I competent to perform the activity? Has my competence been evaluated and documented in my personnel file?	CDR Resources <i>For practitioners who are not Academy members, resources may be purchased at the Academy Store or through the Journal</i> Definition of Terms list:³ Competence & Competent Level of Practice Scope and Standards of Practice for the NDTR <u>Practice Tips</u>: - The RDN/NDTR Team⁴ - Competence in Practice⁵ - Ethics Opinion: Personal Competence in Practice⁶
Does my level of academic preparation (plus any additional training and/or continuing education) give me the basis to engage safely and ethically in the activity?	ACEND 2022 Standards and Templates - Academy of Nutrition and Dietetics/CDR Code of Ethics ⁷
- Does the license, if applicable, or credential(s) I hold permit me to perform this activity or service? - Do I need any additional credentials/certificates/certifications to perform the activity? Examples could include food safety, cardiopulmonary resuscitation, fitness instructor, smoking cessation certificate, and certified fitness professional.	State Licensure Resources - Review applicable scopes and foundational documents of all credentials obtained from other organizations

Do I possess and have the proper documentation of the knowledge, skills, credentials, specialized training and relevant continuing education required to perform the desired activity?	Continuing Professional Education Obtain Primary Source Verification for each active credential and certification obtained
Do I understand the meaning of ‘Individual Scope of Practice’?	- Revised 2024 Scope and Standards of Practice for the NDTR Scope of Practice Decision Algorithm - Scope and Standards of Practice Learning Modules - Practice Tips: Legal Implications of Scope of Practice - Practice Tips: Competence in Practice
- Does the state where I work have a practice act for NDTRs? Is there a practice act for RDNs and does it contain language that addresses NDTRs? - Does this work overlap into the RDN’s or another profession’s scope of practice, (e.g., registered nurse, pharmacist, certified personal trainer, social worker)?	State Practice Acts
Are there any federal or state laws or regulations that impact my ability to perform this activity?	Centers for Medicare and Medicaid Services (CMS) Appendix to CMS regulations for hospitals, long term care facilities, renal dialysis centers, hospice and home care CDR Accreditation and Regulation resources
Have I investigated my organization’s policies, procedures, job description, and applicable practice guidelines?	- Seek help in identifying these answers from your supervisor and/or department director or the organization’s Human Resources department. - Review departmental policies and procedures, and other organizational policies that relate to NDTR functions.
Do I need a personal liability insurance policy to address malpractice and professional liability for the services I wish to perform? (Discounts through the Member Advantage Program (eatrightpro.org))	Investigate your organization’s liability insurance coverage to determine if you will be covered for this activity as part of your job responsibilities or if you need personal malpractice liability insurance.

What about nutrition counseling?

Review definition for Nutrition Intervention and Medical Nutrition Therapy in the [Definition of Terms](#)

Nutrition Counseling is one of the Nutrition Intervention domains within the Nutrition Care Process along with Nutrition Education. Medical Nutrition Therapy is in-depth, evidence-based, individualized nutrition care tailored to manage a disease, injury, or condition. Nutrition education provides instruction or training in a skill or imparts knowledge to help patients/clients voluntarily manage or modify food, nutrition, and physical activity choices and behavior to maintain or improve health.

According to the Scope and Standards of Practice for the Nutrition and Dietetics Technician, Registered (NDTR), NDTRs “work under the clinical supervision of the RDN when engaged in direct patient/client nutrition care, in any setting”¹ and may work independently in providing general nutrition education to healthy populations. The Revised 2024 Scope and Standards of Practice for NDTRs Figure 4 Nutrition Care Process and Workflow: Roles of Registered Dietitian Nutritionists and Nutrition and Dietetics Technician Registered clearly outlines the role of the NDTR as part of the RDN-NDTR team when providing nutrition care to patients/clients (see figure below). The RDN is ultimately responsible and accountable to the patient/client, employer/organization, and regulator for nutrition activities assigned to NDTRs and other technical and support staff.¹

In practice settings where an RDN may not be directly involved (e.g., sports facility, community/non-profit organization, or medical/health clinic/office), the NDTR “is guided by the NDTR’s individual scope of practice and requirements specified in regulations, employer organization policies and procedures, and state practice acts for RDNs or other disciplines, when applicable”.¹ Guidance for which roles can be undertaken should stem from the NDTR’s knowledge, skills, demonstrated and documented competence, and compliance with the Code of Ethics, that states “Nutrition and dietetics practitioners shall recognize and exercise professional judgement within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate”.⁶ Additional education, skills training beyond entry-level education and supervised practice, e.g., Certificate of Training in Obesity for Pediatrics and Adults, attainment of a certified health coach credential brings enhanced qualifications for roles where the NDTR credentialed practitioner may be qualified.

Competent practitioners understand the opportunities and boundaries of their individual scope of practice. When nutrition education activities cross into in-depth individualized nutrition counseling that incorporates the Nutrition Care Process and workflow elements, the NDTR acknowledges and advocates for consultation with or referral to an RDN to support safe and quality nutrition care.

Being able to articulate qualifications, training, experience, and continuing education to qualify for roles, and scope of practice in relation to an RDN is valuable and important for employers who hold legal responsibility for activities delegated/assigned to staff members.

Role delineation for the RDN and NDTR in performing the steps of the NCP and workflow elements are outlined in the below chart. This process applies to any practice setting where the NCP and workflow elements are used and/or medical nutrition therapy (MNT) encompassing nutrition diagnosis and individualized nutrition counseling for prevention and treatment of acute or chronic diseases or conditions is the focus of care.¹ For more information on roles of the RDN and NDTR in the Nutrition Care Process and Workflow, see the table below from the Revised [2024 Scope and Standards of Practice for NDTRs](#).²

Care Processes and Workflow elements	RDN Role	NDTR Role
Nutrition Screening	Identify evidence-based screening criteria/tool according to the patient/client population (adult or pediatric), collaborate for incorporation into health record system when screening completed by others, and review reported nutrition screening data or incorporate screening into nutrition assessment	Review nutrition screening completed by others or obtain and document screening data
Nutrition Assessment and Reassessment	Perform and document results of initial and follow-up assessment(s)	Per RDN request or standard procedure, obtain and document specified data to contribute elements of the nutrition assessment or reassessment for completion by the RDN
Nutrition Diagnosis	Determine nutrition diagnosis(es)	Per RDN-assigned ^a task, communicate and provide input to the RDN
Nutrition Intervention Plan of Care	Determine or recommend nutrition prescription and initiate interventions such as Medical Nutrition Therapy (MNT). When applicable, adhere to disease or condition-specific protocol orders initiated by the referring practitioner	Implement/oversee standard operating procedures; assist with implementation of individualized patient/client/customer interventions and education as assigned ^a by the RDN
Nutrition Monitoring and Evaluation	Determine and document outcome of interventions reflecting input from all sources ^b	Implement/oversee duties performed by other nutrition and foodservice staff; monitor patient/client tolerance and acceptance of meals, snacks, nutritional supplements; document per procedure; and report to the RDN and other team members the results and observations of monitoring activities
Discharge Planning and Transitions of Care	Coordinate and communicate nutrition plan of care for patient/client discharge and/or transitions of care	Assist with or provide information as assigned ^a by the RDN

^a-In health care and other settings providing individualized patient/client care and medical nutrition therapy, the RDN or clinically qualified nutrition professional is ultimately responsible and accountable to the patient/client/advocate, employer/organization, consumer/customer, and regulator for nutrition activities assigned to NDTRs and other technical, professional and support staff.

^b-Patient/client, family, caregiver, guardian, advocate, nutrition and foodservice staff, interprofessional team members.

Figure 4. Nutrition Care Process and Workflow: Roles of Registered Dietitian Nutritionists (RDNs) and Nutrition and Dietetics Technicians, Registered (NDTRs).²

CASE STUDIES – See companion document to this Practice Tips

References:

1. Peregrin T. The ethics of competence, a self-assessment is key. *J Acad Nutr Diet*. 2022;122(5):1049-105
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3. Definition of terms. Commission on Dietetic Registration. Accessed October 17, 2025. <https://www.cdrnet.org/definitions>.
4. Practice Tips: The RDN/NDTR Team. Commission on Dietetic Registration. Accessed October 17, 2025. <https://www.cdrnet.org/tips>.
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6. Gates GE, Amaya L. Ethics opinion: Registered dietitian nutritionists and nutrition and dietetics technicians, registered are ethically obligated to maintain personal competence in practice. *J Acad Nutr Diet*. 2015;115(5):811-815.
7. 2018 Code of Ethics for the Nutrition and Dietetics Profession. Academy of Nutrition and Dietetics (Academy)/Commission on Dietetic Registration (CDR). Accessed October 17, 2025. [Code of Ethics - Commission on Dietetic Registration \(cdrnet.org\)](#)