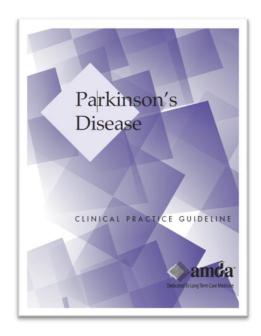
Parkinson's Disease Clinical Practice Guideline



Continuing Professional Education Program Self-Study Course for Registered Dietitian Nutritionists, Nutrition and Dietetics Technicians, Registered, and Certified Dietary Managers

Written by Liz Friedrich, MPH, RD, CSG, LDN, FAND Edited by Becky Dorner, RDN, LD, FAND



Your Premier Senior Nutrition Resource

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Acknowledgements

Continuing Professional Education Program Self-Study Course

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Accreditation Information

Becky Dorner & Associates is a Continuing Professional Education (CPE) Accredited Provider (NU004) with the Commission on Dietetic Registration (CDR).

We maintain records of course completions for a period of 7 years.

Registered Dietitian Nutritionists (RDN), Registered Dietitians (RD), Dietetic Technicians, Registered (DTR); Nutrition and Dietetic Technicians Registered (NDTR): After successfully completing the self-testing portion of this continuing education package, a certificate of completion is provided for your portfolio. Place the certificate in your portfolio for your records. It is the individual's responsibility to update personal CDR portfolio records, keep all documentation including program description/syllabus, and certificates of completion in case of an audit to prove that every CPE program submitted is valid, appropriate or worthy of CPE for an RDN and/or NDTR.

Certified Dietary Managers (CDMs): CDMs may complete a program and self-report it in their Certifying Board for Dietary Managers (CBDM) record. It is the individual's responsibility to keep all documentation including proof of attendance, program description/syllabus, and certificates of completion in case of an audit to prove that every CE program submitted is valid, appropriate or worthy of CE for a CDM.

Course Expiration Date: 11-5-20 Continuing Professional Education Hours: 1.5

This course and test must be completed prior to this date. You will receive your certificate upon successful completion of the online test (see *Instructions for Obtaining Continuing Professional Education Certificate* on the following pages).

Parkinson's Disease in the Long Term Care Setting: Clinical Practice Guideline

by The American Medical Directors Association, 2010.

You should have received the copy of this material. It is your responsibility to review the material thoroughly prior to taking the continuing professional education self-assessment test.

Course Description

Parkinson's disease (PD) is an age-related, degenerative neurological disorder. Patients with PD are substantially more likely to live in nursing homes than are adults in the general population. The prevalence of PD in nursing homes is estimated to be about 5% to 10%. The disease is slowly progressive, and once symptoms occur, the mean life expectancy is 15 years. The severity of PD disease course varies widely; some patients may be only slightly disabled 15 to 20 years after diagnosis, whereas others may be completely disabled after 10 years. PD reduces life expectancy because of an increased incidence of factors such as motor disorders, dysphagia with aspiration pneumonia, infection, dementia, and fall-related injuries.

The AMDA *Parkinson's Disease in the Long-Term Care Setting Clinical Practice Guideline* outlines information that will allow clinicians to evaluate causes of and determine interventions for Parkinson's disease, including disease and symptom management to allow the highest possible functional status and quality of life.

Objectives

Upon completion of this program, participants will:

- 1. Recognize signs and symptoms of Parkinson's disease.
- 2. Be able to state 3 non-pharmacological treatments for Parkinson's disease.
- 3. Be able to state 3 complications/comorbidities of Parkinson's disease.

CDR Learning Level: II

Learning Needs Codes/Practice Competencies

3050 Feeding, swallowing, dentition

- 10.2 Implements the Nutrition Care Process to ensure individual health goals are established, monitored and achieved while adhering to the Standards of Practice in Nutrition Care for RDNs
- 10.2.3 Analyzes and synthesizes the assessment data to identify nutrition problems following the Standards of Practice in Nutrition Care for RDNs.
- 10.2.4 Integrates foundational dietetics knowledge with critical appraisal of assessment data to diagnose nutrition problems (using problem solving, etiology, signs and symptoms [PES] statements), which can be resolved or improved through treatment or nutrition intervention.
- 10.2.5 Develops nutrition prescription to communicate required food and nutrient needs.
- 10.2.8 Establishes the plan of care, directly addressing the nutrition diagnosis in collaboration with the patient in defining the time, frequency and duration of the intervention.
- 10.2.9 In collaboration with the client and interdisciplinary team (including NDTRs), selects and implements current and evidence-based nutrition interventions and patient education.
- 10.2.10 Monitors and identifies factors affecting patient progress in meeting goals.
- 10.2.11 Monitors, identifies and adjusts the intervention based on patient progress in meeting established goals
- 10.2.12 Establishes new goals and a new plan of care when original or interim goals are met.
- 10.4 Applies knowledge of the interrelationship and impact of pharmacotherapy, dietary supplements, functional foods and nutrients on health and disease in accordance with Scope of Practice and Standards of Professional Performance for RDNs.
- 10.4.2 Applies knowledge of pharmacotherapy and its effect on nutrient absorption, utilization and metabolism when developing and/or revising the plan of care.
- 10.4.2 Recognizes and communicates any potential adverse drug-nutrient interaction to the appropriate professional.

- 10.4.3 Evaluates, educates and counsels on the interrelationship and impact of pharmacotherapy on nutrient absorption.
- 10.4.4 Makes recommendations for the appropriate use of vitamin and mineral supplementation in the management of health and disease.
- 10.4.5 Adheres to legislation, regulations, standards and organization policies related to recommending, prescribing and dispensing vitamins and minerals, dietary supplements, functional foods and medical nutrition foods/products.

5040 Long-term, intermediate, assisted living

- 8.1 Interprets and applies current food and nutrition science and principles in dietetics practice.
- 8.1.3 Integrates knowledge of macronutrients and micronutrients for absorption, digestion and metabolism throughout the life span in practice.
- 8.1.4 Demonstrates knowledge of nutrient requirements throughout the life span and their role in health promotion and disease management.
- 8.1.5 Applies medical nutrition therapy in disease prevention and management.
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5300 Neurological: stroke, Alzheimer's dementia, Parkinson's, spinal cord injuries

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5410 Client protocols, clinical guidelines

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Other Learning Need Codes that Might Apply:

4190 Elderly nutrition 5100 Elderly

Additional Learning Needs Codes and Performance Indicators/Practice Competencies may also apply.

Instructions for Obtaining Continuing Professional Education (CPE) Certificate

Each participant must review the material provided, take and pass an online test (a grade of 70% is required), and complete a simple evaluation.

To obtain your CPE certificate for this course, please follow these instructions:

- 1. Review the course description, objectives, CDR Learning Needs Codes and Practice Competencies/Performance Indicators.
- 2. Carefully review the contents of this program. Keep in mind the practical applications it has for you in your individual setting. The focus is to increase your knowledge and application of the subject matter.
 - a. Click on "Test and CEU Certificate", and fill in your name, facility name, and state
 - b. Take the test. For multiple choice questions select the one best answer from the choices given. A passing grade of 70% or more is required. You may re-take the test as many times as needed. If you are interrupted and cannot finish the test, you can save the test and come back later to finish it.

Note: The test questions are also included at the end of this document if you would like to review them in advance of taking the test online.

- 3. Upon successfully completing the test, you will automatically be directed to the evaluation.
 - a. Simply enter your email address and complete the evaluation.
 - b. When finished, click "Submit Survey."
- 4. Click on either "print" or "download your certificate" to generate the CPE Certificate with all of the course information including your name.
- 5. Remember to input the information on this course into your CDR (or CBDM) portfolio.

Continuing Professional Education Self-Assessment Test

KK was diagnosed with Parkinson's shortly after he retired. After living independently for 10 years, his disease progressed and after a trip to the ER following a fall he now requires skilled nursing care. He is alert and oriented and able to communicate, but has physical complications of Parkinson's disease that include difficulty ambulating and feeding himself. Upon admission to the hospital he was diagnosed with aspiration pneumonia and was on antibiotics. KK is now 77 years old. His comorbidities include depression and hypertension. He is 72 inches tall and weighs 165 pounds. He says he has lost weight in the past few months but he is not sure why. His medications include Carbidopa/Levadopa, an Exelon patch, Remeron, and Norvasc. He was admitted to the facility on a puree diet with nectar-thick liquids.

1.	KK's decreased ability to feed himself is most likely related to his	, which is
	a symptom of Parkinson's disease.	

- a. Loss of muscle mass
- b. Dysarthria
- c. Gait disorder
- d. Tremor
- 2. Which of the following nutrients can compete for absorption with Levodopa?
 - a. Protein
 - b. Fat
 - c. Carbohydrate
 - d. Water
- 3. KK has been experiencing constipation since he was admitted to the facility. The registered dietitian nutritionist (RDN) will encourage plenty of fluids, as well as

a. 25-40 grams of fiber daily.

b. 30-40 grams of fiber daily.

c. 25-35 grams of fiber daily.

d. 20-25 grams of fiber daily.

4.	Parkins a. b. c.	s have determined that KK might benefit from to treat his son's disease. More sleep Weight loss Weight gain Exercise
5.	status a. b. c.	disease becomes more advanced, KK is at risk for altered nutritional and Urinary tract infections Pressure ulcers Increase in his metabolic rate Unplanned weight gain
6.	increas he mig a. b. c.	few months in the facility, KK's disease progresses and he has become singly ill and disabled. His physician has met with the family to suggest that ht be a candidate for referral to a Gastroenterologist. Palliative care specialist. Neurologist. Urologist.
7.	a. b. c.	wallowing problem put him at high risk for which of the following? Urinary tract infections Unplanned weight loss Nausea Cognitive decline
8.	a. b.	al nutrition and hydration might be an option for KK if: It is consistent with the known values and preferences of KK and his family. His physician thinks it is necessary and he/she convinces the family. It is covered by KK's payor source.

d. The risks outweigh the benefits.