

National Commission for Allied and Healthcare Professions

COMPETENCY BASED CURRICULUM

"NUTRITION AND DIETETICS"



As per the NCAHP Act -2021

APPROVED SYLLABUS ISSION FO 2025

Ministry of Health & Family Welfare

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LIST OF ABBREVIATIONS

ACEND	Accreditation Council for Education in Nutrition and Dietetics
AHP	Allied and Healthcare Professional
AI	Artificial Intelligence
AWS	Anganwadi Centre
BMI	Body mass index LED AND
BND	Bachelor of Nutrition and Dietetics
CATS	Credit Accumulation and Transfer System
CBCS	Choice-Based Credit System
CBD	Case-based discussion
CEX	Case Evaluation Exercise
CGPA	Cumulative Grade Point Average
CL	Credit for Lecture
CME	Continuing Medical Education
CNE	Continuing Nutrition Education
CNV	Copy number variations
СР	Credit for Practical
CPU	Central Processing Unit
DNA	Deoxyribonucleic acid
DOPs	Direct observation of procedures
EAR	Estimated Average Requirement
ECTS	European Credit Transfer System
ENA	Essential Nutrition Actions
FFA	Free fatty acids
GALT	Gut Associated Lymphoid Tissue
GRS	Genetic Risk Scores
НАССР	Hazard Analysis and Critical Control Points
IBD	Irritable Bowel Syndrome
ICAHP	International Community for Alternative and Holistic Professionals
ICDA	International Confederation of Dietetic Associations
ICDS	Integrated Child Development Services
ICMR	Indian Council of Medical Research

ICT	Information and communication technology
ICU	Intensive Care Unit
IECT	Information Electronics and Communication Technology
LAN	Local area network
LL	Lifelong Learning
MAM	Moderate acute malnutrition
MASLD	Metabolic dysfunction-associated steatotic liver disease
MNA	Mini Nutrition Assessment
MND	Masters of Nutrition and Dietetics
MOUs S	Memorandum of Understanding
MUAC	Mid-upper arm circumference
MUST	Malnutrition Universal Screening Tool
NAAC	National Assessment and Accreditation Council
NCAHP	National Commission for Allied & Healthcare Professions
NCD	Non-communicable diseases
NEET	The National Eligibility cum Entrance Test
NFHS	National Family Health Survey
NHM	National Health Mission
NIN	National Institute of Nutrition
NNMB	National Nutrition Monitoring Bureau
NSS	National Social Service
NSSO	National Sample Survey Organisation
OPD	Outpatient Department
OPSE	Objective Structured Practical Examination
OSCE	Objective Structured Clinical Examinations
OSLER	Objective Structured Long Examination Record
HP	Hours for Practical
RAC	Research Advisory Committee
RDA	Recommended Dietary Allowance
RNA	Ribonucleic acid
RTC	Ready to cook
RT	Ready to eat
SAM	Severe acute malnutrition

SDGs	Sustainable Development Goals
SDL	Self-directed learning
SGA	Subjective Global assessment
SNP	Single nucleotide polymorphism
UGC	University Grants Commission
URL	Uniform Resource Locator
VDU	Visual Display Unit ED AND
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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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Chapter 1

Introduction to the Handbook

The report 'From Paramedics to Allied Health Professionals: Landscaping the Journey and Way Forward' which was published in 2012, marked the variance in education and training practices for the allied and healthcare courses offered by institutions across the country. This prompted the Ministry of Health and Family Welfare to envisage the creation of national guidelines for the education and career pathways of allied and healthcare professionals, with a structured curriculum based on skills and competencies. Thus, this handbook has been designed to familiarize universities, colleges, healthcare providers as well as educators offering allied and healthcare courses with these national standards.

Individually created for different professional groups of allied and healthcare, this handbook aims to reduce the variation in education by comprising a standardized curriculum, career pathways, nomenclature, and other details for each profession. The change from a purely didactic approach will create better-skilled professionals and improve the quality of overall patient care. In the absence of a national standard-setting authority, this handbook can also guide the thousands of young adults who choose healthcare as a profession – not as doctors or nurses but to play several other critical roles – on the appropriate course of action to enable them to be skilled allied and healthcare professionals of the future.

Who is an Allied and Healthcare Professional?

The Ministry of Health and Family Welfare, accepted in its entirety the definition of an allied and healthcare professional based on the aforementioned report, though the same has evolved after multiple consultations, and the recommended definition is now as follows-

'Allied and healthcare professionals (AHPs) include individuals involved with the delivery of health or healthcare-related services, with qualification and competence in therapeutic, diagnostic, curative, preventive, and/or rehabilitative interventions. They work in multidisciplinary health teams in varied healthcare settings including doctors (physicians and specialists), nurses, and public health officials to promote, protect , treat, and/or manage a person('s) physical, mental, social, emotional, environmental health and holistic well-being.

Since the past few years, many professional groups have been interacting and seeking guidance on all those who would qualify under the purview of "allied and healthcare professionals". Currently, the Government is regulating the allied and healthcare system by NCAHP Act, 2021. However, this number of allied and healthcare professions is subject to changes and modifications over time, particularly considering how quickly new technologies and new clinical avenues are expanding globally, creating newer cadres of such professionals.

Scope and need for allied and healthcare professionals in the Indian healthcare system

The quality of medical care has improved tremendously in the last few decades due to the advances in technology, thus creating fresh challenges in the field of healthcare. It is now widely recognized that health service delivery is a team effort involving both clinicians and non-clinicians and is not the sole duty of physicians and nurses. Professionals who can competently handle sophisticated machinery and advanced protocols are now in high demand. Diagnosis is now so dependent on technology, that allied and healthcare professionals (AHPs) are vital to diagnosis and successful management.

Effective delivery of healthcare services depends largely on the nature of education, training, and appropriate orientation towards community health of all categories of health personnel, and their capacity to function as an integrated team. As the Indian government aims for Universal Health Coverage, the lack of skilled human resources may prove to be the biggest impediment in its path to achieving targeted goals. The benefits of having AHPs in the healthcare system are still unexplored in India. Although an enormous amount of evidence suggests that the benefits of AHPs range from improving access to healthcare services to a significant reduction in the cost of care, the Indian healthcare system still revolves around the doctor-centric approach. The privatization of healthcare has also led to an ever-increasing out-of-pocket expenditure by the population. However, many examples assert the need for skilled allied and healthcare professionals in the system, such as in the case of stroke survivors, it is the support of AHPs that significantly enhances their rehabilitation, and long-term treatment ensures a return to normal life. AHPs also play a significant role in caring for patients who struggle mentally and emotionally in the current challenging environment and require mental health support; and help them return to well-being. Children with communication difficulties, the elderly, cancer patients, patients with long-term conditions such as diabetes, people with vision problems, and amputees; the list of people and potential patients who benefit from AHPs is indefinite.

Thus, the breadth and scope of the allied and healthcare practice varies from one end to another, including areas of work listed below:

- 1. Across the age span of human development from neonate to old age;
- 2. With patients having complex and challenging problems resulting from systemic illnesses such as in the case of diabetes, cardiac abnormalities/conditions, and elderly care to name a few;
- 3. Towards health promotion and disease prevention, as well as assessment, management, and evaluation of interventions and protocols for treatment;
- 4. In a broad range of settings from a patient's home to a community, primary care centers, tertiary care settings; and
- 5. With an understanding of the healthcare issues associated with diverse socio-economies and cultural norms within the society.
- 6. To provide management and rehabilitative therapies to patients/ individuals where non-surgical treatments are indicated or advocated.

Learning goals and objectives for allied and healthcare professionals

The handbook has been designed with a focus on performance-based outcomes at different levels. The learning goals and objectives of the undergraduate and graduate education program will be based on performance expectations. They will be articulated as learning goals (why we teach this) and learning objectives (what the students will learn). Using the framework, students will learn to integrate their knowledge, skills, and abilities in a hands-on manner in a professional healthcare setting. These learning goals are divided into nine key areas, though the degree of required involvement may differ across various levels of qualification and professional cadres:

- 1. Clinical care
- 2. Communication
- 3. Membership of a multidisciplinary health team
- 4. Ethics and accountability at all levels (clinical, professional, personal and social)
- 5. Commitment to professional excellence
- 6. Leadership and mentorship
- 7. Social accountability and responsibility
- 8. Scientific attitude and scholarship (only at a higher level- PhD)
- 9. Lifelong learning

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1. Clinical Care

Using a patient/family-centered approach and the best evidence, each student will organize and implement the prescribed preventive, investigative, and management plans; and will offer appropriate follow-up services. Program objectives should enable the students to:

- 1) Apply the principles of basic science and evidence-based practice
- 2) Use relevant investigations as needed
- 3) Identify the indications for basic procedures and perform them in an appropriate manner
- 4) Provide care to patients efficiently and in a cost-effective way in a range of settings, and maintain foremost the interests of individual patients
- 5) Identify the influence of biological, psycho-social, economic, and spiritual factors on patients' well-being and act in an appropriate manner
- 6) Incorporate strategies for health promotion and disease prevention with their patients.

2. Communication

The student will learn how to communicate with patients/clients, caregivers, other health professionals, and other members of the community effectively and appropriately. Communication is a fundamental requirement in the provision of health care services. Program objectives should enable the students to:

- 1) Provide sufficient information to ensure that the patient/client can participate as actively as possible and respond appropriately to the information
- Discuss the diagnosis and options with the patient, and negotiate appropriate treatment plans in a sensitive manner that is in the patient's and society's best interests
- 3) Explain the proposed healthcare service its nature, purpose, possible positive and adverse consequences, limitations, and reasonable alternatives wherever they exist
- 4) Use effective communication skills to gather data and share information including attentive listening, open-ended inquiry, empathy, and clarification to ensure understanding
- 5) Appropriately communicate with, and provide relevant information to, other stakeholders including members of the healthcare team
- 6) Use communication effectively and flexibly in a manner that is appropriate for the reader or listener
- 7) Explore and consider the influence that the patient's ideas, beliefs, and expectations have during interactions with them, along with varying factors such as age, ethnicity, culture, and socioeconomic background

- 8) Develop efficient techniques for all forms of written and verbal communication including accurate and timely record-keeping
- 9) Assess their communication skills, develop self-awareness, and be able to improve their relationships with others
- 10) Possess skills to counsel for lifestyle changes and advocate health promotion
- 11) Membership of a multidisciplinary health team
- 12) The student will put a high value on effective communication within the team, including transparency about aims, decisions, uncertainty, and mistakes. Team-based health care is the provision of health services to individuals, families, and/or their communities by at least two health providers who work collaboratively to accomplish shared goals within and across settings to achieve coordinated, high-quality care. Program objectives will aim at making the students able to:
- Recognize, clearly articulate, understand, and support shared goals in the team that reflect patient and family priorities
- Possess distinct roles within the team; to have clear expectations for each member's functions, responsibilities, and accountabilities, which in turn optimizes the team's efficiency and makes it possible for them to use division of labor advantageously, and accomplish more than the sum of its parts
- Develop mutual trust within the team to create strong norms of reciprocity and greater opportunities for shared achievement
- Communicate effectively so that the team prioritizes and continuously refines its communication channels creating an environment of general and specific understanding
- Recognize measurable processes and outcomes, so that the individual and team can agree on and implement reliable and timely feedback on successes and failures in both the team's functioning and the achievement of their goals. These can then be used to track and improve performance immediately and over time.

3. Ethics and accountability

Students will understand core concepts of clinical ethics and law so that they may apply these to their practice as healthcare service providers. Program objectives should enable the students to:

- 1) Describe and apply the basic concepts of clinical ethics to actual cases and situations
- 2) Recognize the need to make healthcare resources available to patients fairly, equitably, and without bias, discrimination, or undue influence

- 3) Demonstrate an understanding and application of basic legal concepts to the practice
- 4) Employ professional accountability for the initiation, maintenance, and termination of patientprovider relationships
- 5) Demonstrate respect for each patient's rights to autonomy, privacy, and confidentiality.

4. Commitment to professional excellence

The student will execute professionalism to reflect in his/her thoughts and actions a range of attributes and characteristics that include technical competence, appearance, image, confidence level, empathy, compassion, understanding, patience, manners, verbal and non-verbal communication, an anti-discriminatory and non-judgmental attitude, and appropriate physical contact to ensure safe, effective and expected delivery of healthcare. Program objectives will aim at making the students able to:

- Demonstrate distinctive, meritorious, and high-quality practice that leads to excellence and that depicts commitment to competence, standards, ethical principles, and values, within the legal boundaries of practice
- 2) Demonstrate the quality of being answerable for all actions and omissions to all, including service users, peers, employers, standard-setting/regulatory bodies, or oneself
- 3) Demonstrate humanity in the course of everyday practice by having respect (and dignity), compassion, empathy, honor, and integrity
- Ensure that self-interest does not influence actions or omissions, and demonstrate regard for service users and colleagues

5. Leadership and mentorship

The student must take on a leadership role where needed to ensure clinical productivity and patient satisfaction. They must be able to respond autonomously and confidently to planned and uncertain situations and should be able to manage themselves and others effectively. They must create and maximize opportunities for the improvement of the health-seeking experience and delivery of healthcare services. Program objectives should enable the students to:

- 1) Act as agents of change and be leaders in quality improvement and service development, so that they contribute and enhance people's well-being and their healthcare experience
- 2) Systematically evaluate care; ensure the use of these findings to help improve people's experience and care outcomes, and shape clinical treatment protocols and services
- 3) Identify priorities and effectively manage time and resources to ensure the maintenance or enhancement of the quality of care

- 4) Recognize and be self-aware of the effect their values, principles, and assumptions may have on their practice. They must take charge of their own personal and professional development and should learn from experience (through supervision, feedback, reflection, and evaluation)
- 5) Facilitate themselves and others in the development of their competence, by using a range of professional and personal development skills work independently and in teams. They must be able to take a leadership role to coordinate, delegate, and supervise care safely, manage risk, and remain accountable for the care given; actively involve and respect others' contributions to integrated person-centered care; yet work in an effective manner across professional and agency boundaries. They must know when and how to communicate with patients and refer them to other professionals and agencies, respect the choices of service users and Others, promote shared decision-making, deliver positive outcomes, and coordinate smooth and effective transitions within and between services and agencies.

6. Social Accountability and Responsibility

The students will recognize that allied and healthcare professionals need to be advocates within the healthcare system, judiciously manage resources, and acknowledge their social accountability.¹⁰ They have a mandate to serve the community, region, and nation and will hence direct all research and service activities towards addressing their priority health concerns. Program objectives should enable the students to:

- Demonstrate knowledge of the determinants of health at local, regional, and national levels and respond to the population's needs
- Establish and promote innovative practice patterns by providing evidence-based care and testing new models of practice that will translate the results of research into practice, and thus meet individual and community needs in a more effective manner
- 3) Develop a shared vision of an evolving and sustainable healthcare system for the future by working in collaboration with and reinforcing partnerships with other stakeholders, including academic health centers, governments, communities, and other relevant professional and non-professional organizations
- 4) Advocate for the services and resources needed for optimal patient care.

7. Scientific Attitude and Scholarship

The student will utilize sound scientific and/or scholarly principles during interactions with patients and peers, educational endeavors, research activities, and in all other aspects of their professional lives. Program objectives should enable the students to:

- Engage in ongoing self-assessment and structure their continuing professional education to address the specific needs of the population
- 2) Practice evidence-based by applying principles of scientific methods
- 3) Take responsibility for their educational experiences
- To develop a scientific temper and skills towards reviewing evidence-based scientific publications and skills in scientific writing.

8. Lifelong learning

The student should be committed to continuous improvement in skills and knowledge while harnessing modern tools and technology. Program objectives will aim at making the students able to:

- 1) Perform objective self-assessments of their knowledge and skills; learn and refine existing skills; and acquire new skills.
- 2) Apply newly gained knowledge or skills to patient care.
- 3) Enhance their personal and professional growth and learning by constant introspection and utilizing experiences.
- 4) Search (including through electronic means), and critically evaluate medical literature to enable its application to patient care.
- 5) Develop a research question and be familiar with basic, clinical, and translational research in its application to patient care.
- 6) Identify and select an appropriate, professionally rewarding, and personally fulfilling career pathway.
- 7) To foster upgradation in the field of specialization by engaging in continuous medical and nutrition education training, seminars, and workshops.

Introduction of new elements in allied and healthcare education

Self-directed learning, in its broadest meaning, describes a process in which individuals take the initiative with or without the help of others, in diagnosing their learning needs, formulating learning goals, identifying resources for learning, choosing and implementing learning strategies, and evaluating learning outcomes.

Competency-based curriculum

A significant skill gap has been observed in the professionals offering healthcare services irrespective of the hierarchy and level of responsibility in the healthcare settings. The large variation in the quality of services is due to the diverse methodologies opted for healthcare education and the difference in expectations from a graduate after completion of a course and at work. What one is expected 'to perform' at work is assumed to be learned during the course, however, the course design focuses on what one is expected 'to know'. The competency-based curriculum thus connects the dots between the 'know what' and 'do how'.

The efficiency and effectiveness of any educational program largely depend on the curriculum design that is being followed. With emerging medical and scientific knowledge, educators have realized that learning is no longer limited to memorizing specific lists of facts and data; in fact, by the time the professional aims to practice in the healthcare setting, the acquired knowledge may stand outdated. Thus, competency-based education is the answer; a curricular concept designed to provide the skills that professionals need. A competency-based program is a mix of skills and competencies based on individual or population needs (such as clinical knowledge, patient care, or communications approaches), which is then developed to teach relevant content across a range of courses and settings. While the traditional system of education focuses on objectives, content, teacher-centric approach, and summative evaluation; competency-based education focuses on competencies, outcomes, performance, and accomplishments. In such a case, teaching activities are learner-centered, and evaluation is continuous and formative in structure. The competencybased credentials depend on the demonstration of a defined set of competencies that enables a professional to achieve targeted goals. Competency frameworks comprise an articulated statement of a person's abilities on the completion of the credential, which allows students, employers, and other stakeholders to set their expectations appropriately.

Considering the needs of the present and future healthcare delivery system, the curriculum design depicted in this handbook thus will be based on skills and competencies.

Promoting self-directed learning of the professionals

The shift in the focus from traditional to competency-based education has made it pertinent that the learning processes may also be revisited for suitable changes. It is a known fact that learning is no longer restricted to the boundaries of a classroom or the lessons taught by a teacher. The new tools and technologies have widened the platform and introduced innovative modes of how students can learn and gain skills and knowledge. One of the innovative approaches is learner-centric and follows the concept of self-directed learning.

In self-directed learning, learners themselves take the initiative to use resources rather than simply reacting to transmissions from resources, which helps them learn more in a better way. Lifelong, self-directed learning (SDL) has been identified as an important ability for medical graduates and so applies to other health professionals including AHPs. It has been proven through many studies worldwide that the self-directed method is better than the teacher-centric method of learning. Teacher-directed learning makes learners more dependent and the orientation to learning becomes subject-centred. If a teacher provides the learning material, the student is usually satisfied with the available material, whereas if a student is asked to work on the same assignment, he or she invariably has to explore extensive resources on the subject.

Thus, the handbook promotes self-directed learning, apart from the usual classroom teaching, and opens the platform for students who wish to engage in lifelong learning.

Credit hours

Recently the National Assessment and Accreditation Council (NAAC) and the University Grants Commission (UGC) have highlighted the need for the development of a Choice-Based Credit System (CBCS), at par with global standards and the adoption of an effective grading system to measure a learner's performance. All the major higher education providers across the globe are operating a system of credits. The European Credit Transfer System (ECTS), the 'National Qualifications Framework' in Australia, the Pan-Canadian Protocol on the Transferability of University Credits, the Credit Accumulation and Transfer System (CATS) in the UK as well as the systems operating in the US, Japan, etc. are examples of these. Globally, a need now exists for the use of a fully convertible credit-based system that can be accepted at other universities. It has now become imperative to offer flexible curricular choices and provide learners mobility due to the popularity of initiatives such as 'twinning programs, 'joint degrees' and 'study abroad' programs.

To ensure the global acceptability of the graduates, the current curriculum structure is divided into smaller sections with a focus on hours of studying which can be converted into credit hours as per the international norms followed by various other countries.

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Integrated structure of the curriculum

Vertical integration, in its truest sense, is the interweaving of teaching clinical skills and knowledge into the basic science years and, reinforcing and continuing to teach the applications of basic science concepts during the clinical years. (Many efforts called 'vertical integration' include only the first half of the process).

Horizontal integration is the identification of concepts or skills, especially those that are clinically relevant, that cut across (for example, the basic sciences), and then putting these to use as an integrated focus for presentations, clinical examples, and course materials. e.g. Integration of some of the basic science courses around organ systems, e.g., human anatomy, physiology, pathology; or incorporating ethics, legal issues, finance, political issues, humanities, culture and computer skills into different aspects of a course like the Clinical Continuum.

An integrated curriculum aims to lead students to a level of scientific fluency that is beyond mere fact and concept acquisition, through the use of a common language of medical science, with which they can begin to think creatively about medical problems.

This innovative new curriculum has been structured in a way such that it facilitates horizontal and vertical integration between disciplines; and bridges the gaps between both theory & practice and between hospital-based practice and community practice.

Introduction of foundation course in the curriculum

The foundation course for allied and healthcare professions is an immersive program designed to impart the required knowledge, skills, and confidence for a seamless transition to the second semester of a professional allied and healthcare course. Post admission, the foundation course is designed for 6 months to prepare a student to study the respective allied and healthcare courses effectively and to understand the basics of the healthcare system. This aims to orient the student to national health systems and the basics of public health, medical ethics, medical terminologies, communication skills, basic life support, computer learning, infection prevention, and control, environmental issues, and disaster management, as well as orientation to the community with focus on issues such as gender sensitivity, disability, human rights, civil rights etc. Though the flexibility to the course designers have been provided in terms of – modifying the required numbers of hours for each foundation subject and appropriate placement of the subject across various semesters.

Learning methodologies

With a focus on self-directed learning, the curriculum will include a foundation course that focuses on communication, basic clinical skills, and professionalism; and will incorporate clinical training. It is recommended that the primary care level should have sufficient clinical Nutrition and Dietetics exposure integrated with the learning of basic and laboratory sciences. There should also be an emphasis on the introduction of case scenarios for classroom discussion/case-based learning. Healthcare education and training is the backbone of an efficient healthcare system and India's education infrastructure is yet to gain from the ongoing international technological revolution. The report 'From Paramedics to Allied Health: Landscaping the Journey and Way Ahead', indicates that teaching and learning of clinical skills occur at the patient's bedside or other clinical areas such as laboratories, augmented by didactic teaching in classrooms and lecture theatres. In addition to keeping up with the pace of technological advancement, there has been a paradigm shift to outcome-based education with the adoption of effective assessment patterns. However, the demand for demonstration of competence in institutions where it is currently limited needs to be promoted. The report also mentions some teaching modalities and learning opportunities in the field of Nutrition and Dietetics practice The table mentioned below lists various modes of teaching and learning opportunities that harness advanced tools and technologies.

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Teaching modality	Learning opportunity examples
Patients	Teach and assess in selected clinical scenarios
	Practice soft skills
	Practice nutritional assessment
	Evaluation of the nutrition care process
Nutrition Screening	Utilizes validated and reliable tools to conduct nutrition
Tools and Techniques	assessments
Alls	
8	Apply principles of Clinical Nutrition and Dietetics for
5	interpretation of the cases in health and different disease conditions
Nutrition and Dietetics	Collects and analyses anthropometric and body composition data
Unit Equipment	to contribute to nutrition diagnosis.
0	Analyses, designs, and monitors food service systems to optimize
ΤΔ	operations.
Evidence-based	Students should learn to apply evidence-based findings in varied
practice	healthcare settings
A	Translating Research-based scientific evidence in nutrition and
	dietetic practice
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Table 1. Clinical learning opportunities imparted through the use of advanced techniques

Assessment methods

Traditional assessment of students consists of the yearly system of assessments. In most institutions, assessments consist of internal and external assessments and a theory examination at the end of the year or semester. This assesses knowledge instead of assessing skills or competencies. In competency-based training, the evaluation of the students is based on the performance of the skills as per their competencies. Hence, all three attributes – knowledge, skills, and attitudes – are assessed as required for the particular competency.

Several new methods and tools are now readily accessible, the use of which requires special training. Learning and teaching strategies in dietetics are not static but adapt to changes in philosophy, pedagogy, and technology. Cross-referencing of topics from one element to another is essential to ensure effective teaching and integrated learning.

These strategies are designed to be enriching, stimulating, challenging, effective, and enjoyable. Current strategies are learner-cantered and incorporate experiential, practical and formal academic practice, and degree courses incorporate elements of the following:

i case studies and problem-based (or case-based) learning

ii interprofessional, peer, and collaborative learning

iii laboratory-based practical work

iv lectures, tutorials, seminars and student-led oral/poster presentations

v practice-based learning

vi reflective practice and portfolio building

EALTH vii self-directed study and research projects (graduates entering should have completed a research project as part of undergraduate study).

In addition, courses may also include:

i interactive sessions, including debates

ii online learning

iii peer-assisted learning

iv simulation, fieldwork, workshops

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v use of a variety of appropriate materials, including books, electronic multimedia, videos, recordings, and broadcasts.

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Chapter 2

Methodology of Curriculum Development

With the release of the report 'From Paramedics to Allied Health: Landscaping the Journey and the Way Ahead', the Ministry of Health and Family Welfare prioritized the key recommendations and concerns raised by various allied and healthcare professionals' groups and experts as indicated in the report. One of the major recommendations in the report was the need for standardization of curriculum and pedagogic requirements for the major allied and healthcare professional courses. The curricular plan for Nutrition and Dietetics aims to standardize the curriculum of the Degree Program for Nutrition and Dietetics to achieve uniformity in the standards of training across India. The basic prerequisite of training for a qualified professional in the field of Nutrition and Dietetics should be a Four-Year Bachelor's Degree Program with Eight Semesters. This would also encompass the hands-on 6 months of internship in defined clinical settings as per the guidelines laid down and a research project with a defined evaluation rubric.

Steps undertaken in the curricula review process

All the Nutrition science experts deliberated on this issue and a consensus was attained on the following thematic areas. Minimum curricula guidelines designed for the Nutrition and Dietetics Science Profession

- . Curricula should be patient-centric and futuristic.
- . Must include the latest advanced technology
- . Should be aligned with global standards and allow global mobility
- . All programs should be delivered in full-time mode
- No institutions should deliver any part-time or distance program in healthcare Sciences Curricula must consider
- Definition of the profession
- Entry criteria to the profession
- Entry qualification to the professional programs desired in the profession other than entry qualification
- Nomenclature of the qualifications
- Duration of each level of the program with duration of internship.
- Must have competency-based outcomes at the end of each level of the curriculum content.
- Program evaluation framework/assessment at the end of each program.

- Number of desired faculty (with hierarchy/designation) and defined minimum qualifications for each level of the program
- Batch size and student and faculty ratios.
- Details of reference books, journals, and a list of desirable and essential equipment should be considered.

A defined Choice Based Credit System with 20-22 credits per semester is to be followed for the nutrition and dietetics program which is learning outcome-based and ensures a basic minimum competency in core subjects. Credits and the number of hours must be allocated to each subject. While lateral entry and bridge programs can be devised for existing professionals for entry. Multiple exits may not be implemented. Common entrance mechanism to be considered for Nutrition and Dietetics programs; Universities can consider a common entrance examination along with 50% in 10+2 science (Biology and/chemistry) or University/State entrance examination for admission in the Allied and healthcare programs. The medium of teaching should be English. Students from other boards without English as a compulsory subject may be encouraged to take English as an elective from available resources on Swayam and similar platforms.

Competency framework (including performance criteria and related knowledge, skill, and behaviors) to be included in each level of the program. Competencies should be measurable and aligned with assessments.

Soft skills and communication skills are to be highlighted and developed. All programs must have a mandatory internship. Clinical programs can also mandate rotatory internships to increase the level of clinical exposure to the students

- Teaching institutions should be accountable for ensuring the internship of the students considering it is a part of the academic program. Academic Institutions should be encouraged to sign an MoU with either a medical college hospital or healthcare facility as per the guidelines (desired number of OPD etc.) defined in the curriculum to ensure practical exposure to the students. MoU should define the deliverables for both the medical organization and the academic institutions. It should also define the clinical supervision of the students -institutional staff or clinical preceptors.
- A stipend of a reasonable amount can be considered to be paid for internship to students. The amount and details can be decided by the council as per the category of healthcare facility.
- Internships cannot be reflected as work experience as it is a part of the academic program.
- Studentship or observership must also be built into the curriculum.
- Simulation and skill labs can be used for practicing skills specific to the program if available in the initial years of observership/studentship.
- Some hours in every semester can be considered for seminars/workshops on new developments/ technologies.

- If the clinical facility is not within the same campus, transportation should be provided to the students and interns.
- All practical skills must be supervised and recorded in a digital Logbook and skills to be evaluated after the completion of the internship.
- The Master's Program should be promoted to develop a specialization in the field of Nutrition and Dietetics to facilitate capacity building and generation of trained human resources.
- All Master programs must focus on research and engage with industry partners to promote innovation and development in the field
- Dietitians and Nutrition experts specialized in the field can be engaged as guest faculty/ conduct workshops/ seminars under the framework of programs.

It was agreed upon that an Exit Examination (including testing of skills and competencies) could be potentially conducted by a third-party agency or organization as eventually identified by the NCAHP. This can also evolve as a licensure examination for all allied and healthcare professionals.

A common curriculum for Nutrition and Dietetics was done with the support of task force members appointed by ICAHP/NCAHP from various regions of India to ensure wide geographic representation, catering to diverse needs across the nation. Feedback on amendments to the syllabus scheme, including program duration, incorporation of recent developments in courses, alterations in course positioning, and credit distribution, was solicited from task force members and institutional representatives. Meetings were convened multiple times, approximately to 15 sessions, each lasting 2 to 3 hours, resulting in a cumulative effort of 30 to 45 hours to finalize the curriculum. Additionally, input was sought on assessment methods and faculty requirements, with relevant updates made to textbooks. Competencies about knowledge, skills, and attitudes were delineated for both undergraduate and postgraduate programs. Following the submission of the curriculum by the task force to the Ministry, it will be made available in the public domain for feedback.



Chapter 3

Background of the profession

Statement of philosophy – why this profession holds so much importance

A vital component of well-being and growth is nutrition. Stronger immune systems, safer pregnancies and deliveries, lowered risk of non-communicable diseases (including diabetes and cardiovascular disease), and longer life spans are all associated with better nutrition. The study of nutrition is becoming increasingly important as the understanding and practice of a healthy diet is recognized as the prerequisite to good health and well-being.

A balanced diet is necessary across the lifespan for healthy growth, healthy aging, and improved immunity with increased resistance to keep away infections. The risk of several non-communicable diseases (NCD), such as diabetes, cardiovascular disease, cancers, and musculoskeletal and neurological disorders is increased by a poor-quality diet.

Nutritionists assess an individual's dietary intake, and eating habits and create a personalized dietary plan using a scientific food-based approach. A nutritionist is a health professional who is professionally trained to apply principles of Food Nutrition and Dietetics to treat diseases and improve overall health.

Nutritionists can leverage their expertise in a wide range of settings which can include clinical dietetics settings at hospitals, private consultations, community health and nutrition settings, sports, hospitality, food and pharmaceutical industry, non-government organizations (NGO) to government organizations advising local health or social services on food policy issues. They develop, provide, and implement evidence-based nutritional guidelines, and public health nutrition strategies for future safe, sustainable, and healthy foods.

About Nutritional Sciences

Nutritional Sciences is the study of food, nutrients, and other food substances, the intake and biochemical processing of food substances, their relationship to health and disease, and the application of this information to policy and programs.

Nutrition science has evolved from the provision of basic nutrition to support essential functions and structures of the body for health promotion and disease prevention.

Those who work in the field of nutritional science also draw on knowledge of the social sciences to understand the socio-cultural, psychological, economic, and political factors influencing food choice and health status. Foci within the field include diverse approaches, from the study of biochemical pathways and interactions with genetics to observing population intake and relationship to health outcomes (nutritional epidemiology). It may extend to designing and testing nutrition interventions to improve community health, to managing nutrition programs and policies to ensure access to nutritious food, among others.

According to ISCO 08 Code 2265 Title EN Dieticians and Nutritionists, Dieticians and nutritionists plan and conduct food service or nutritional programs to promote and maintain health and to prevent and treat illness and disease. Task statement include

- a. Planning diets and menus, and instructing people on the requirements and importance of diet and on the planning and preparation of food;
 - b. Supervising the preparation and serving of meals;
 - c. Collecting, organizing, and assessing data relating to health and nutritional status of individuals, groups, and communities;
 - d. Monitoring food intake and quality to provide nutritional care;
 - e. Calculating nutritional values of food served;
 - f. planning, conducting and evaluating nutrition intervention programs and compiling educational material;
 - g. Providing nutrition assessments, nutrition management, and nutrition education, research and training;
 - h. Consulting with other Health Professionals and related workers to manage the dietary and nutritional needs of patients.

Included occupations Examples of the occupations classified here: - Consultant, dietetic - Dietician – Nutritionist.

Education of Nutritionist/ Dietitian

It is well recognized that Nutrition Education is a crucial catalyst for the impact of nutrition on food security, community nutrition, and health interventions. Additionally, it is capable of enhancing eating habits and nutritional status on its own. The students must be able to integrate information, skills, and attitudes to do a professional act appropriately in a particular setting to receive the best education and training possible. As a result, the following curriculum is created with an emphasis on a learning strategy that is focused on skills and competencies. The prescriptive curriculum is created to harmonize the subject HCAR matter across the country.

Becoming a Nutritionist/ Dietitian

The science stream in class 12 (Chemistry, Biology/ Food, Nutrition, and Dietetics as mandatory subjects)

Entry Requirements:

Candidates should have 10+2 with science. The minimum percentage of marks is 50% aggregate. The student should be 17 years of age as of 31st December of the admissionyear.

Students entering the Nutrition and Dietetics program at the postgraduate level should have completed the Bachelor of Nutrition and Dietetics in Honors in a regular full-time on-campus mode with a minimum of 60% marks from a recognized university. Students entering the PhD program should be as per the NCAHP regulations. Students entering the Nutrition and Dietetics program at the postgraduate level should have completed the Bachelor of Nutrition and Dietetics in Honors in a regular full-time on-campus mode with a minimum of 60% marks from a recognized university. Students entering the PhD program should be as per the NCAHP regulations.

Nomenclature

The nomenclature of both undergraduate and postgraduate programs should be uniform across the country. The nomenclature for the undergraduate program is "Bachelor in Nutrition and Dietetics with Honours, and for the post-graduate program is "Masters in Nutrition and Dietetics".

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Course Duration

It is recommended that any program developed from this curriculum should have a minimum of the following duration to qualify for an entry-level

- 4-year Bachelor's degree level: Honors program (Including 6 months of Clinical Training/Internship)
- 2-year Program- Master's Degree Level (Including 3 months of Clinical Training/Internship)
- A PhD degree may be desirable for academic growth. However, the curriculum has not indicated any prescriptive guidelines for the same.

Courses in Graduation

Bachelor of Nutrition and Dietetics in Honours: It is a 4-year degree that covers a wide range of subjects, including human physiology, the fundamentals of nutrition, biochemistry, food microbiology, nutrient-drug interactions, etc which are graded and follow a chronological order of complexity and interrelatedness in different years. The degree not only emphasizes general health and disease but also offers knowledge in areas like maternal and child nutrition, public health, sociology and psychology in healthcare etc.. Additionally, the learner will also develop the foundation of food analysis, and research methods. It is mandatory to complete a 6-month internship which is a part of the program and a prerequisite for the award degree.

Courses in Post Graduation

MSc in Nutrition and Dietetics: Post-graduate programs provide advanced knowledge from various fields in food and nutrition such as Advanced Human Nutrition, Preventive and Therapeutic Nutrition, Advanced pathophysiology and Clinical Nutrition (for patients in clinical settings), Public Health Nutrition, Precision Nutrition, Advanced Research Methods and Biostatistics, Food Science and Quality Control, etc. It is mandatory to complete a 3-month internship as a part of the Master's Program.

A Masters student is expected to do a Thesis as a part of the coursework. A Thesis is a short research where the student identifies thrust areas of research and selects a topic of interest. There is exposure to learning research design, data collection, data analysis, results, and discussion with summary and conclusion. The application of statistical analysis to the data is a value addition towards the interpretation of the results and its presentation for a viva voce besides submission of the thesis.

[&]quot;Curriculum of **Nutrition and Dietetics** (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

Exit exam / Licensure exam

There shall be a third-party exit/licensure exam at the end of the Internship (4th year) for the Bachelor's program. The exit examination, or licensure examination, serves as a prerequisite assessment for clinical practice eligibility. While the university may confer a degree completion certificate, it is contingent upon the successful clearance of the exit examination to be eligible for clinical practice privileges within India. Additional criteria and regulations governing the exit examination will be as per the guidelines established by the National Commission for Academic and Health Professions (NCAHP).

Teaching Faculty and Infrastructure

The significance of providing a stimulating teaching-learning environment for students is a prerequisite for a good learning outcome.

The number of teaching staff must be adequate as per the expected student-to-teacher ratio. Ideally, a ratio of 75 to 100:1 for theory and 20: 1 for practicum is desired. Different innovative teaching pedagogies should be used for different subjects. A teacher is expected to make a teaching plan before the commencement of the semester spelling out the teaching and evaluation methodologies aligned with the learning outcomes of the students.

The infrastructure should include big and small classrooms. Ideally, the majority of the classrooms should be smart classrooms and equipped with interactive boards and computers. The Internet facility should be available to the students. The laboratories for practicals should be equipped with the desired equipment as per the coursework. Smaller teaching areas for tutorial and problem/case-based learning approaches should also be provided.

The teaching workload will be based on the norms set by the National State Councils for the designated posts (20 hours per week for Assistant Professors and 18 hours per week for Associate Professors and Professors)

Scope of Practice

Dieticians or nutritionists are experts at an individual and wider public health level. They use the most up-to-date public health and scientific research on food, health, and disease which they translate into practical guidance to enable people to make appropriate lifestyle and food choices. They often work as integral members of multidisciplinary teams to treat complex clinical conditions such as diabetes, other non-communicable diseases, food allergies and intolerance, IBS syndrome, eating disorders, chronic fatigue, malnutrition, kidney failure, and bowel disorders. They advise and influence food and health policy across the spectrum from government to local communities and individuals. Nutritionists / Dieticians are guided by their code of ethical principles. Thus, they may be concerned with any of the following purposes:

- 1. Promoting the health and well-being of individuals and the general public/society, emphasizing the importance of physical activity and diet.
- 2. Advising eating healthy food
- 3. Monitoring eating habits and diets of individual
- 4. Creating and customizing diet plans for those who are suffering from a variety of major health concerns in a hospital setting.
- **Overview of Nutrition and Dietetics Science Practice**
 - 1. Prevention, health promotion, treatment/intervention, pre rehabilitation, and rehabilitation take place in multiple settings.
 - 2. Community-based rehabilitation programs
 - 3. Community settings including primary health care centers, individual homes, and field settings
 - 4. Education center
 - 5. Research and Development institutes for governments or private firms
 - 6. Hospitals
 - 7. Clinical nutritionist private offices, practices, clinics
 - 8. Schools, including pre-schools and special schools
 - 9. Senior citizen centers
 - 10. Sports centers/clubs
 - 11. Workplaces/companies

- 12. Nutrition Officers who work at charitable organizations, support groups, and NGOs where poor and needy people need help with their diets to prevent malnutrition
- 13. Academic research at colleges and universities
- 14. Sports and Health facilities at the district level, state level, and national level
- 15. Space Nutritionist: planning diet of people involved in NASA projects
- 16. Product Nutritionist: Development of nutritional and innovative recipes, and nutritional content analysis of the developed recipes.

As with many other professions, both within and beyond the health industry, the role of a nutritionist / dietitian is constantly changing and diversifying into new areas in a highly dynamic work environment. Nutritionists / Dietitians of India can probably set standards for best practices, foster professionalism, and provide the basis for internal disciplinary mechanisms. Nutrition and Dietetic practice includes using professional knowledge in both clinical and non-clinical relationships with patients or clients, communities, and populations and can be working in different settings as discussed above.

The breadth of professional practice being carried out within the Nutrition and Dietetic profession in India is expanding rapidly. The scope of dietetic practice is such that Nutritionists /Dietitians may work in a variety of settings and have a variety of work functions In the past, most dietitians were employed in hospital settings. Presently many work in various aspects of the food and nutrition industry. Hence, the contexts in which individual Nutritionists and Dietitians work, the population groups they serve, and the services they provide may be very different.

The role of nutritionists and dietitians continues to expand and does not wish to define practice too narrowly, as it may stifle innovation. It also recognizes that there are several models of nutrition and dietetic services provision that can be implemented to ensure equity of access to dietetic services cost-effectively.
Desirable Dietitian-Patient Ratio

The staffing of a Dietician is related to the workload of patients and dietetic activities. As per the capacity assessment of Individual staff members, the parameters to be considered are:

- Number of patient contacts per year per
- Referral rate and rate of patient turnover
- Ratio of new to follow-up contacts
- Patient complexity mix
- Referral to treatment time
- AND HEALTHCAR Percentage of time spent in workforce activities Estimates based on the above parameters of the Desirable Dietitian-Patient Ratio in Hospitals in India are proposed as : ROFE Dietitian: Patients in General Wards; 1: 60
 - Dietitian: Patients in Intensive Care Unit; 1:25

Recognition of Title and Qualification

A Dietitian-Nutritionist is a professional who applies the science of food and nutrition to promote health, prevent and treat disease to optimize the health of individuals, groups, communities, and populations. It is a known fact that with career advancement, the nomenclature will also vary and will also depend on the sector and profile of the professional. The following level progression table has been proposed by the task force to map the nomenclature, career pathways, and progression in different sectors of professional practice for dietitians. Tables 2 (A), 2 (B), 2(C), and 2(D) below indicate the various channels of career progression in four distinct sectors such as clinical setting, academic, research and industrial setup. It is envisaged that the dietitian will have one entry pathway – students with baccalaureate. The level of responsibility will increase as the career progresses. The table also indicates the corresponding level of qualification with experience required by the professional to fulfill the requirements of each level. Considering the extent of the patient dealing in the case of dietitians and other professions, the government aims to promote bachelor's and master's degree courses. In a clinical setting to work the position of Assistant Dietitian and Dietitian, the candidate must attain a baccalaureate and to work the position of Senior Dietitian and Chief Dietitian the candidate must attain masters.

On the academic front, as per UGC guidelines, to work in the position of Assistant Professor the candidate must attain a Master's degree with NET Qualification and to work as an Associate Professor and Professor the candidate must attain a PhD. The table also indicates that the career progression of a dietitian is up to level 4 however it needs to be stated that diet prescription of patients, department management, and final clinical decision will be with the Chief Dietitian or Head of the Department.

Career Advancement Scheme (CAS)

In the academic path, the career advancement scheme has been laid down by NCAHP. Irrespective of the paths chosen, at entry level with a basic Bachelor of Nutrition and Dietetics (Honours) degree job openings may be available, but to grow in the profession, years of experience, coupled with postgraduate degrees may provide better opportunities. Academic performance indicators as per the NCAHP recommendations, and key performance indicators as per the private sector may be followed.

Job Availability

As per International Labour Organization (ILO) documentation, employers worldwide are looking for job applicants who not only have technical skills that can be applied in the workplace but who also can communicate effectively, including with customers; can work in teams, with good interpersonal skills; can solve problems; have good Information and Communications Technology (ICT) skills. Graduates can expect to be employed in hospitals and private practices as dieticians. A career in research, following the completion of a higher degree such as an MSc and PhD, is an option chosen by some post-graduates. Graduates are eligible for employment overseas where their qualifications, training, and experience are highly regarded. Graduates have good employment prospects and will enter a field in which the demand for professionals has increased in recent years and will keep on increasing due to the need to combat the epidemic of Non-Communicable Diseases – an outcome of Nutrition Transition and lifestyle changes. An aging population and lifestyle changes requiring increased medical rehabilitation services potentiate a strong demand for future graduates. As per the scope of Nutrition Science practice, the job sectors are divided into the following :

- 1. Clinical Settings
- 2. Public health
- 3. Food and Pharmaceutical Industries/Companies
- 4. Education sector
- 5. Private practice
- 6. Scientific Research
- 7. Corporate sector
- 1. Clinical Settings: A clinical dietitian is to design nutrition programs to improve or maintain the health of patients. They provide critical nutrition and dietary guidance to patients, which is required during their acute illness and recovery stages.

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- 2. **Public Health Nutritionist:** Public Health Nutritionists work for the promotion of good health through the prevention of Nutrition-related illnesses/problems in the population, and the government policies and programs aimed at solving these problems. Public health nutritionists are food and nutrition experts who work to improve the health and well-being of communities and populations. They help prevent diseases by educating people and encouraging them to adopt healthier lifestyles. Public health nutritionists bridge the gap between science and practice by translating complex nutritional information into actionable strategies for a wide range of groups. They often develop and share practical tools and information that can help local communities. Public health nutritionists who focus on treating existing health conditions.
- 3. Food and Pharmaceutical Industries/Companies: Industry specialist dietitians work in an area of dietetics where the research, development, and production of nutritional products, services, resources, and communications are the main outputs. Industry can include both medical nutrition and commercial enterprises. Industry-based dietitians represent the dietetic community within the industry; aiming to promote and apply sound nutritional principles in the work, they do within their varied roles. This can include the development of nutritional products and services, marketing and communications, scientific research, nutritional strategy and policy, food regulation and safety, education, and training.

- 4. Education sector Schools/ Higher Education: Nutritionists/ Dietitians can be employed in Schools and Higher Education Institutions in different capacities. The eligibility would be as per the recruitment norms, eligibility, and experience. The faculty for higher education should have prerequisite qualifications as per UGC norms. They can be employed in various positions in Academics/Universities & National and International Research organizations. Qualified Dieticians can be invited as Guest Faculty in Colleges to provide practical knowledge in the field of Nutrition and Dietetics to young students. Nutrition science can be leveraged through school and college canteens, Eat Right Campus, Hostel Mess, and School lunch programs in these environments.
- 5. **Private practice**: They should create personalized food plans about clients' health conditions, preferences, and needs. It helps them to set realistic goals and develop strategies to manage nutritional challenges
- 6. Scientific research: Nutritionists/Dietitians can be engaged with several eminent Government and Non-Government research organizations for a variety of nutrition-related activities. It can range from the development of standardized tools, data collection, data analysis, evaluation, and impact analysis for a range of research projects. These include ICMR, MOHFW, MWCD, GAIN, PATH, Alive and Thrive, Action Against Hunger, CARE, and United Way; UN organizations such as UNICEF, WHO, FAO, WFP, USAID
- 7. Corporate Sector: A growing range of personal businesses and corporations hiring welfare consultants to produce steerage on healthy feeding and exercise habits. These consultants may supply general tips about nutrition and health or lead seminars on how workplace employees will manage stress or avoid muscle fatigue. This will need robust client service skills.

Levels of Career in Clinical fields, Academic, Research, and Industry

Clinical Fields - Overview of Current Dietetic Practice

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The majority of patient-focused work can be grouped under the following categories: Acute: Hospital wards and outpatient clinics.

Community: Community clinics, care homes, railway catering, and patient's own homes, day care services, or schools. Many dietetic one-to-one consultations take place in the efficient environment of wards or clinics.

Many dietetic one-to-one consultations take place in the efficient environment of wards or clinics. However, Nutritionists and Dieticians in Hospitals are also involved in non-patient-focused activities (other dietetic activities) as an integral part of a dietetic workload. Activities such as training and supporting others to deliver nutritional care have previously been overlooked when it comes to considering workload. Service-focused, staff-focused, and self-focused activities must be considered key elements and be given appropriate emphasis when reviewing or developing posts and services.

At present, group education sessions are also a common way of delivering care to diabetic patients. This format of caregiving enables advice to be given to more than one patient with the same dietetic diagnosis at the same time. Initially, just a few specialties moved towards group education sessions for conditions such as diabetes and coeliac conditions. However, group sessions have been evaluated well and are now much more widely available across a variety of specialist fields.

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Clinical (Des	signation)	Qualification & Experience
Assistant Dia	tition	Essential
	lillan	Essential :
Eligibility	and	• BSc (Hons) in Nutrition and Dietetics (04
experience	for direct	years course)
recruitment	NFUI	• BSc (Hons) in Nutrition and Dietetics and
C	21.	MSc in Nutrition and Dietetics
S		• Desirable: PhD in Food, Nutrition, and
		Dietetics
Diatitian		Essential :
Gletitian		• BSc (Hons) in Nutrition and Dietetics and
Eligibility	and	MSc in Nutrition and Dietetics and 5
experience	for	years Experience as Assistant Dietitian
promotion		• Desirable: PhD in Food, Nutrition, and
		Dietetics
Senior Dietiti	an	Essential :
、 、		• BSc (Hons) in Nutrition and Dietetics and
Eligibility	and	MSc in Nutrition and Dietetics with 5
experience	for	years of experience as a Dietitian, and
promotion	-dike	• Should have two research publications or
		should have completed a PhD in Food,
		Nutrition, and Dietetics
6.		Essential :- 2021
Chief Dietitia	un Carlo and	• BSc (Hons) in Nutrition and MSc in
Eligibility	and	Nutrition and Dietetics and years of
experience	for	experience as a Senior Dietician. and
promotion:		• Should have two research publications or
-		should have completed a Ph D in Food
		Nutrition and Dietetics

Table 2 (A). Level for careers in the Clinical field

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Dieticians Cadre- Duties and Responsibilities

1. Assistant Dietician

- 1) To do routine day-to-day activities of the department as assigned by Chief Dietician.
- 2) Duties include menu planning, ensuring hygiene and safety of food preparation, supervising diet setting, diet counseling for in-patients and outpatients, and provision of Medical Nutrition Therapy (MNT) to the patients.
- 3) If a single person in the hospital- is in charge of registers maintained in dietary, work in collaboration with the medical superintendent in deciding the work policy of patient food service, and planning educational and training programs for food service staff. Eg:-coordinating with the food safety office for training staff.
- 4) Gain academic credits through participating in training and academic programs conducted by the Nutrition department, colleges, Associations, etc.
- 5) Support the students from the UG/PG level who come to the Hospital/Institute for internship.
- 6) It is advisable to advance the research career which will get additional credits.
- 7) Decide patient care policies- documentation in hospital records, follow-up care planning, and organizing community-level education programs and camps in underdeveloped rural areas.
- 8) Should report to the chief dietitian for professional grievances and requirements.
- 9) Organize and conduct institutional-level research activities of high standard which can be considered for publication. Participation in collaborative research activities as assigned by the state nutrition research officer should be encouraged.

2. Dietician

- 1) In charge of assistant dietitians.
- 2) Overall supervision of patient food service management. To be the chair of the canteen committee and involved in the administration of food service, in charge of menu planning, designing the layout and equipment of the canteen, whether to stock nutraceuticals in the canteen store and distribute, modify the duty arrangement of canteen staff in case encountering practices that challenge food safety.
- 3) The F&B manager should inform the dieticians about any change in food served to patients.

- 4) The canteen committee shall consist of dieticians, an F&B manager, a medical superintendent, and representatives from the canteen administration. The committee shall meet every month and review the activities of the canteen. The committee is also responsible for addressing grievances from patients and F&B staff.
- 5) Aid the students in their research activities- UG, PG, RD training, and PhD program.

3) Senior Dietician

- In charge of the Assistant Dieticians and dieticians. Department head if the institute does not have a chief dietician post.
- 2) Responsibility for all the activities happening in the department.
- 3) Should formulate and implement department-level administrative and academic policies.
- 4) Evaluate the quality of products being presented before you- nutraceuticals, artificial sweeteners, foods for special dietary purposes, foods developed by small entrepreneurs for patients, etc. Senior dieticians preferably should gain additional skills in food safety certifications, nutraceutical certification, and product development. In collaboration with hospital administration, senior dieticians can organize product trials with them and propose to be included in the purchase list.
- 5) Try to acquire a guideship and academic counsellorship from universities and guide scholars.
- 6) Aid the students in their research activities- UG, PG, RD training, and PhD program.
- 7) It is desirable to enroll for PhD research and gain additional skill certificates.

4, Chief Dietician

1) The role is responsible for overall clinical, dietary, academic, and administrative responsibilities.

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- 2) Responsible for setting the vision and mission and framing policies and procedures for attaining the food and quality control standards of dietary services.
- 3) 3. The role oversees the functioning of all Dieticians.
- 4) 4.To create academic responsibilities of research, teaching, and development of course content for training programs.
- 5) 5.To promote the sharing and dissemination of food, nutrition, and dietetic knowledge through representation in various national and international conferences/programs.

5. State Nutrition Officer

- 1) To make administrative decisions regarding the appointment, duties and responsibilities, and promotion criteria at the state level.
- 2) To represent dieticians in the state dietetic council and decide on registration criteria.
- 3) To coordinate the organization and fund utilization of state-level nutrition-related activities.
- 4) To organize in-service training and educational activities for dietitians enrolling in service.
- 5) To represent the state in national and international level venues discussing nutrition policies.
- 6) Responsible for maintaining ethical conduct of duties by dieticians.

6. State Nutrition Research Officer

- 1) To plan, organize, and conduct state-level research activities conducted by dietitians in government and private sectors.
- 2) To form an Indian Council of Medical Research (ICMR) -approved ethical committee and Nutrition research committee.
- 3) Formulate a state-level peer-reviewed journal to publish such data and function as the editor-in-chief of the journal.
- 4) To coordinate fund utilization of research activities.
- 5) To form a committee to examine the authenticity of nutrition-related information reaching the public through print, audio-visual media, and social platforms. This committee should have the power to report to the council if any fellow is seen spreading false or fake messages to the public. This committee should maintain a website where such complaints can be lodged by public and fraternity members, the actions taken also should be on display here. Any authentic scientific information can be shared with the public through this platform.
- 6) Function as part of the academic council of the subject in different universities and contribute to the curriculum.

- 7) Organize collaborative research activities including academicians, clinicians, NGOs, and research funding agencies.
- 8) Be in charge of a state-level research lab facility where nutrient analysis, analysis of antioxidants, toxic materials, pesticide residue, genetic testing, biotechnology, food engineering, food microbiology analysis, etc are possible. This should be formed in In retitians I.y. This can t collaboration with all concerned departments. Students /working dietitians who wish to develop and test novel products should have access to the facility. This can be named as State Nutrition Research Lab.
- 9) Establish and maintain a State Nutrition Library.

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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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Table 2 (B). Levels for careers in the Academic field

Table 2 (C) Levels for careers in the Research field



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Industry (Designation)	Qualification
Clinical/Field Nutritionist	BSc Hons in Nutrition and Dietetics /MSc in Nutrition and Dietetics
Zonal Nutrition Manager	MSc in Nutrition and Dietetics
Nutritionist in Product Management Team	MSc in Nutrition and Dietetics
Medical Affairs Nutrition	MSc in Nutrition and Dietetics
Marketing Product Manager	MSc in Nutrition and Dietetics Ideally with MBA
Sales Manager	MSc in Nutrition and Dietetics Ideally with MBA
Training Manager	MSc in Nutrition and Dietetics Ideally with MBA
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NCA Since	AHP 2021

देखान्रखी

Nutritionist working in the technical field

- Clinical/Field Nutritionist–Conducts camps, and gives counselling to the trade OPDs (Outsourced Product Development)
- 2) Zonal Nutrition Manager–Handling the Nutritionist in the field, and coordinating with the sales team for sales improvement.
- 3) Activity or key accounts Manager–Responsible for conducting CMES, coordinating for conferences can be a pan India role, with reporting to the Zonal Nutrition Manager
- 4) Nutritionist in supporting the pharma marketing team with references for their communications, making PPTs for doctors and Dietitians for their presentations
- 5) Medical Affairs Nutritionist--Conducting and supporting clinical trials, and publications.

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- 6) Marketing product manager--Be a part of strategic and decision making and marketing.
- 7) Sales--work as a sales manager
- 8) Training Manager--giving training to the team

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Chapter 4

Model Curriculum of Nutrition Science Courses

Background

According to the World Health Organisation nutrition is the intake of food, considered with the body's dietary needs. Adequate food is vital in keeping people alive. Good nutrition is essential to good health. Poor nutrition can lead to reduced immunity, increased susceptibility to disease, impaired physical and mental development, and reduced productivity. Nutrition impacts the development process at every stage of the life cycle from conception to death. Freedom from hunger and malnutrition is a basic human right and their alleviation is a fundamental prerequisite for human and national development. Nutrition encompasses the science of the significance of essential nutrients, their functions, effect of deficiencies and excess. The Nutrition Science translates the science of nutrition into practical applications in clinical, food service, or community settings.

Dietetics is the science of how nutrition affects our health. Scientific studies have shown how a change to our diet can help prevent or control a variety of health problems, including obesity, diabetes, and heart disease.

The curriculum provides an excellent foundation of principles of science and art as applied to Food Nutrition and Dietetics. There is a professional focus on applying knowledge of nutritional sciences to benefit human health and to abate disease. The program aims towards a standardized template of capacity building of Nutritionists and Dieticians with academic excellence and professional skills to be leveraged in a variety of settings ranging from clinical settings to community and people at large. The program focuses on excellence in intellectual development, the development of a professional inquiring attitude, and equality of opportunity.

The recommended curriculum aims to produce Dietitian/Nutritionists who are:

- 1. Technically and clinically competent for independent decision-making
- 2. Enable to assess a patient
- 3. Aware of patient conditions and treatment along with the importance of quality benchmarks
- 4. Understand the theoretical basis for evidence-based practice

47

- 5. Effective members of the multidisciplinary team
- 6. Prepared to participate in or initiate research into practice

All aspects of Nutrition and Dietetics have been considered in the development of this curriculum keeping in mind the possible roles expected at different levels by nutritionists and dietitians based on their qualifications and experience.

The need for connecting the dots between education and employment practices has been the road map for devising this curriculum. The career pathway indicates direct Entry after the completion of a minimum 4 years of degree-level program in Bachelor of Nutrition d NRT PROFF and Dietetics in Honours. The components of the programs have been detailed in the following chapters. The coursework has been grouped under:

1. Foundation courses:

2. Core/ Essential Courses;

- 3. Specialized Courses and
- 4. Ability Enhancement Courses,

HE BE STARE

5. Research Component.

These have been aligned and graded with the increasing levels of complexity along the Four Years of Graduation. The flow has been interwoven with Ability Enhancement Courses. Adequate emphasis has been given to Experiential Learning through hands-on training and internship which is embedded as a part of the coursework and is a mandatory prerequisite for the award of the degree and graded. Research inquiry in the form of seminars, projects, and thesis is a part of the final year of graduation and has credits allocated for assessment.

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4.1 Bachelor of Nutrition and Dietetics (Honors)

Introduction:

Learning Objectives:

The learning objectives of a Bachelor of Nutrition and Dietetics (Honors) degree program include:

- Practical skills: to develop the ability to acquire practical skills for monitoring food and nutrition-related clinical problems.
- Analytical skills: to develop analytical and practical skills.
- Knowledge: to provide knowledge of nutrition, food, and how to stay healthy to the population.
- Career opportunities: to develop skills and abilities that open up new career opportunities.
- Communication: to learn to communicate effectively with patients, individuals, and multi-disciplinary healthcare team health professionals.
- Health status assessment: to design and carry out health and nutritional status assessment protocols.
- Nutritional risk factors: to learn to identify nutritional risk factors and application of tools for nutrition screening.
- Nutrition and dietetic care: to learn to provide nutrition and dietetic care for individuals, groups, and populations at risk of developing long-term health conditions.
- Therapeutic diets: to learn to plan and provide therapeutic diets to manage and treat medical conditions.
- Higher education: to enable to pursue higher education and research in clinical nutrition, dietetics, and food science.
- Nutritional assessment: Students learn the methods and application of validated tools of assessing human nutritional requirements and diet planning for the individual and community.

Dietitians are specialist nutritionists who apply the science of food and nutrition to promote health, prevent and treat disease to optimize the health of individuals, groups,

communities, and populations. They are accredited to work in roles such as community and public health nutrition, clinical dietetics, food service systems management, and research. This enables them to work in settings such as hospitals, private practice, research, the food industry, nursing homes, sports teams, and food service.

Throughout this degree, the students will study the building blocks of nutrition: biochemistry, nutritional epidemiology, public health nutrition, and pathophysiology. The students will learn about medical nutrition therapy, which involves translating the science of nutrition into dietary advice to manage specific medical conditions and to develop community nutrition program plans to help improve the nutrition of communities. Other subjects include nutrition and food innovation, allied health practice, and food service management.

Expectations from the future graduates in providing patient care.

Dietitians and Nutritionists are professionals who study, advise, research, supervise, or provide preventive, curative, rehabilitative, therapeutic, or promotional health services and who have obtained a qualification of degree under this Act, the duration of which shall not be less than three thousand six hundred hours spread over four years divided into eight semesters.

Competency Standards for Dietitians and Nutritionists include the key areas of professional practice, improving nutrition outcomes for individuals, groups, and communities, critical thinking and evidence-based practice, and collaboration with stakeholders.

Eligibility for admission: Selection procedure:

1. He/she has passed the Higher Secondary (10+2) or equivalent examination recognized by any Indian University or a duly constituted Board with pass marks (50%) in physics, chemistry, biology/mathematics. Admission is done based on the NEET exam / equivalent exam conducted by the Government of India (for both UG and PG programs) followed by a counseling session.

- 2. Candidates who have studied abroad and have passed the equivalent qualification as determined by the Association of Indian Universities will form the guideline to determine the eligibility and must have passed the subjects: Physics, Chemistry, Biology, Food, Nutrition and Dietetics, and English up to 12th Standard level with pass marks (equivalence to) 50% in physics, chemistry, and biology.
- Candidates who have passed the Senior Secondary school Examination of National Open School with a minimum of 5 subjects with any of the following group subjects with pass marks of 50% in physics, chemistry, biology/Food, Nutrition, and Dietetics
- a- English, Physics, Chemistry, Botany, Zoology, Food, Nutrition and Dietetics
- b- English, Physics, Chemistry, Biology, Food, Nutrition and Dietetics and any other language
- 4. He/she has attained the age of 17 years as on 31st December of the year of admission.
- 5. He/she has to furnish at the time of submission of the application form, a certificate of Physical fitness from a registered medical practitioner and two references from persons other than relatives testifying to satisfactory general character.
- a. During subsequent counselling the seat will be allotted as per the merit of the candidate depending on the availability of seats on that particular day.
- b. A candidate who fails to attend the Medical Examination on the notified date(s) will forfeit the claim for admission and placement in the waiting list except permitted by the competent authority under special circumstances.
- c. The name of the student(s) who remain(s) absent from classes for more than 15 days at a stretch after joining the said course will be struck off from the college rolls without giving any notice.

Duration of the course

The Bachelor of Nutrition and Dietetics (Honors) undergraduate degree program is of four years duration including a compulsory internship.

Duration of the course: 4 years or 8 semesters.

Total hours –3735 (theory + practical +internship)

Semesters - An academic year consists of two semesters

Odd Semester: June/July to November/December

Even Semester: November/December to April/May

Medium of instruction:

English shall be the medium of instruction for all the subjects of study and examination of the course.

Principal/Head of the Institute

In an affiliated college, the Principal or Head of the institute must be a Dietician or a Nutritionist. In a University setup, the Head of the Department(HOD) must be a Dietician or a Nutritionist. The Dean must belong to Allied and Healthcare professions as 4CAPK mentioned in the NCAHP Act.

Attendance:

- A candidate has to secure a minimum-
- 1.75% attendance in theoretical

2. 80% in Skills training (practical and clinical training) for qualifying to appear for the examination.

Assessment:

Assessments should be completed by the academic staff, based on the compilation of the student's theoretical and clinical performance throughout the training programme. To achieve this, all assessment forms and feedback should be included and evaluated.

Competency Standards

Classification Units of Competency Skills at Entry level for Dietitians and Nutritionists

Since-202

201-205

- 1. Communication Skills
- 2. Professional Conduct
- 4. Patient management and counseling skills
- 5. Documentation क्ष अर्रे स्ट

Curriculum Outline

Bachelor of Nutrition and Dietetics (Honors) [4-years program]

Year	Semester	Theory Hours	Practical Hours	Hours
				Per semester
1	1	240	180	420
1	2	R A210 EU	AN 240	450
2	3	255	150 4	405
2	4	270	120	390
3	5	210	240	450
3	6	135	330	465
0	7	165	330	495
4	8	0	660	660
Total C	redit Hours	1485	2250	3735

Proposed Credit Hours

Credit details:

One credit implies one hour of lecture per week or two hours of laboratory/practical per week or two hours of clinics per week or two hours of Research projects per week

A semester is considered to have 15 weeks. For example,

1 credit course = 15 hours of lectures per semester

3 credits course = 45 hours of lectures per semester

0.5 credit course = 15 hours of practical/laboratory.



P: Hours for Practical

Curriculum mapping & Credit Management

First Semester

Course code	Course Titles	Credits			Но	urs /Semest	er
		The	Pract	То	The	Pract	То
	OD I	ory	D ical N	tal	ory	ical	tal
BND	Fundamentals	3	1	475	45	30	75
101	of Nutrition				KIA		
BND	Human	3	1	4	45	30	75
102	Anatomy and					2	
8	Physiolog <mark>y</mark>					· P	
BND	Basics of Food	3	1	4	45	30	75
103	Science						FF
BND	Environmental	3	1	4	45	30	75
104	Science						SI(
BND	Indian	2	0	2	30	0	-30
105	Knowledge						S
	System on						
R	Foods						
BND	Computer	0	2	2	0	60	60
106	literacy	मर	विर्ध	सार	ानम	R	
BND	English for	2	0	2	30	0	30
107	Communication	NC	AHF		9	E /	
	TOTAL	S ¹⁶ Ce	-2021	22	240	180	420
	· & 3/1/2	स्वा	र्ख्य	देखाँ	रखा		

Second Semester

Course	Course Titles		Credits		Но	urs /Semest	er
code						(15 weeks)	
		Theory	Practical	Total	Theory	Practical	Total
BND	Food		ΠΛΝ		45	30	75
201	Microbiology	3		446	A / .		
BND	Fundamentals				45	30	75
202	of Biochemistry	3	1	4		C_{A}	
BND	Nutrition				30	60	90
203	Through Life					10	
3	Cycle	2	2	4		7	5
BND	Psychology and				60	0	60
204	Sociology						ù,
0	App <mark>lied</mark> to						S
IT.	Health Care	4	0	4			10
BND	Techniques of				0	60	60
205	Nutritional						
	Assessment	0	2	2			
BND	Soft Skills and				30	0 7	30
206	Communication	\mathbf{H}^2 \mathbf{J}	le fb l	2	ITT	r A	5
BND	Computer				0	60 05	60
207	Literacy for	NC	AHF			æ,	
	Nutrition	Since	2	2			
	FOTAL	14	8	22	210	240	450
	र अरि	स्वा	15.97	देखाः			

Third Semester

Course code	Course Titles		Credits		Но	urs /Semest (15 weeks)	er
		Theory	Practical	Theory	Theory	Practical	Total
BND 301	Macronutrie nts in Human Nutrition	4	IED A 0		60		60
BND 302	Advanced Food Science	3	1	4	45	30	75
BND 303	Public Health Nutrition	3	1	4	45	30	75 S
BND 304	Basics of Medical Nutrition Therapy (Theory and Practical)	2	2	4	30	60	e SNO
BND 305	Advanced Biochemistr y		CAH	P 3	45	0	45
BND 306	Food Processing and Preservation	2 2 G	ार्श्व्य	देख	30	30	60
T	OTAL	17	5	22	255	150	405

Fourth Semester

Cours e code	Course Titles		Credits		Н	ours /Semest (15 weeks)	er
					-		-
		Theory	Practica	Total	Theory	Practical	Total
	Clinical	ALLI	EU A	ND L	15.		
	Biochemistry	3	1	4	5A1,	30	75
BND-	and	5	1	-	45	50	15
401	Pathophysiology					70	
	National Health						
6	and Nutr <mark>ition</mark>	3	1	1	15	30	75
BND-	Programs and	5	1	4	43	50	013
402	Policies						FE
N	Micronutrients						S
BND-	in Human	4	0	4	60	0	60
403	Nutrition						NC
Z	Functional						S
BND-	Foods and	3	1	4	45	30	75
404	Nutraceuticals						4
BND-	Advanced	3	1 6	c 4	45	30	75
405	Dietetics	मि	मवोश	र्थस	E-I-	F	15
BND-	Food Safety	1		D 2	30	0	30
406	and Standards	INU	AH		50	SE .	50
	TOTAL	38 nc	e ⁴ 202	2 22	270	120	390
	· & 31/4	र स्व	ष्ट्रि	देख	1-2201		

Fifth Semester

					Ho	urs /Semest	er
Course	Course Titles		Credits			(15 weeks)	
code							
		Theory	Practical	Total	Theory	Practical	Total
	Research						
BND-	Methodology	4	EDOAN	1-4	60	0	60
501	and Statistics			H	EA1.		
BND-	Sports	2	2	4	30	60	
502	Nutrition	2	2	4	50	00	90
2	Tools and					R	
Z	Technique <mark>s</mark>	1	3	1	15	00	
BND-	for Nutrition	1	5	4	15	90	105
503	Counselling						T
Z	Nutritional						S.
0	Epide <mark>miolog</mark> y	3	1		15	30	S
BND-	and	5	1	4	43	50	750
504	Anthropology						S
BND-	Food Analysis	2	2	1	30	60	
505		2	L	4	50	00	90
	Emerging					-	K
So.	concepts in		Halo		S 30		
BND-	Nutrition and				50	6 3	30
506	Dietetics	INC	;AHF	P			
Т	OTAL	Sinc	e-202	1 8	210	240	450
	8	0110	-202		30		I
	ं अने	र स्त	TC PT-T	30			
		• 4	1709	-			

Sixth Semester

					Но	urs /Semest	er
Course	Course Titles		Credits			(15 weeks)	
code							
		Theory	Practical	Total	Theory	Practical	Total
	Social	3	1	4			
	Behaviour	NL	ED AN	In,			
	Change COR	RL-			AF	20	75
	Communicati				45	30	/5
	on/ Nutrition					C	
BND-	Health					12	
601	Promotion						0
BND-	Sustainable	3	1	4	45	30	75
602	Food Systems						T
X	Field Practice	1	3	4	15	90	105
0	in <mark>Publ</mark> ic						S
BND-	Health and						0
603	Nutrition						3
BND-	Food Product	2	4	6	30	90	120
604	Development						
BND-	Case study	0	4	4	0	90	90
605	Reviews		uafo	f	ГСТТ		R
Т	OTAL	9	13	22	135	330	465
	\sim	NC	AHI)		d	
	6	Sinc	e-202	1		A)	
	YEC 2.1	Ciric			20		
	. जो	र सत	TCPT	50			
		Y	1704	*			

Seventh Semester

Course code	Course Titles	Credit	S		Hours (15 we	/Semester eks)			
		Theory	Practical	Total	Theory	Practical	Total		
BND-701	Information Technology in Nutrition and Dietetics	2	2 2	D H/ 4	A ₃₀	60	90		
BND-702	Entrepreneurshi p in Nutrition and Dietetics	3	1	4	45	30	75		
BND-703	Nutrition in Critically ill	2	2	4	30	60	90		
BND-704	Management and Administration in Dietetics Services	2	2	4	30	60	7 SIONS		
BND-705	Nutrition in Emergencies Applied Dietetics/Intern ship Project		a विश्व AlaP	2	30 0	0	30		
TOTAL			-2021 5	22	165	330	495		
	10 5 22 165 330 495								

Eighth Semester

					Hours /Semester			
Course	Course		Credits			(15 weeks)		
code	Titles							
		Theory	Practical	Total	Theory	Practical	Total	
	Internship							
	in Hospital	LIA d	LIED A	Nn	11.			
	/Experienti	K HL			HEA			
	al Learning	0	14	14	0 7	420	420	
BND-	(6 months)					· Ca		
801	1 semeste <mark>r</mark>					1		
Z'	Research						2	
3	and Trends						PO	
~	in						T	
X	Nutrition	0	4	4	0	120	120	
BND-	and						n i	
802	Dietetics						C	
N	Scientific							
	Writing in							
	Nutrition	0	4	4	0	120	120	
BND-	and						4	
803	Dietetics		मत	ofj		1.11	R	
TC	DTAL	0	22	22	0	660	660	
	k)		CAF	iΡ		Æ		
	6	Sir	nce-20)21				
	· &				172	51		
	M	AN	रङमाव	र दें	GL			

First Semester

BND 101 Fundamentals of Nutrition

CL	СР	L	Р
3	1	45	60
	OR ALLIE	U AND HA	

Course Name	BND 101 Fundamentals of Nutrition 4 (3+1)
Course Description	The students would be able to understand the fundamentals of Food and Nutrition and acquire knowledge of nutrients, their functions, deficiency disorders, sources, various food groups, and recommended dietary allowances (RDA).
Objectives	1. To introduce different food groups, their nutritional value, and their significance in daily diet.
NATI	2. To recognize the roles of food and the role of different nutrients, their requirements, and their impact on deficiency and excess.
4	3. To acquaint students with diverse methods of cooking and their advantages and disadvantages.
7	4. Understand various food groups and RDA
Reference Books	 Srilakshmi B. 9th Edition (2023). Dietetics. New Age Publishers. ISBN 13: 9789395161848 Dietary Guidelines for Indians A Manual, Revised Edition 2024. ICMR NIN, Hyderabad Mudambi, S. R. (2007). Fundamentals of foods, nutrition and diet therapy. New Age International Pvt. Ltd. ISBN-10 : 9788122433494 Bamji, M. S., Krishnaswamy, K., & Brahmam, G. N. V. (Eds.). (2016). Textbook of human nutrition. Oxford & IBH. ISBN 13: 9788120417908.

	5. Chowdhury SR, Tamber Aeri B ()Textbook of Food Science	ce and
	Nutrition. Kindle Edition.	
	6. Shadaksharaswamy, M, Manay, S, (2010): Food fact	s and
	Principles, 3 rd Edition, New Age International Publishers. ISB	N 13:
	978-9395161091.	
	7. G Subbulakshmi, Udipi SA, Ghurge PA (2021). Food Proc	essing
	and Preservation. ISBN: 978-8122472332.	
	1 FUI	
Webliography	https://www.coursera.org/learn/food-and-health	
5	https://www.nutrition.gov	
M	https://www.who.int/health-topics/nutrition	
Proroquisitos	Higher secondary level 12 th standard pass science or Food. Nut	rition
rerequisites	and Dietotics students	inuon,
Y	and Dieterics students	T
Course Plan		ESS
Unit	Торіс	Hours
AT A	Concept of Food and Nutrition :	9
	Introduction to nutrition- definition of food, nutrition,	
	nutrients, and health, functions of food, food groups-	
R	classification, Food pyramid, My Plate and dietary guidelines,	F
S -	Recommended Dietary Allowances (RDAs), Balanced diet	
× × ×		
×.	NCAHD	
2	Composition, Classification, Functions, dietary sources, and	9
6.	clinical manifestations of deficiency/ excess of the following	
	nutrients/non nutrients: Carbohydrates, lipids, protein, water,	
	fiber स्वास्थ्य देखा	
3	Classification, Functions, dietary sources, and clinical	9
	manifestations of deficiency/ excess of the following nutrients:	
	Fat soluble vitamins	
	Vitamin A, D, E, K and Water soluble vitamins – thiamin,	
	riboflavin, niacin, pyridoxine, folate, vitamin B12 and vitamin C	

4 5.	Classification, Functions, dietary sources, and clinical manifestations of deficiency/ excess of the following nutrients Macro minerals- Calcium, potassium, Phosphorous, Chlorine, Sulfur, Magnesium , Micro Minerals – iron, zinc, selenium, copper, manganese Introduction to different culinary terms	9 9
MASS	Grilling, broiling, roasting, Baking, Sautéing, Shallow fat frying, Deep fat frying, Combined (Moist and dry) Methods: Braising, Stewing Germination, Fermentation, Braising, Microwave cooking, Solar cooking	00
*Practical		Ē
Unit 1 Unit 2	Market survey of locally available food items viz. cereals, pulses, fruits and vegetables, milk and milk products, fats and oils, nuts and oilseeds, sugar and jaggery, meat, fish, and poultry and miscellaneous food items like biscuits, jams, jellies, ketchup etc. and their cost. Classify foods on the basis of nutrients: Protein, Iron, Calcium, Vitamin A, Vitamin C (list of 10 foods with highest and lowest amount of these nutrients- Plant and animals	SIONS 1/5
A CONTRACTOR	courses) Calculate the cost of food required for providing a given amount of nutrient for an adult man/woman as per RDA/EAR for each food group : cereals, pulses, fruits and vegetables, milk and milk products, fats and oils, nuts and oilseeds, sugar and jaggery, meat, fish, and poultry	

Unit 3	Overview of Controlling techniques and Food exchange	10
	system	
	Controlling techniques: Weights and measures - standard and	
	household measures for raw and cooked foods (metric)	
	Food exchange system and its applications.	
Unit 4	Standardization of basic food preparations	15
	Beverages: Tea, coffee, cocoa, fruit juice, milk shakes and	
	smoothies	
S	Cereal and flour mixtures: Basic preparations - boiled rice &	
M	rice, pulao; chapati, puri, paratha, sandwiches, pastas	
No	Pulses and legumes: Using whole, split and sprouted	
Unit 5	Standardization of basic food preparations	30
47	Nuts and oilseeds: Chikki, ladoo	FE
N	Vegetables: Simple salad, dry and gravy vegetable	N.
0	Fruits: Fruit preparations using fresh fruits - jam, squash, fruit	SE
Δ	salad	
Z	Milk and products: Milk porridge – dalia; curd, paneer and	S
	their commonly made preparations- butter milk, lassi,	
A	shrikhand; milk based simple desserts and puddings -	4
	custards, kheer, ice-cream	
र्भ र	Egg : Hard and soft boiled, poached, scrambled, fried,	
E.	omelette, eggnog	
R R R R R R R R R R R R R R R R R R R	Soups : Basic, clear and cream soups	
	Snacks : Pakoras, upma, pohe	
	क अभूम स्वास्थ्य देखान्दर	
BND 102 Human Anatomy and Physiology

CL	СР	L	Р
3	1	45	30

OR ALLIED AND HE

Course Name	Human Anatomy and Physiology Theory
Course Description	This course shall enable the student to learn about the structure and functioning of the human body.
Objectives	1 To understand the anatomy of the various organs and organ systems of the human body.
NONA	2 To understand the functioning of the various systems of the human body
Reference Books	 Tortora, G.J. and Derrickson, B.H. (2017). Principles of Anatomy and Physiology. 15th Edition. John Wiley and Sons.ISBN 1119400066 Waugh, A and Grant, A. (2022). Ross & Wilson Anatomy and Physiology in Health and Illness. 14th Edition. Elsevier Health Sciences. ISBN 0323834612 Standring, S. Gray's Anatomy. (2020). The Anatomical Basis of Clinical Practice. 42nd Edition. Elsevier ISBN 0702077054
Webliography	Carbrey, J. and Jakoi, E. 2024. Introductory Human Physiology. Duke University. Available on Coursera. https://www.coursera.org/learn/physiology?action=enroll
Prerequisites	12 th Science or Food, Nutrition and Dietetics

Course Plan		
Unit	Торіс	Hours
1	Definition of Human anatomy and physiology Relevance of Human anatomy and physiology for Dietitians and Nutritionists Basic concepts –Anatomical positioning of various organs in the human body, Homeostasis -definition and relevance	2
2 VATIONAL VANNUS VANNUS	 Cell structure and functions- Cell organelles -Structure and functions of nucleus, cytoplasm, lysosomes, endoplasmic reticulum, Golgi apparatus, mitochondria, and cell membrane. Movement of particles across cell membrane -active transport and passive transport, body fluids and their compartments and functions Cellular growth, Mitosis, and meiosis. Tissues – Classification, structure, and functions Body fat and water percentage across the life cycle and relevance for health 	7 DOFESSIONS
3. 4.	Musculoskeletal system: structure and functions of bone, cartilage and connective tissue and muscle fibres. Types of muscles, structure and function. Bone health- Changes in bone mass during aging: osteoporosis Respiratory System: Structure and functions of organs of respiration, mechanism of respiration, Pulmonary ventilation, external & internal respiration. Role of hemoglobin. Regulation of respiration: nervous and chemical. Respiratory function tests, Lung volume & Capacities	3

5.	Digestive System: Structure and function of organs of gastro- intestinal tract- Oral cavity, oesophagus, stomach, small intestine, large intestine, colon, pancreas, liver and gall bladder.Role of liver, gall bladder and pancreas in digestion. Enzymes and hormones of the GIT. Role of gut microbiota.Digestion and absorption process.Gut brain connection	8
6.	Excretory System, : Anatomy and physiology of kidneys, ureter, urinary bladder.Structure and function of nephron. Glomerular filtration rate.Urine formation. Normal and abnormal constituents of urine.	3
ANDIDNA	Circulatory System: Structure and function of the heart and blood vessels. Capillary exchange. Regulation of cardiac output, cardiac cycle, blood-pressure and factors affecting it. Systemic, hepatic portal and pulmonary circulation. Interstitial fluid and lymph.Blood constituents-Erythrocytes, leucocytes, thrombocytes, plasma.Blood coagulation.Blood groups	T SNOIS93
8.	Endocrine system; Structure, Mode of Action and Physiological functions of Pituitary, Thyroid, Parathyroid, Adrenal and Reproductive Hormones.	3
9.	Immunology: Basic principles of Immunology- concept of immunity and types. Immunoglobulin- Types, general structure & function. T-Cells, B-Cells structure & function. Humoral and Cell-mediated Immunity. Role of nutrition in immunity	3

10		
10.	Regulation of body temperature: Thermo genesis, thermolysis,	2
	pyrexia, hypothermia, role of skin in maintaining body	
	temperature.Homeostasis -definition and relevance	
11.	Reproduction System: Male reproductive system -anatomy and	7
	physiology,	/
	Female reproductive system- anatomy and physiology, Organs	
	including hormones- structure and function, Menarche,	
	Menstruation and ovarian cycles, Pregnancy-conception, three	
MIS	trimesters, Parturition, Lactation, Menopause	
Z'		
Practical		0
Unit 1		1
	Respiratory System: Spirometry, Breath holding test, Use of	6
~ <0	Respirometer to estimate respiratory quotient	S
	Cardiovasquiar System: Massurament of blood prossure and	6
2.3	mulse mte	6
Z	pulse rate,	S
	Effect of exercise on blood pressure and pulse rate	
3.		F
	Blood test: Demonstration: Microscope, Haemocytometer,	8
£2	Blood, RBC count, Hb, WBC count, Differential Count	
4 .	Blood test: Demonstration : Microscope, Haemocytometer,	8
	Blood, RBC count, Hb, WBC count, Differential Count	
5.	Digestion: Test salivary digestion	2
	rulsed a	
6.	Example Examination of Uning Specific analytic Albumin	o
	Sugar, Microscopic examination for cells and cysts	0
	First aid medical skills like CPR, how to measure Blood	
	Pressure	

BND 103 Basics of Food Science

CL	СР	L	Р
3	1	45	15

Course Name	BND 103 Basics of Food Science
Course Description	It is a first basic course in Food Science. The course enables students to understand basic principles of Food Science.
Objectives	1. Understand the concepts and principles of Food Science.
AL CL	2. To gain knowledge of different plant and animal derived foods and their nutritive values and properties.
VOITA	3. Gain both theoretical as well as practical knowledge in handling foods and applying processing principles.
Reference Books	 Swaminathan. M.S(1987) Food science, Chemistry and Experimental Foods (2nd edition) Bappco Publishers Norman. N. Potter (2007) Food Science (5th edition) CBS Griswold R.M (1962,Digitized in 2008) Experimental study of Foods (digitized edition 2008) Houghton Mifflin Publishers Thangam Philip (1965 digitized in 2006).Modern Cookery for Teaching and Trade, volume I&II (Digitized edition 2006), Orient Longmans Ltd. ISBN 8125025189,9788125025184 MacWiliams (2013). Food Fundamentals (10th edition) Pearson Education. ISBN 1292054409,978129205407.

	 6. Shakunthala Manay & Shadakhraswamy.(2008) Food Facts & Principles(2008 Reprint) New Age International. ISBN 8122422152
	7. Srilakshmi .B.(2018) Food Science (7th edition). New Age
	International(P) Ltd, ISBN 9789386418890
Prerequisites	12 th Science or Food, Nutrition and Dietetics subject

CAPC

Course Plan

Theory

3	Milk– Milk composition and nutritive value; Homogenization, 9
	nasteurization of mink, types of pasteurization and effect on
	nuuruve value, UHI; MIIK Products – Flavored milk, Ice
	cream, Cheese and Milk powders; Preparation of Indigenous
	milk products - channa, paneer, Sandesh, Rasogolla and Khoa
	Eggs and Poultry: Structure of an egg; Composition and 9
4.	Nutritive value of eggs; functional properties of egg and cooking
	of eggs – green ring formation; preparation of egg powders;
.5	Nutritive value of poultry meat; Dressing of a poultry bird and
	cuts of poultry
N'	Meat – Structure of muscle, Composition and nutritive value of
22	meat, Classes of meat, Slaughter and steps in slaughtering of
~	animals, Postmortem changes of meat, factors affecting cooking
Z	quality of meat – Juiciness, marbling, flavor and tenderness;
0	Meat cooking techniques; Meat emulsion and value added meat
IL	products
N	Spices and Condiments: Roles of spices and condiments in 90
5.	cooking; health benefits and types of spices & herbs; Essential
	oils ,fixed oil and oleoresins; Primary processing of spices –
3	Sterilization of spices; milling of spices and cryogenic grinding
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	of spices; Curry Powders
E.	Oils and Fats: Types of fats and oils; Smoking oils, Physical and
Ŕ	chemical properties of oils- FFA, Iodine value, saponification,
	Rechiert Miessl value, fat emulsification and emulsifiers; Factors
	affecting absorption of oils; Processing of oils- Oil extraction,
	Defining of alls and Exceptionation of alls: hydrogeneted fate
	Remning of ons and Fractionation of ons, hydrogenated fats,
	Mayonnaise and specialty fats
	Mayonnaise and specialty fats Sensory Evaluation of Foods: Types of sensory organs,
	Mayonnaise and specialty fats Sensory Evaluation of Foods: Types of sensory organs, Perception of sensory response, Basic tastes, Preparation of
	Mayonnaise and specialty fats Sensory Evaluation of Foods: Types of sensory organs, Perception of sensory response, Basic tastes, Preparation of sensory card using various methods
	Mayonnaise and specialty fats Sensory Evaluation of Foods: Types of sensory organs, Perception of sensory response, Basic tastes, Preparation of sensory card using various methods

	Practical	
1.	Cooking methods Moist heat methods – (i) boiling, simmering, steaming & Pressure cooking	2
2.	ii) Dry heat methods – baking. (iii), Fat as a medium for Cooking - shallow and deep fat frying.	2
3.	Studying Temperature of gelatinization in different cereal and millet starches and gel Strength	2
4.	Cooking of soaked and unsoaked pulses	2
5.	Common preparations with pulses – Composite mixes and malts	2
6.	Processing of vegetables- Fermentation and Pickling	2
λ <del>ι</del> .	Prevention of darkening in fruits & vegetables	2
8.	Preservation of fruits - Jam, Jelly and Candied fruit	2
9.	Preservation of fruits – Dehydration of fruits and vegetables	2
10.	Processing of Milk & milk products – Paneer and Cheese.	2
11-0-57-71	Processing of Milk & milk products - Common preparation indigenous milk sweets like Channa based Rasogolla and Sandesh	2
12.	Processing of Flesh foods: meat & poultry- preparations like pickling and value added products – nugget , meat loaf and meat balls	2

13.	Processing of Flesh foods: Fish and shrimp – preparations like battered shrimp, Pickled fish & shrimp; fish wafers and fingers	2
14.	Egg Experimental cookery- boiled egg, poached egg. Common preparations with eggs.	2
15.	Sensory Evaluation and preparation of score card.	2
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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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# **BND 104 Environmental Science (Theory)**

CL	СР	L	Р
2	0	30	0

Course Name	Environmental Science
Course	It is the first basic course in Environmental Science giving an insight
Description	into various aspects of environment, ecology, and conservation of
M	Natural resources.
Objectives	1. Understand the concepts and principles of Environmental Science.
$\geq$	2. Develop the students' knowledge base to conserve nature and
ZNU Z	forests to fight climate change
	3. Develop and apply knowledge regarding Disaster management
- YN	and preserve the food chain
Reference Books	
	1. Fellows P.J (2017) Food Processing Technology (4 th edition)
A	Wood head Publishing series. ISBN 978-0-08-101907- 8
	2. Norman. N. Potter (2007) Food Science (5 th edition) CBS
+X 44	publishers. ISBN 812390472X
	3. Griswold R.M (1962, Digitized in 2008) Experimental study of
	Foods (digitized edition 2008) Houghton Mifflin Publishers
6.0	4. Deepak Mudgil and Shwetha Barak (2018). Beverages:
6	Processing and Technology (1 st edition) Scientific Publishers
	,ISBN 9387991725,9789387991729
	5. Matz S.A (2008). <i>Bakery Technology &amp; Engineering</i> (3 rd edition
	Reprint) CBS Publishers India. ISBN 0942849302
	6. MacWiliams (2013). Food Fundamentals (10th edition) Pearson
	Education. ISBN 1292054409,978129205407

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		7. Robert Guy (2001). <i>Extrusion cooking</i> (1 st edition	reprint)
		Elsevier. ISBN 1855736314	
		8. Minife and Minife(2012).Cocoa, Confectionery, and c	hocolate
		products (3 rd edition reprint) Springer Netherlands	. ISBN
		9401179263,97899401179263	
		9. Sanjeev Kumar and Srivastava (2017). Fruit and V	egetable
		Preservation (3 rd edition Reprint).International Book Dis	tributing
		Company.ISBN8123924372,9788123924373	
	(0)		
	S	C.A.	
Prerequisit	tes	12 th Science or Food, Nutrition and Dietetics	
Course Pla	n		OP
Unit		Торіс	Hours
Z			m
1.2	Multidi	sciplinary nature of environmental studies- Definition, scope	6
	and imp	ortance. Natural resources- Renewable and non-renewable	0
A	resource	s and their associated problems. Forest resources- Use and	Z
Z	over-exp	loitation, deforestation, timber extraction, mining, dams and	S
	their effe	ects on forest and tribal people	
A	Water 1	resources- Use and over-utilization of surface and ground	F
6	water, f	loods, drought, conflicts over water, dams-benefits and	5
+2	problem	s. Mineral resources- Use and exploitation, environmental	
5	effects of	of extracting and using mineral resources. Food resources-	
	World	food problems, changes caused by agriculture and	
	overgraz	ing, effects of modern agriculture, fertilizer-pesticide	
	problem	s, water logging, salinity.	
		अरि स्वास्थ्य देखान्य	

2.	Energy resources- Growing energy needs, renewable and non-	6
	renewable energy sources, use of alternate energy sources. Land	
	resources- Land as a resource, land degradation, man induced	
	landslides, soil erosion and desertification. Role of an individual in	
	conservation of natural resources, equitable use of resources for	
	sustainable lifestyles.	
	Ecosystems- Concept, structure and function of an ecosystem.	
	Producers, consumers and decomposers, energy flow in the	
	ecosystem, ecological succession. Food chains, food webs and	
	ecological pyramid <mark>s. Introduction, type</mark> s, characteristic features,	
	structure and function of forest, grassland, desert and aquatic	
6	ecosystems.	
7		OT
3.	Biodiversity and its conservation- Introduction, definition, genetic,	6
0	species, ecosystem diversity and biogeographical classification of	S
E	India. Value of biodiversity- Consumptive use, productive use,	0
AN	social, ethical, aesthetic and option values. Biodiversity at global,	Z
	national and local levels, India as a mega-diversity nation. Hot-sports	
	of biodiversity. Threats to biodiversity- Habitat loss, poaching of	
4	wildlife, man-wildlife conflicts, endangered and endemic species of	F
- Sh	India. In-situ and Ex-situ conservation of biodiversity.	5
+2	Environmental pollution- Definition, cause, effects and control	-
9	measures of air, water, soil, marine, noise and thermal pollution and	
	nuclear hazards. Solid waste management- Causes, effects and	
	control measures of urban and industrial wastes. Role of an	
	individual in prevention of pollution.	
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4.	Social issues and the environment- Unsustainable to sustainable	6
	development, urban problems related to energy. Water conservation,	
	rain water harvesting, watershed management. Environmental ethics-	
	Issues and possible solutions, climate change, global warming, acid	
	rain, ozone layer depletion, nuclear accidents and holocaust.	
	Environment protection acts- Air (Prevention and control of	
	pollution) act, water (Prevention and control of pollution) act,	
	wildlife protection act, forest conservation act, Issues involved in	
	enforcement of environmental legislation, public awareness. Human	
	population and the environment- Population growth, variation among	
	nations, pop <mark>ulation explosion. Role of Information</mark> Technology in	
6	environment and human health.	
5	Natural disasters. Meaning and nature types (floods drought	
NY NY	cyclone earthquakes landslides avalanches volcanic eruptions heat	
$\geq$	and cold waves, global warming sea level rise, ozone depletion) and	S
0	effects Man-made disasters- Nuclear chemical and biological	013
A	disasters building fires coal fires forest fires oil fires road	N
Z	accidents rail accidents air accidents and sea accidents	S
	Disaster management- International strategy for disaster reduction at	
A	national and global levels. National disaster management framework-	F
	Financial arrangements role of NGOs community-based	5
+2	organizations and media, central, state, district and local	
ÿ	administration, armed forces in disaster response, police and other	
	organizations. Feeding the people struck by the disaster, managing	
	house and dress need during disaster	
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# BND 105 Indian Knowledge System on Foods

CL	СР	L	Р
2	0	30	0

Course Name	Indian Knowledge System on Foods 2 (2+0)
Course Description	This course focuses on the Indian food cultures across the states and Union territories. Understand the local household food traditions and understand Indian food anthropology which can be used for the Eat Right Movement.
Objectives	1. To explore and understand the Indian Knowledge system in the context of the diverse Indian food culture.
ATIONA	2. To understand the concept of Food Anthropology and its importance - regional cuisines, culinary traditions historical, cultural, and social factors that have shaped Indian food practices and traditions over time.
Z	3. To analyze the Dietary Patterns and Investigate the local, Indigenous ingredients used in traditional Indian culinary practices across different parts of India- Central, Northern, Western, and Eastern India.
	4. To understand the traditions of the food-related customs, rituals, and daily practices in Indian households across various regions.
	5. To promote the rich culinary heritage of India and explore ways to preserve and promote traditional food practices by documenting and recording traditional recipes, cooking methods, and food stories from different regions.
	6. To support the Eat Right Movement and Integrate knowledge of regional food cultures into the Eat Right Movement, promoting healthy eating habits and sustainable food practices.

Reference	e	1. Nambiar, V. (Ed.). (2021). Indian Food Anthropology	y and the Eat	
Books		Right Movement- Volume 1. Selective & Scientific B	Books. ISBN:	
		978-81-951492-2-3.		
		2. Nambiar, V. (Ed.). (2021). Indian Food Anthropology	y and the Eat	
		Right Movement- Volume 2. Selective & Scientific B	Books. ISBN:	
		978-81-951492-4-7.		
		COR ALLIEU ANU HE		
		3. Achaya, K. T. (1994). Indian food: a historical compa	nion. Oxford	
	S	University Press. ISBN-13978-0195634488		
	N	4. Sen, C. T. (2014). Feasts and fasts: A history of fo	ood in India.	
		Reaktion Books. ISBN-13978-1780233529.	0	
8			R	
Webliog	raphy	1. <u>Indian Knowledge Systems :: (iksindia.org)</u>	OT I	
Z		2. Centre for Indian Knowledge Systems (ciks.org)	ET .	
$\leq$			S S	
Prerequi	sites 12 th Science or Food, Nutrition and Dietetics			
Course I	Plan		SN	
			0,	
Unit		Topics	Hours	
Unit	Introdu	<b>Topics</b> ction to Indian Knowledge Systems and its importance as	Hours 6	
Unit	Introdu per NE	<b>Topics</b> ction to Indian Knowledge Systems and its importance as P 2020.	Hours 6	
Unit	Introdu per NE Traditio	<b>Topics</b> ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and	Hours 6	
Unit	Introdu per NE Traditio Region	<b>Topics</b> ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh,	Hours 6	
Unit	Introdu per NE Traditio Region Punjab	<b>Topics</b> ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu,	Hours 6	
Unit	Introdu per NE Traditio Region Punjab Kerala,	<b>Topics</b> ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka)	Hours 6	
Unit 1	Introdu per NE Traditio Region Punjab Kerala,	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka)	Hours	
Unit 1 2	Introdu per NE Traditio Region Punjab Kerala, Traditio	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka) onal diets and food culture (Food anthropology) and	Hours 6 6	
Unit 1 2	Introdu per NE Traditio Region Punjab Kerala, Traditio Region	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka) onal diets and food culture (Food anthropology) and al diets of Central India (Uttar Pradesh, Madhya Pradesh)	Hours 6 6	
Unit 1 2	Introdu per NE Traditio Region Punjab Kerala, Traditio Region and We	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka) onal diets and food culture (Food anthropology) and al diets of Central India (Uttar Pradesh, Madhya Pradesh) estern India (Gujarat, Maharashtra, Rajasthan, Goa).	Hours 6 6	
Unit 1 2	Introdu per NE Traditio Region Punjab Kerala, Traditio Region and We	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka) onal diets and food culture (Food anthropology) and al diets of Central India (Uttar Pradesh, Madhya Pradesh) estern India (Gujarat, Maharashtra, Rajasthan, Goa).	Hours 6 6	
Unit 1 2	Introdu per NE Traditio Region Punjab Kerala, Traditio Region and We	Topics ction to Indian Knowledge Systems and its importance as P 2020. onal diets and food culture (Food anthropology) and al diets of North India (Jammu, Kashmir, Ladakh, , Haryana, Uttarakhand) and South India (Tamil Nadu, Andhra Pradesh, Telangana, Puducherry, Karnataka) onal diets and food culture (Food anthropology) and al diets of Central India (Uttar Pradesh, Madhya Pradesh) estern India (Gujarat, Maharashtra, Rajasthan, Goa).	Hours 6 6	

3.	Traditional diets and food culture (Food anthropology) and	6
	Regional diets of anthropology Regional diets of East India	
	(West Bengal, Bihar, Odisha) and	
4.	Traditional diets and food culture (Food anthropology) and	6
	Regional diets of North east India (Assam, Mizoram, Manipur,	
	Meghalaya, Sikkim, Nagaland, Tripura, Arunachal Pradesh)	
5.	Traditional diets and food culture (Food anthropology) of	6
	specific religions of India (Mulsims, Parsi, Buddhist, Sikhs and	
	any other local communities).	P
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# **BND 106 Computer literacy**

CL	СР	L	Р
0	2	0	60

Course Name	Computer literacy Practical
Course Description	The course is designed to introduce students to computer basics and its application for nutritionists and dietitians.
Objectives	1 To know about the various parts of a computer and to understand how it's working.
5	2 To learn about word processing, spreadsheets and making presentations
Reference Books	Balagurusamy E., Fundamentals of Computers (2009). Tata McGraw Hill Education Private Limited NEW DELHI ISBN 9780070141605
Webliography	<ol> <li>E-Learning Material Computer Application of 1st/2nd semester of all Engineering Branches of Diploma courses of SCTE&amp;VT, Odisha. Ajay Ku. Panda, D. Susmita, Ajit Ku. Behera, Kalpana Panigrahi, Swetalina Das, Published by SCTE&amp;VT, Odisha, Bhubaneswar-12 https://sctevtodisha.nic.in/en/ secretarysctevt@gmail.com,material.sctevt@gmail.com</li> <li>Basic Applications of Computers <u>http://egyankosh.ac.in//handle/123456789/50864</u></li> <li>Computer Basics (Video) <u>http://hdl.handle.net/123456789/35766</u></li> <li>Nil</li> </ol>

Course Plan		
Unit	Торіс	Hours
1.	Introduction and Basic Applications of Computer	6
	Components of Computer System - Central Processing Unit,	
	Keyboard, mouse and VDU, Other Input devices, Computer Memory	
	Concept of Hardware and Software - Application Software, Systems	
	software	
	Concept of computing, data, and information Applications of IECT	
	Bringing computer to life- Connecting keyboard, mouse, monitor	
N.	and printer to CPU, Checking power supply	
00	Operating Computer using GUI-Based Operating System :	6
~	What is an Operating System;	
X	Basics of Popular Operating Systems; The User Interface, Using	
10	Mouse; Using right Button of the Mouse and Moving Icons on the	2
Ē	screen, Use of Common Icons, Status Bar, Using Menu and	2
AN	Selection, Running an Application, Viewing of File	S
	Folders and Directories, Creating and Renaming of files and folders,	8
A	Opening and closing of different Windows; Using help; Creating	-
R	Short cuts, Basics of O.S Setup; Common utilities.	
14	Understanding Word Processing: Word Processing Basics; Opening	6
	and Closing of documents; Text creation and Manipulation;	
15	Formatting of text; Table handling; Spell check, language setting and	
	thesaurus; Printing of word document.	
	Using Spread Sheet: Basics of Spreadsheet; Manipulation of cells;	4
	Formulas and Functions; Editing of Spread Sheet, printing of Spread	
	Sheet.	

	-
2.	Basic of Computer networks; LAN, WAN; Concept of Internet; 6
	Understanding the World Wide Web, Web Browsers, Browsing the
	internet, Using a Search Engine, connectivity related troubleshooting,
	World Wide Web; Web Browsing softwares, Search Engines;
	Understanding URL; Domain name; IP Address; Using e-governance
	website
	Input Devices: Keyboard, Pointing Devices, Scanning Devices, 6
	Optical Recognition Devices, Digital Camera, Voice Recognition
5	System, Data Acquisition Sensors, Media Input Devices
R.	Output Devices: Display Monitors, Printers, Voice Output Systems, 4
CON	Projectors, Terminals
~	Communications and collaboration: Basics of electronic mail; 6
X	Getting an email account; Sending and receiving emails; Accessing
0	sent emails; Using Emails; Document collaboration; Instant
E	Messaging; Netiquettes.
<b>V</b>	Making Presentation, Paging of anomatotion auftrump, Creating (2)
	Making Presentation: Basics of presentation software; Creating 8
	The sentation; Preparation and Presentation of Slides; Slide Snow;
4	Taking printouts of presentation/handouts.
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	र्भ स्वास्थ्य देखा

# BND 107 English For Communication ( Theory )

CL	СР	L	Р
2	0	30	

Course Name	English For Communication (Theory)
Course Description	It is a first basic course for developing Communication skills.
Objectives	1. Understand the significance of communication, the process and different types of communication
JAN	2. Read fluently and comprehend the prescribed texts and write independently required for professional written communication
JITAV	3. Converse confidently in English and participate in discussions conducted in English
Reference Books	<ol> <li>The above said skills would be developed with the integration of Language Lab software in the English tutorials and with the help of selected texts from the book 'Reflections II -An Anthology of Prose, Poetry and Fiction by Nandini Nayar (Foundation Books);</li> <li>Punishment in kindergarten – A poem by Kamala Das</li> <li>People who never took a 'No' – Case study of Akio Morita and Henry Ford</li> <li>The Wonders of new millennium – by Michael David</li> </ol>
Prerequisites	12 th Science or Food, Nutrition and Dietetics

Course Plan		
Unit	Торіс	Hours
1.	Introduction to Communication: Explain the significance of Communication. Discuss the process of communication, 3. Identify different types of communication	5
2.	Reading prescribed texts, narratives and articles: Read fluently and comprehend prescribed texts, .Read the text / poems with understanding and enjoyment, Summarize the given text	10
3. NATIONAL COAST	<ul> <li>Writing - Letter ; Report writing, Write business letters effectively</li> <li>Prepare a report of an event /visit with correct usage of grammar and tense. Public Speaking: Draft various kinds of speeches and</li> <li>Vote of thanks .Interact and communicate confidently at professional level. Demonstrate listening skills (with the language lab software)</li> <li>Practice enhanced listening skills, Demonstrate the correct pronunciation with proper stress, intonation and pacing</li> </ul>	15
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#### Second Semester

### **BND 201 FOOD MICROBIOLOGY**

CL	СР	L	Р	
3		45	30	
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Course Name	BND 201 FOOD MICROBIOLOGY
Course	General Microbiology, Morphology & growth of microorganisms,
Description	Microb <mark>iology o</mark> f Plant & Animal based foods, Fermented food & its
CC	beneficial effects on Humans
Objectives	1. Obtain knowledge on morphology of microorganisms and types of
NO	microscopy
ATI	2. Understand the factors influencing the growth of microorganisms
Z	3. Apply
	thepreservationprinciplesandmethodstopreservethefoodsfrommicrobial
R	contamination
A PE	4. Explore the beneficial effects of microorganisms in the development of fermented foods
Text Books 🖒	1. Frazier C (2024) Food Microbiology, (6th Revised Edition), Science
	Technology. Since-2021
	2. Narang.S.P (2014), Food Microbiology, APH Publishing
	Corporation, New Delhi. 9788176487405
	3. Foster WM(2016), Food Microbiology, CBS Publishers and Distributors
	Pvt.,Ltd,New Delhi. 9788123929125

Reference	1. Adams, M. R., & Moss, M. O. (2015). Food microbiology. New Age
Books	International (P) Ltd., New Delhi. ISBN-13: 978-8122439756
	2. Cappuccino, J. G., & Sherman, N. (2008). Microbiology: A laboratory
	manual (8th ed.). Pearson Education. ISBN-13: 978-0321648785
	3. Jay, J. M. (2015). <i>Modern food microbiology</i> (4th ed.). CBS Publishers &
	Distributors.ISBN-13: 978-8123912044
	FOR ALLIED AND HEA
Webliography	1. Frontiers in Microbiology, Frontiers,
e c	https://www.frontiersin.org/journals/microbiology/sections/food-
2M2	microbiology/about
201	2. Food Microbiology Academy, foodmicrobiology. academy
	3. Science.gov,
PN1	https://www.science.gov/topicpages/f/fundamental+food+microbiology
Prerequisites	Basics of Biology, Food Science/ Fundamentals of Nutrition
Course Plan	SP
Unit	Topic     Hours
1	Introduction to Microbiology
No.	Importance of microbiology for Dieticians - recent examples
A A	Morphology and Growth factors of Microorganisms; Definition
	and History Microscopy, Light and electron Microscopy, Listing
B	and History Microscopy, Light and electron Microscopy, Listing other Types. General Morphology of Microorganisms Bacteria,
19	and History Microscopy, Light and electron Microscopy, Listing other Types. General Morphology of Microorganisms Bacteria, Fungi, Algae, Yeast and Virus Bacteriophage
Re l	and History Microscopy, Light and electron Microscopy, Listing other Types. General Morphology of Microorganisms Bacteria, Fungi, Algae, Yeast and Virus Bacteriophage Microbial Biomass, Growth Curve, Definition of Batch and
1 A A A A A A A A A A A A A A A A A A A	<ul> <li>and History Microscopy, Light and electron Microscopy, Listing</li> <li>other Types. General Morphology of Microorganisms Bacteria,</li> <li>Fungi, Algae, Yeast and Virus Bacteriophage</li> <li>Microbial Biomass, Growth Curve, Definition of Batch and</li> <li>Continuous culture, Factors Affecting Growth Intrinsic Factors,</li> </ul>
13 A	and History Microscopy, Light and electron Microscopy, Listing other Types. General Morphology of Microorganisms Bacteria, Fungi, Algae, Yeast and Virus Bacteriophage Microbial Biomass, Growth Curve, Definition of Batch and Continuous culture, Factors Affecting Growth Intrinsic Factors, Nutrient Content, pH, Redox Potential, Antimicrobial Barrier and
13 A	and History Microscopy, Light and electron Microscopy, Listing other Types. General Morphology of Microorganisms Bacteria, Fungi, Algae, Yeast and Virus Bacteriophage Microbial Biomass, Growth Curve, Definition of Batch and Continuous culture, Factors Affecting Growth Intrinsic Factors, Nutrient Content, pH, Redox Potential, Antimicrobial Barrier and Water Activity.
1 A A A A A A A A A A A A A A A A A A A	<ul> <li>and History Microscopy, Light and electron Microscopy, Listing</li> <li>other Types. General Morphology of Microorganisms Bacteria,</li> <li>Fungi, Algae, Yeast and Virus Bacteriophage</li> <li>Microbial Biomass, Growth Curve, Definition of Batch and</li> <li>Continuous culture, Factors Affecting Growth Intrinsic Factors,</li> <li>Nutrient Content, pH, Redox Potential, Antimicrobial Barrier and</li> <li>Water Activity.</li> <li>Extrinsic Factors: Relative Humidity, Temperature and Gaseous</li> </ul>
1 A A A A A A A A A A A A A A A A A A A	<ul> <li>and History Microscopy, Light and electron Microscopy, Listing</li> <li>other Types. General Morphology of Microorganisms Bacteria,</li> <li>Fungi, Algae, Yeast and Virus Bacteriophage</li> <li>Microbial Biomass, Growth Curve, Definition of Batch and</li> <li>Continuous culture, Factors Affecting Growth Intrinsic Factors,</li> <li>Nutrient Content, pH, Redox Potential, Antimicrobial Barrier and</li> <li>Water Activity.</li> <li>Extrinsic Factors: Relative Humidity, Temperature and Gaseous</li> <li>Atmosphere</li> </ul>

2.	Microbiology of Plant and animal based foods	15
	Outline of Contamination, Spoilage and Preservation of	
	Vegetables and Fruits, Cereals and Cereal Products, Pulses, Nuts	
	and oil seeds, Sugar and Sugar Products	
	Outline of Contamination, Spoilage and Preservation of Milk	
	and Milk Products, Canned Foods, Meat and Meat Products, Egg	
	and Poultry	
3.	Significance of Microbes in food quality, food safety and	15
	standards: App <mark>lications of HACCP</mark> in Nutrition and Dietetics	
<u> </u>	Beneficial and Harmful Effects of Microorganisms: Fermented	
6	Foods-Curd, Cheese, Sauerkraut, Meat, Soy Based Foods,	6
5	Alcoholic Beverages and Vinegar	2
NATIONA SEC.	स्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 अरु स्वास्थ्य देखान्यम	ESSIONS • Trip

## FOOD MICROBIOLOGY PRACTICAL

Unit	Торіс	Hours
1.	Basic lab techniques for food microbiology	2
2.	Bright field light microscopy	2
3.	Hanging Drop Method–Motility of Bacteria	2
4.	Staining of Bacteria–Simple Staining, Gram Staining	4
5.	Sterilization techniques	$\mathbf{r}^{2}$
6.	Preparation of common laboratory media, broth and slant	2
7.	Serial dilution and plating techniques– pour plate, streak plate	45
8. <b>0</b> 11	Enumeration of cell counts– colony forming units.	4 50
9. VN	Most probable number test	² NS
10.	Microbial analysis of water	2
11.	Microbial analysis of liquid foods –Milk and Fruit juice	2
12.	Microbial analysis of solid foods	2
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	Since-2021	
	र अगेर स्वास्थ्य देखान्य	

## BND 202 FUNDAMENTALS OF BIOCHEMISTRY

CL	СР	L	Р
3	1	45	30

ALLIED AND HO		
Course Name	FUNDAMENTALS OF BIOCHEMISTRY	
Course Description	Study of Biochemistry of Major Nutrients, Classification- Structure and Properties of Carbohydrates, Lipids, Amino acids and Proteins, Nucleic acids, Enzymes and Vitamins	
Objectives	1. To enable the students to obtain depth in the study of biochemistry of major nutrients	
VATIO/	<ol> <li>To help the students to understand the basic metabolic pathways</li> <li>To gain knowledge about the defects in various metabolic pathway</li> </ol>	
Text Books	<ol> <li>Satyanarayana, U., &amp; Chakrapani, U. (2021). Biochemistry (Revised reprint) (6th ed).Elsevier. ISBN-13:978-8131264355</li> <li>Nelson, D. L., &amp; Cox, M. M. (2021). Lehninger principles of biochemistry (8th ed.). W.H. Freeman and Company NewYork.ISBN- 13 : 978-1319381493</li> </ol>	
SAC	<ul> <li>3. Dickson, J. K. (2020). Food biochemistry. CBS Publishers &amp; Distributors. ISBN-13: 978-9389396355</li> <li>4. Appling, D. R., Cahill, S. J. A., &amp; Mathews, C. K. (2018). Biochemistry: Concepts and connections (2nd ed). Pearson Education Limited. ISBN-13 : 978-0134641621</li> </ul>	

Reference Books	<ol> <li>Kennelly, P., Botham, K., McGuinness, O., Rodwell, V., &amp; Weil, P. A.(2022). <i>Harper's illustrated biochemistry</i> (32nd ed.).McGraw Hill. ISBN-13: 9781260469943</li> </ol>		
Webliography	1.       Biochemical       Society.         https://www.biochemistry.org.       Image: Compared and the second and th		
	2.E-learning.AOAC India.https://aoac-india.org/e-learning/		
Prerequisites	Fundamentals of Nutrition, Basics of Chemistry		
Course Plan	AP.		
Unit	Topic Hours		
2. Lipids phosph Charac acids	accharides (hexoses andpentoses). Reactions of accharides–oxidation, reduction, and reaction with hydrogen le, hydroxylamine, and phenylhydrazine. accharides – Sucrose, maltose, Classification–Triglycerides(Fats), Phospholipidsandothernon-horylated lipids–cerebrosides, gangliosides, sulfolipids. cereization of fats. Rancidity of fats. Chemistry of Essential fatty		
3. Amino standa physic to ami amino import	20 acids, Peptides and Proteins: Structure and classification of rd amino acids- rare amino acids and non-protein amino acids – al and electrochemical properties- reactions of amino acids- due ino groups, carboxyl groups, and R groups – color reactions of acids. Peptides- Peptide bond, structure, and biological cance of glutathione and valinomycin.		

4.	Nucleic acids and Enzymes : Composition and function.	12
	Structure and properties of DNA and RNA (t-RNA, m-RNA, and r-	
	RNA), minor RNA types.	
	Classification of enzymes.IUB classification Enzyme kinetics-	
	Michaelis Menten equation. Factors affecting enzyme activity (pH,	
	temperature, substrate concentration and enzyme concentration).	
	FUIL	
PRACT	ICAL	

# PRACTICAL

Unit	Торіс	Hours
1	Good Laboratory Practices	5
	Safety measures in Laboratory, Preparation of Molar and Normal	OT I
Z	solutions, Safety Hazards and Disposal of waste <mark>s, Cal</mark> ibration of	T
6	volumetric glassware- burette, pipette, and measuring cylinder	S
2	Reactions of Monosaccharides, Disaccharides and Polysaccharides :	5 🔵
M	Pentose, Glucose, Fructose, Galactose and Mannose, Sucrose,	Z
2	Maltose, Lactose, Starch, Dextrin and glycogen	
3	Qualitative analysis of Proteins; Precipitation reactions of proteins,	10
A	color reactions of proteins, color reactions of amino acids, Color	E
R	reactions of proteins- Biuret, Xanthoproteic, Millon's	R
4	Qualitative analysis of Lipids : Solubility, Acrolein test, Salkowski	10
	test, Lieberman- Burchard test. Demonstration- Characterization of	
	fats- acid number, iodine number, saponification number, and RM	
	number. Since-2021	
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### **BND 203 Nutrition Through Life Cycle**

CL	СР	L	Р
2	2	30	60

## **Course Name BND 203 Nutrition Through Life Cycle** Course The course is designed to introduce students to the concept of meal Description planning during the various phases of life cycle with emphasis on heathy diet and lifestyle. The students shall be made to understand the nutritional requirements, recommendations, nutrition related problems and concerns of each age group. **Objectives** 1 To understand the concept of meal planning and dietary guidelines. 2 To learn about the dietary management during various stages of life 3. To learn about the nutritional concerns and its management during various stages of life. 4. To understand the concept and use of food exchange list and to learn planning and preparation of meals for various stages of life Khanna K, Gupta S, Seth R, Passi SJ, Mahna R, Puri S (2013). Textbook Reference of Nutrition and Dietetics. Phoenix Publishing House Pvt. Ltd. ISBN Books Since-2021 8188901539 Wardlaw GM, Hampi JS, DiSilvestro RA (2004). Perspectives in Nutrition, 6th edition. McGraw Hill. ISBN 0072921633, 9780072921632 Chadha R and Mathur P eds. Nutrition: A Lifecycle Approach. Orient Blackswan, New Delhi, 2015.ISBN 9788125059301 Bamji MS, Krishnaswamy K, Brahmam GNV (2009). Textbook of Human Nutrition, 3rd edition. Oxford and IBH Publishing Co. Pvt. Ltd. ISBN 9788120417427

	Srilakshmi B. 9th Edition (2023). Dietetics. New Age Publishe	ers.ISBN		
	9395161841			
	Seth V and Singh K (2006). Diet Planning through the Life Cycle	: Part 1		
	Normal Nutrition. A Practical Manual. Elite Publishing House Pu			
	New Delhi. ISBN 8193599624			
	Indian Food Composition Tables (2023), NIN, Hyderaba	d ISBN		
	9352676777			
	Dietary Guidelines for Indians A Manual, Revised Edition 2024	. ICMR		
C.	NIN, Hyderabad			
Prerequisites	First semester of nutrition and knowledge of basics of nutrition	and food		
NO	science	0		
Unit	Торіс	Hours		
1.	Basic concepts of meal planning :	6		
0	EAR and RDA, Concept of Dietary Reference Intakes,	S.		
Dietary Guidelines for Indians, Meal planning: objectives and				
<b>M</b>	principles, Factors affecting meal planning - Nutritional,	Z		
	socio-cultural, religious, geographic, economic, availability			
	of time, energy and resources, Indian meal patterns -			
4	vegetarian & non-vegetarian.Food faddism, unhealthy food	F		
	habits.	k		
2.	Nutrition during Adulthood: Reference women and man	3		
I I I	Nutritional requirements, recommendations, nutrition-related			
6	problems and concerns, and Meal planning with emphasis on			
	healthy diet and lifestyle to prevent chronic diseases			
3.	Nutrition in Pregnancy and Lactation Physiological stages of	5		
	pregnancy, Physiology of lactation, Nutritional requirements.			
	recommendations, nutrition-related problems, and concerns			
	Meal planning with emphasis on maternal and child health			

4.	Nutrition for Infancy: Importance of breastfeeding, Exclusive	4
	breastfeeding, early initiation, colostrum, Nutritional	
	requirements. recommendations, nutrition-related problems,	
	and concerns, Complementary Feeding – timely introduction	
	of appropriate foods, adequacy, consistency, frequency,	
	utilization and safety, Meal planning with emphasis on	
	exclusive breastfeeding ED AND	
5.	Nutrition during growing years : Nutritional requirements,	6
5	nutritional guidelines and healthy food choices : Preschool	
M	children, School children. Adolescents, Meal planning with	
A.	emphasis on growth and development and establishment of	0
CO	healthy food habits and physical activity	B
6. 7	General Diets for Athletes	3
70	Geriatric Nutrition : Physiological changes during old age,	30
	Nutritional requirements, nutritional guidelines, nutritional	0
AN	concerns, and healthy food choices, Meal planning with	$\sum_{i=1}^{i}$
	emphasis on maintenance of good health	
Practical		74
Unit	स्वास्थ्यम संवर्धसंघनम	Hours
UNIT ONE	NCAHP	
1.	Introduction to meal planning, Use of food exchange list,	6
	Recipe standardization	
2.	Meal Planning (as per nutritional requirements) and	6
	preparation of healthy diets and dishes for adult man and	
	woman	
3.	Meal Planning (as per nutritional requirements) and	6
	preparation of healthy diets and dishes for pregnant woman	

4.	Meal Planning (as per nutritional requirements) and preparation of healthy diets and dishes for lactating woman	6
5.	Meal Planning (as per nutritional requirements) and preparation of healthy diet and dishes for infants. Planning homemade premixes.	6
6.	Meal Planning (as per nutritional requirements) and preparation of healthy diet and lunch box dishes for Preschool child	6
7. Miles	Meal Planning (as per nutritional requirements) and preparation of healthy diet and lunch box for School-age child	6
8. YO	Meal Planning (as per nutritional requirements) and preparation of healthy diet and lunch box for adolescents.	6ESS
9. V	Planning healthy snacks and beverages for all age groups	

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# BND 204 Psychology and Sociology Applied to Health Care

CL	СР	L	Р
4	0	60	0

Semester	FOR ALLIED AND HEAD
Course Name	Psychology and Sociology Applied to Health Care
Course Description	Introduction to psycho-social interventions approach, Social Determinants of Health, Case studies, and Application of Psycho-Social science theories
Objectives	<ul> <li>To explain and discuss the relationship between Society and Health;</li> <li>To explain concepts of health and illness from the sociological point of view;</li> <li>To enumerate the different systems of medical Care and their relation to health-seeking behaviour with reference to India; and</li> <li>To explain the pattern of utilization of the health system.</li> </ul>
Text Books	<ul> <li>Warr, P. B. (2002). <i>Psychology at work</i>. Penguin Books Ltd. ISBN-13 : 978-0141000107</li> <li>Pasricha, N. (2016). <i>The happiness equation: Want nothing + do anything = have everything</i>. G.P. Putnam's Sons. ISBN-13 : 978-0425277980</li> </ul>
Reference Books	<ul> <li>Pryce-Jones, J. (2010). Happiness at work: Maximizing your psychological capital for success. John Wiley &amp; Sons. ISBN-13:978-0470749463</li> <li>Gilbert, D. (2006). Stumbling on happiness. Alfred A. Knopf. ISBN-13: 9780739474556</li> <li>Levy, P. (2016). Industrial/organizational psychology: Understanding the workplace. (5th edit). Worth Publishers.ISBN-13: 978-1319014261</li> </ul>

	• Rubin, G. (2009). The happiness project: Or, why I spent a year trying to sing in
	the morning, clean my closets, fight right, read Aristotle, and generally have more
	fun. HarperCollins.ISBN-13 : 978-0061583254
	• Breuning, L. G. (2016). Habits of a happy brain: Retrain your brain to boost
	serotonin, dopamine, oxytocin, and endorphin levels. Adams Media. ISBN-13 :
	978-1440590504
Prerequisites	Basic concepts of Psychology and sociology related to health

## **Course Plan**

			-		
	NISSION.	Course Pl	an	HCAD	
Unit	Торіс			ín.	Hours
1.	Introduction to ps	ychology and sociolog	y , Foundationa	l psychological	18
2	theories and findin	gs in psychology.psych	no-social interven	tions approach:	T
	Relationship betw	een Psychology and	Sociology, C <mark>onc</mark>	ept of Health,	Ś
0	Concept of Illne	ess, Illness: Sociolog	gical View, ps	ychotherapeutic	S
	approaches for the	treatment and care of	persons with act	ute and chronic	9
7N	physical illness. Ro	<mark>le of interdisciplinary ap</mark>	proaches in healt	h care.	S
2.	Social determinants	of Health: Cultural, sys	stemic, and enviro	onmental factors	15
	that affect human	development. psycholo	gical factors inf	luencing health	F
	behaviors and healt	h care utilization	fofanc		5
3.	Chronic Illness and	I Management : Psycho	logical impact of	chronic illness	15
	on patients and f	amilies. Sociological	perspectives on	chronic illness	
	management. Case	studies: Long-term care	and patient suppo	ort systems	
4.	Application of Ps	ycho-Social science the	eories: Social So	cience theories-	12
	Psychoanalytic, De	velopmental, Interperso	onal, Humanistic	and Behavioral	
	theories. Behavior	al Aspects of Health	and Medical Ca	are, Policies to	
	Improve Health Car	re			

#### **BND 205 Techniques of Nutritional Assessment**

CL	СР	L	Р
0	2	0	60

#### **Course Name BND 205 Techniques of Nutritional Assessment** Course This course provides a comprehensive knowledge about the methods and Description approaches for conducting nutrition assessment of individuals and populations throughout the lifecycle. The course is structured into three assessment components: dietary, clinical, anthropometric and biochemical. The topics include in-depth overview of the assessment methods, strengths and limitations of methodology, evaluation and interpretation of assessment data, sources of measurement errors, validity of assessment methods and basic analytical approaches used to interpret assessment data. To learn the principles and methods of nutritional assessment **Objectives** 1. 2. To monitor nutritional status and trends in population groups 3. To identify at-risk individuals & groups 4. To investigate diet and disease relationships Reference 1. Sehgal S. and Raghuvanshi RS (2007) Textbook of community Books nutrition. Directorate of Information and Publications of Agriculture, Indian Council of Agricultural Research, New Delhi. Latham M.C. (1997) Human nutrition in the developing world. Food 2. and Agricultural Organization of United Nations. Dahiya, S., Boora, P. and Rani, V. (2013). A manual on community 3. nutrition, Department of Foods and Nutrition, published under ICAR Assistance scheme.

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	4. Bamji MS, Krishnaswamy K, Brahmam GNV (2009). Textbook of
	Human Nutrition, 3rd edition. Oxford and IBH Publishing Co. Pvt.
	Ltd. ISBN 9788120417427
	5. Flamino Fidanza .1991. Nutritional Status Assessment, Springer
	Science Business Media.
	6. Beghan I Cap M Dajardan B (1988) A guide to Nutritional Status
	Assessment WHO Geneva.
	FUR
Prerequisites	BND 101, 102 & 202
Course Plan	TP.
Unit	Practical topics Credit hours
Ι.	• Assessment to be done in atleast 5 15
AL	individuals
N	Dietary Assessment - Methods of assessing
	food intake
AT	Using Food and Nutrient Databases
Z	• Accuracy, Precision and Validity of Dietary
	Assessment
A	Assessing the Intakes of Individuals using
6	Recommended Dietary Allowances
- 52	स्वास्थ्यम् सर्वार्थसाधनम् 😞 🦯
	• Assessment to be done in atleast 5 15
l I I I I I I I I I I I I I I I I I I I	individuals CAPP
0	• Anthropometric Assessment –
	Anthropometric assessment of children
	Anthropometric assessment of adults
	Anthropometric assessment of Elderly
	<ul> <li>Body composition measurements</li> </ul>
2.	• Assessment to be done in at least 5 15
----------	-----------------------------------------------
	individuals
	• Clinical assessment - Screening in Clinical
	Assessment - (MUST Tool, SGA)
	Medical History and Physical Examination
	• Assessment of Energy Expenditure and
	Energy Requirements
	• Biochemical Assessment - Assessment of 15
6	Protein Status
	Biochemical Assessment for Anaemia
N'	• Target group selection from local hospitals
22	suffering from nutritional deficiencies,
~	tabulation, interpretation and report writing
M	of their tested biomarkers.
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### BND 206 Soft Skills and Communication

CL	СР	L	Р
2	0	30	0

Course Name	BND 206 Soft skills and communication
Course Description	The academic and career success depends much on communication and presentation skills. As a student, the individual is expected to analyze, prepare, and present the content on different platforms. This course builds awareness, understanding, and frameworks for skill development in the qualities and attributes of presentational formats that involve the voice and the body when used together with technologies to present ideas and concepts that not only inform but also seek to persuade and motivate.
Objectives	1. To understand the structure and processes of effective communication
	2. To identify various soft skills and relate them with effective communication
A.	3. To prepare an action plan to improve the effectiveness of the communication.
Reference Books	<ol> <li>Lamerton J (2001) Everything you need to know public speaking. Harper Collins Glasgow.</li> <li>Ernest S and Sharon AR (1985) Effective Group Communication- How to get action by working in groups. National Textbook Company, Lincolnwood.</li> <li>Vanni F (2014) The Role of Collective Action. Agriculture and Public Goods, 21. DOI 10.1007/978-94-007-7457-5_2, © Springer Science +Business Media Dordrecht.</li> </ol>

103

	<ol> <li>Mary S (2010) Book of conflict resolution ga activities to improve communication, trust, and</li> </ol>	mes quick, effective collaboration. ISBN:
	978-0-07-174366-2.	
	Future Research Directions. Group Facilitation.	
	5. Lawrence R. Frey (2005) Facilitating group	o communication in
	context: Innovations and applications with	th natural groups:
	Facilitating group task and team communication	Hampton Pr.
Prerequisites	BND 107	HO
Course Plan		Ap.
Unit	Topic	Credit Hours
I.	Communication skills: Need and importance of	8
41	communication in the present context; Types of	m
N	communication skills - verbal, non-verbal, and	Š.
0	written communication; Types of workplace	5
Lγ	communication skills - oral presentations group	
N	discussions public speaking interviews	
	extempore presentations e-mail memos husiness	
	latters blogs interoffice memorandums report	
9	netters, blogs, interornee memorandums, report	
8	writing. Using language for effective	
+2	communication, techniques of dyadic	H &
	communication- message pacing and message	
	chunking, self disclosure, mirroring, expressing	SC
0	conversational intent, paraphrasing, vocabulary	00
	building- word roots, prefixes, Greek and Latin	
	roots AR FULLER AR	

2.	Soft skills : Introduction to soft skills and hard	8
	skills. Personality- meaning and definition of	
	personality, theoretical perspectives on	
	personality, behavioural trait and humanistic	
	personality patterns, molding the personality	
	patterns. Personality development - self-	
	perception, self-concept, self-esteem and gender	
	stereotyping, persistence, and changes in	
c	personality det <mark>ermin</mark> ants (physical, intellectual,	$H_{\cap}$
S	emotional, s <mark>ocial, educational and family),</mark>	TO
- Chi	aspirations, achievements and fulfilment.	
6	Cosmopolitan culture- presentational etiquettes,	PP
0	fo <mark>rmal dre</mark> ssing, formal greetings. stress and	Ő
AL	conflict management- goal setting, decision	Ē
Z	making, career planning, resume bu <mark>ilding,</mark>	S
	interview skills.	010
3.	Public speaking : Types of speeches - persuasive,	7 2
Z	informative, and motivational or inspirational	S
	speech; Structuring the speech - introduction,	
Z	body content and conclusion; Effective delivery –	E
-	voice; modulation, appearance during speeches	
+2	and delivery; Platform performance - posture,	म्र्
	gesture, eye contact, emphasis, pause, voice pitch,	
	overcoming fear and anxiety of public speaking;	XC
	Visuals in presentation - type of visuals for public	50
	speaking, tips for effective use, computer aided	
	visual presentation, body language.	

4. Importance of Listening : Listening styles - active 7 & amp; passive and direct & amp; indirect listening, thinking & amp; listening, adjusting listening style to that of speaker, social situations & listening; Listening improvement techniques; listening to audio-video conversations oral presentations for evaluation of body language and communication skills based on group AP4 discussions and interviews, role plays and pronunciation exercises DROFESSIONS NATIONA, रिरम मिल बहुद अर्गर Since-202 देखान्रखी

# BND 207 Advanced Computer Literacy for Nutritionists

CL	СР	L	Р
0	2	0	60

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Course Name	BND 207 Advanced Computer Literacy for Nutritionist
Course	The course is designed to introduce students to computer basics and its
Description	application for nutritionists and distitians.
S.	
Objectives	1. To know about internet security and the use of Artificial
	Intelligence (AI) in nutrition
AL	2. To learn about the nutritional concerns and their management
Z	during various stages of life.
0	3. To understand the concept and use of a food exchange list and to
ΔT	learn planning and preparation of meals for various stages of life
Ż	
Reference Books	1. Computer Applications in Nutrition & Dietetics
	An Annotated Bibliography. John Orta, eBook Published7
3	December 2018. Routledge, New York
	DOI <u>https://doi.org/10.4324/9781315057538</u>
	eBook ISBN9781315057538
	2. Thareja Reena. Fundamentals of Computers.(2019) Oxford
1 Sec.	University Press; Second edition ISBN 0199499276
9	
Webliography	1. AI nutritionist: Intelligent software as the next generation pioneer
	of precision nutrition - ScienceDirect
	2. The application and impact of computer-generated personalized
	nutrition education: A review of the literature - ScienceDirect

Prerequisites	The first semester of Bachelor of Nutrition and Dietetics in Ho and basics of computers	onours
Course Plan		
Unit	Торіс	Hours
1,	Internet Security Security, Privacy, Ethical Issues & Cyber Law	6
MISSIU	Use of Artificial Intelligence (AIO for nutritionists and dietitians	6
COM	Introduction to Web design, Types of Web Pages Web design Pyramid Building web sites Web development process model	6
2.	Use of computers for data analysis	<b>4</b>
10	Mobile based apps for diet counseling and diet planning	16
NA -	Meal Planning, Exercise Tracking & Analysis, Patient record management, Menu planning modules, meal or menu plan creation/analysis, Diet analysis spreadsheets and reports,	22 S
A A	recipe analysis and management, Food intake/diary analysis Indian and international nutrient databases	le le
E	Interactive Multimedia Nutrition Education	6
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#### **Third Semester**

### **BND 301 Macro Nutrients (Theory)**

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BND 301 Macro Nutrients (Theory )
It is a first basic course in Food chemistry. The course enables students to understand basic principles of Food chemistry revolving around macro nutrients in food environment
1. The subject will focus on the main components in food: water, lipids, carbohydrates and proteins. The subject deals in depth with the relationship between the chemical structure of the components and the reactions and function of the components in food
2. The students should be able to explain the relationship between the chemical structure and the properties of the main components in food (proteins, lipids, polysaccharides and water) and be able to explain the relationship between the properties and reactions of these components and the quality and stability of foods. In addition, the students should have acquired a deeper understanding in selected topics within food chemistry

Reference	1. Manay, N.S. and Shadaksharswamy, M. (2001). Food	facts and
Books	principles, II Ed New Age International (P)Ltd. Pu	blishers,
	New Delhi.	
	2. Aurand, L.W. and Woods A.E. (1973). Food chemist	ry. The
	AVI Publishing Company, Inc., Westport Connecticut.	
	3. Mondy, N.I. (1980). Experimental food chemistr	ry. AVI
	Publishing Company, Inc. Westport Connecticut.	
	4. Owen r, Fennema, 1996. Food Chemistry, 3 rd Edition	, Marcel
	Dekker, Inc., New York, USA	
MS	5. H.D. Be <mark>litz, 2009.Food Chem</mark> istry, 4 th Edition. Springer	
Prerequisites	The first semester of Bachelor of Nutrition and Dietetics in H	Ionours
77	Course Plan	OF
Unit	Торіс	Hours
<u>9</u> 4.	Properties of foods. Solubility, vapour pressure, boiling	15
AT	point, freezing point, osmotic pressure, viscosity, surface	N
Z	tension, specific gravity, oxidation and reduction.	S.
	Acids, bases and buffers. Chemical bonding, octet rule,	
A	ionic bond, covalent bond, hydrogen bond, polar and	F
a	non-polar molecules.	75
F2 7	Colloids, sols, gels, emulsions and foams. Water,-	
	physical problem, free, adsorbed and bound water; Water	
I I I I I I I I I I I I I I I I I I I	activity in foods; Molecular mobility and stability	
6	Food emulsions: O/W and W/O emulsions; Stability of	
	emulsions; Role of emulsifiers and stabilizers in	
	contributing stability of emulsions- natural and synthetic emulsifiers	
	Composition of foods- classification, structure and	
	properties of carbohydrates, proteins and lipids	

			1
2. 3. ON TROUDEN	Carbohydrates: Changes in carbohydrates on cooking, Digestibility, Modified starches, Enzymatic and chemical hydrolysis of Carbohydrates and Dietary fibre Protein in foods: Plant proteins, Milk Proteins, Egg proteins and Meat proteins; processing induced physical, chemical and nutritional changes in proteins Formations of toxins and allergens in protein foods; Functional Properties of proteins; Chemical modification of proteins like acylation, alkylation, phosphorylation, sulphitolysis and esterification Lipids in Foods: Role and functions of fats in food processing; Polymorphism exhibited by fat – crystallization, and consistency of fats – Palm kernel fat, Cocoa butter, and Milk butter Lipid hydrolysis, Auto-oxidation, and Thermal decomposition of fats Methods of Fat extraction from foods: Rendering – wet and dry rendering techniques, Pressing techniques and solvent extraction Chemistry involved in Hydrogenation, Deodorization, Neutralization, and Interesterification of foods; Significance of MCTs in fats; Enzymatic and chemical modification of fats ; Fat replacers – Natural and synthetic and their composition Chemistry of frying – process of oil absorption by foods during foods and effect of hydrocolloids on oil uptake by foods Deterioration of fats – Mechanism underlying hydrolytic rancidity and oxidative rancidity : formation of lipid	15 TSROFESSIONS	
A A A A A A A A A A A A A A A A A A A	<ul> <li>synthetic and their composition</li> <li>Chemistry of frying – process of oil absorption by foods</li> <li>during foods and effect of hydrocolloids on oil uptake by foods</li> <li>Deterioration of fats – Mechanism underlying hydrolytic rancidity and oxidative rancidity ; formation of lipid oxidation decomposition products; Detection tests for rancidity</li> <li>Antioxidants – role in preventing oxidation; natural and synthetic antioxidants, mechanism of action and synergistic action between antioxidants and chelators in removing prooxidants</li> </ul>	5	

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Effect of processing on fruits and vegetables - effect on	15
Structure and composition	
Processing effect on the composition of cereals, pulses,	
and oilseeds.	
Processing effect on the composition of milk, eggs, meat,	
and poultry.	
Chemical changes and nutrient losses during processing –	
Pasteurization, Caramelization, Baking,	
Demineralization, Dehydration, Irradiation, Fermentation	
of plant and <mark>animal fo</mark> ods, Freezing, Canning	
Fortification, Enrichment, and restoration of nutrients –	
Micronutrient fortification, fortificants and vehicles of	PP
fortification; Methods of fortification	0
वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 के स्वास्थ्य देखान्स्ट	SIONS - Tetally
	Effect of processing on fruits and vegetables – effect on Structure and composition Processing effect on the composition of creals, pulses, and oilseeds. Processing effect on the composition of milk, eggs, meat, and poultry. Chemical changes and nutrient losses during processing – Pasteurization, Caramelization, Baking, Demineralization, Dehydration, Irradiation, Fermentation of plant and animal foods, Freezing, Canning Fortification , Enrichment, and restoration of nutrients – Micronutrient fortification, fortificants and vehicles of fortification; Methods of fortification

# BND 302 Basics of Food Science (Theory)

CL	СР	L	Р
3	1	45	15

Course	BND 302 Advanced Food Science				
Name	NFUR				
Course	The course enables students to understand Advances in Food				
Description	Science.				
Objectives	1. Understand the advanced concepts and principles of Food				
7	Science.				
NN	2. To gain knowledge of novel food processing techniques.				
	3. Gain both theoretical as well as practical knowledge in handling				
- VN	foods and applying processing principles.				
Reference	1. Food Processing Technology by P.J Fellows				
Books	2. Food Science by Norman. N. Potter.				
3	3. Experimental study of Foods by Griswold R.M.				
र रे	4. Food Science by Helen Charley.				
E	5. Beverages: Processing and Technology by Deepak Mudgil and				
R	Shwetha Barak CAPP				
6	6. Bakery Science and Technology by S.A. Matz				
9	7. Food Fundamentals by MacWiliams, John Willy and son"s, New				
	York.				
	8. Extrusion cooking by Robert Guy.				
	9. Cocoa, Confectionery, and chocolate products by Minife and				
	Minife				
	10. Fruit And Vegetable Preservation by Sanjeev Kumar and				
	Srivastava				

Prerequisites	The second semester of Bachelor of Nutrition and Dietetics in Honours			
Course Plan				
Unit	Торіс	Hours		
UNIT I UNIT II	TopicSugar – Processing of sugar from sugarcane; Types and grades of sugar and their uses; Stages of sugar cookery & crystallization; Preparation of caramel sauce, Processing of sugar confectionery – Types of sugar confectionery products – fudge , fondant, lollipop, hard-boiled candy, marshmallow, sugar pastes, and nougat, Chocolate confectionery: Processing of cacao beans to 	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
R AN ARCO	Crushes Nectars, Cordials, Syrups, Concentrates and fruit juice powders Alcoholic beverages: Fruit Wines – Grape wine, port, perry, cider, sherry, ginger wine and Feni; Alcoholic - Brandy, Beer, Whisky	21m		

UNIT III	Drogossing of Polyamy Droducts	
	Processing of Dakery Products	9
	Breads -Role of ingredients, Processing of Bread,	
	methods of bread mixing, Bread faults and remedies	
	Biscuits – Ingredients, types of biscuits and preparation,	
	defects in biscuit making	
	Processing of cookies - Ingredients, types of Cookies and	
	preparation, defects in Cookie making	
	Processing of Cakes and Muffins: Ingredients and their	
	role, Types of cakes, and types of cake mixing techniques	
S.	Processing of other bakery products like pizza bases,	
A.	Doughnuts, Pretzels, Bagels, French Loaf	
	Novel processing Techniques	
	Supergritical fluid extraction and its applications	0
47	Irrediction of food theory application adventages and	T
Z	disadvantages	N.
0	Used processing of foods theory employed	
	High pressure processing of foods -theory, application,	
Z	advantages and disadvantages	
	theory and fused electric field processing -	
R	Dulaad light and Infrared heating theory application	4
	Pulsed light and infrared heating - theory, application,	5
र देने	advantages and disadvantages	E
UNIT V	Processing of Convenience – RTC and RTE foods;	9
Ŕ	Weaning mixes and infant foods	
62	Processing pasta, and noodles	
	Extrusion – types of extrusion, types of extruders,	
	Classification of extruded products	
	Processing of snack foods – fried snacks, popped and	

Practicals		
1.	Stages of sugar crystallization	1
2.	Preparation of Fudge and fondant	1
3.	Preparation of hardboiled candy and caramel	1
4.	Preparation of chocolate and enrobed products with chocolate	1
5. Misit	Preparation of hot beverages- coffee, tea and malt beverages	1
6.00	Preparation of cold Beverages- fruit drinks & milk shakes	PROF
KHV(	Processing of Bread	15
8.	Processing of Biscuits and cookies	10
9.	Processing of Pizza and dough nuts	1 5
10.	Preparation noodles and pasta	1
11.	Preparation of RTE mixes and weaning foods	the second
12. 7	Preparation of popped grains and coating them	51
13.	Preparation of flaked cereal and millet	1
14.	Preparation of extruded snacks.	1
15.	Sensory Evaluation and preparation of scorecard.	1

### **BND 303 Public Health Nutrition**

CL	СР	L	Р
3	1	45	30

Semester	EOR ALLIED AND HEAD
Course Name	Public Health Nutrition
Course	• The course aims to focus on the basics of Public Health
Description	Nutrition at National level and Global level
Objectives	• To understand and define the basic concepts in Public Health Nutrition (PHN)
NO	• To understand the global importance of nutrition across the
	life cycle and its role in achieving Sustainable Development
AN	Goals (SDGs).
	• To assess the impact of public policies on community
A	nutrition and global health targets.
म हरे	• To explore nutritional surveillance systems, for monitoring and evaluating public health nutrition programs.
R R	• To analyze epidemiological data to understand the
6.0	relationship between diet and community health.
	• To explore community nutrition programs to address specific health challenges.
	• To emphasize the need for Health Promotion in a diverse
	population.

Deference	
Reference	• Lai, S. (2018). Textbook Of Community Medicine
Book	Preventive And Social Medicine With Recent Update. CBS
	Publishers & Distributors Private Limited.
	ISBN:938774289X, 9789387742895
	• Vir SC (2011). Public Health Nutrition in Developing
	Countries 2nd Edition (2 Volume Set). Woodhead
	Publishing India Pvt Ltd. ISBN: 9789388320351.
.0	
Webliography	• UNIC <mark>EF. <u>https://www.unicef.org/</u></mark>
	• WHO. <u>http://www.who.int/</u>
<u>N</u>	• World Food Programme. <u>http://www.wfp.org/content/about-</u>
20	wfp-
$\checkmark$	• WHO. United Nations Decade of Action on Nutrition.
M	http://www.who.int/nutrition/decade-of-action/en/
0	• Mother, Infant, and Young Child Nutrition and Malnutrition.
	http://motherchildnutrition.org/india/overview-india.html
<b>AN</b>	• Double burden of malnutrition.
	http://www.who.int/nutrition/double-burden-malnutrition/en/
	• United Nations Development Programme. Sustainable
9	Development Goals.
	http://www.undp.org/content/undp/en/home/sustainable-
	development-goals.html
R R	Global targets 2025 <u>http://www.who.int/nutrition/global-</u>
6	target-2025
9	• Improving breastfeeding, complementary foods and feeding
	practices. <u>www.unicef.org/nutrition/index_breastfeeding.html</u>
	• National Guidelines on Infant and Young Child Feeding.
	www.wcd.nic.in
	• WHO Health Statistics and Information Systems. Global
	Health Estimates.
	http://www.who.int/healthinfo/global_burden_disease/en/
	-

• WHO	Non-communicable	diseases	and	risk	factors.
<u>http://v</u>	www.who.int/ncds/en/				
• Overvi	ew of Non-Communic	able Disea	ses an	d Rela	ted Risk
Factors	8.				
https://	www.cdc.gov/globalhe	alth/health	protec	tion/fe	<u>etp/</u>

Co	ourse Plan	FOR ALLIED AND HEAD	
Unit	Topic	CION .	Hours
I 2.	· WOS · VENDERAN · · ·	Introduction to Public Health Nutrition What is Public Health Nutrition (PHN)? Roles and responsibilities of public health nutritionists. Definitions of important concepts: Positive health, Malnutrition (under- nutrition, overweight, obesity, micronutrient malnutrition), Nutritional status, Nutrition intervention, Food and nutrient supplements, Food substitutes, Nutrition Education Sectors in Public Health Nutrition Primary Health Care of the Community and Health Systems of India. National Health Care Delivery System. Determinants of Health Status, Indicators of Health. Food and Nutrition Security: Food Production, access, Distribution Availability, Losses, Consumption, Dietary patterns and their implications on Nutrition and Health Nutritional Status: Determinants of Nutritional Status of individuals and populations Nutrition and Non-nutritional indicators: Sociocultural biological, environmental and economic Approaches and Strategies for Improving nutritional status and health: Health-based intervention, Food-based intervention, Nutrition education for behaviour change ,	9
	•	Supplementation and Food fortification	

3	• Nutrition – A Developmental Priority, Population Dynamics (Local,	9
	National, Global), Demographic transition, Population structure, Fertility,	
	Behaviour,	
	• Quality of life, Burden of death and disease (Local, National, Global), United	
	Nations (UN) Decade of Action on Nutrition (2016 - 2025), Nutrition at	
	center stage of Sustainable Development Goals (SDGs), 12 of the 17 Goals	
	require good nutrition to be met – an overview.	
4.	• Importance of nutrition throughout the life cycle : Role of Nutrition in	9
	Achieving Global Targets, Optimal Infant and Young Child Feeding:	
	Significance of the first 1000 days of life, Improving maternal, infant and	
	young child nutrition – WHO Global Targets, Role of dietary risk factors in	
	achieving global targets related to Non-Communicable Diseases (NCDs),	
	maternal and child health, Addressing micronutrient deficiencies	PE
5.	• Nutritional Surveillance and Surveillance Systems; Understanding	9
Ō	Nutritional Surveillance and its purpose in programme design planning,	S
Ē	implementation, operation monitoring, surveillance, and Evaluation	0
$\leq$	Surveillance/reporting system used in ICDS program, Strength &	Z
2	weaknesses, Newer initiatives taken by government to improve ICDS	
	surveillance system. Monthly Program Report and its uses in surveillance,	
	Definitions of terms used in nutritional surveillance, Long term nutrition	
	monitoring , Evaluation of programs impact , Timely warning and	
	intervention systems H H C C H E F H	
	• Types of nutritional surveillance appropriate to different situations,	
	Indicators, and data sources from existing macro and micro systems of	
	information in India (Origin, objectives, importance, and their use in	
	community nutrition) NNMB, NFHS, NSSO, ICDS, NSS, CENSUS, MICS	
	CES, etc.	
	• Nutrition surveillance for action –cycle of triple A.	
	• Critique of Nutrition surveillance data available in sources like NFHS	
	(National Family Health Surveys), NNMB (National Nutrition Monitoring	
	Bureau)	

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<ul> <li>Practical* <ul> <li>Understand the situational analysis of ongoing National Nutrition Program</li> <li>ICDS</li> <li>MDM</li> <li>Urban Primary Health Center</li> <li>Rural Health Center and Sub Centres</li> </ul> </li> </ul>	6
<ul> <li>2 Understand the significance of a local event calendar and prepare a calendar for the past three years.</li> <li>Understand local and national Surveillance data sets (NFHS, NNMB, DLHS) for various age groups (Pregnant, Lactation, children under 5y, Adult man and Adult women),</li> <li>3. Assess the nutritional status of populations using Indirect parameters</li> <li>Prepare a tool to assess the SES of different income groups (LIG, HIG, MIG as per Kuppuswamy scale), (10 subjects/student).</li> <li>Morbidity profile (last 15 days) (10 subjects/student), and understand ICD 11.</li> </ul>	6 SSIONS
<ul> <li>Assess the nutritional status of populations using Direct parameters (Primary care setup)</li> <li>Understand the use of a growth chart as an advocacy tool.</li> <li>Conduct anthropometric measurements and data analysis in a community setup for children and adults (weight, height, BMI, waist/hip, MUAC), (10 subjects/student) and classify them using Asia Pacific and WHO cutoffs of BMI.</li> <li>Introduce the WHO Child Growth Standard Analysis and interpretation using WHO Anthro and Anthroplus software.</li> </ul>	6

4	• Assess the nutritional status of populations using Direct parameters	6
	(Primary care setup)	
	• Dietary Data and its analysis : assess the dietary intakes (10	
	subjects/student), using 24hDRM and FFQ using standard cups and	
	measures in a community.	
	• Analysis, comparisons with RDA, calculation of consumption units and	
	interpretation using the RDA (NIN, 2024), identifying dietary risk factors	
	from dietary intake data.	
	• Compute dietary diversity score.	
	55 40	
5.	• Assess the nutritional status of populations using Direct parameters	6
	(Primary care setup)	
	• Understanding the Clinical signs and symptoms for various nutritional	Ź
	deficiencies through field visits, power point presentations, videos:	
	• SAM/MAM	ŝ
9	o Anemia	S
	<ul> <li>VAD, Xerophthalmia</li> </ul>	9
	◦ IDD	S
	• Water soluble vitamin B-Complex and ascorbic acid	
	• Zinc and other micronutrients	5
		5
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## **BND 304 Basics of Medical Nutrition Therapy**

CL	СР	L	Р
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Course Name	BND 304 Basics of Medical Nutrition Therapy (Theory)
Course	It is a first basic course in therapeutic nutrition. The course enables students to
Description	understand basic principles of Medical nutrition Therapy.
Objectives	1 Understand the concepts and principles of nutrition in basic dietetics.
00	2 Develop the ability to plan and prepare diets for therapeutic conditions
NAL	3 Apply knowledge of clinical practice in medical nutrition therapy.
<b>Reference Books</b>	1. Karuse and Mahan (2022); Food and the Nutrition Care Process;
T A	Saunders.ISBN0323810268.
Z	2. Annalynn Skipper. (2009). Medical Nutrition Therapy Practice Jones
	& Barlett Publishers.
	3. Mary Mariah, Mary K.Russell., Scott .A. Shikora.(2008).Clinical
	Nutrition for surgical patients. Jones & Barlett Publishers.
- <u>-</u>	<ol> <li>Thomas , Briony. (Eds). (1994). Manual of Dietetics Practice . Oxford : Blackwell Scientific Publication.</li> </ol>
	5. Wardlaw M, Gardon. (1999) Perspectives In Nutrition. (4th ed). USA :
	WCB/ McGraw – Hill.
	6. Zeman J. Frances., Ney M. Denise. (1988). Application of Clinical
	Nutrition. London : Prentice – Hall International.
	7. Shills E, Maurice., Olson A, James., Shike, Moshe.(Eds).( 1994)
	Modern Nutrition in Health and Disease. (8th ed.). USA :Lea & Febige.
	8. Williams, Rodwell. (1993). Nutrition and Diet Therapy (7th ed.). USA :
	Mosby Year book. Inc.
	9. Anderson ,Dibble. (1982) Nutrition in Health and Disease (17th ed.)
	.Philadelphia : J. B. Lippincott Company.

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	10. Alpers ,D., Stenson ,Williams., Denis, Bier. (1995) Manual of Nutrition
	Therapeutics (3 rd ed.) Boston : Little Brown and Company.
	11. Nambiar VS and Zaveri D (2024). Nutrition Guidance After Mini
	Gastric Bypass Bariatric Surgery. Adhyayan Publishers and
	Distributors. ISBN-10 : 8119681169.
	12. Nambiar VS and Zaveri D (2024). Nutrition Guidelines for Roux-en-Y
	Gastric Bypass Bariatric Surgery. Adhyayan Publishers and
	Distributors. ISBN-10 : 8119681215.
Prerequisites	The second semester of Bachelor of Nutrition and Dietetics in Honours
Course Plan	
Unit C	Topic
VAL	Concepts in Basic Dietetics, Growth of dietetics; Purpose and principles 1
TIO	diet planning, Role of a dietitian
-2.	Modified hospital diets ; Consistency and texture modifications , Clear 3
~	liquid Full liquid diets, Soft diets, Mechanically soft diets, Convalescent
	diets, Regular diets.Nutrient modifications • Sodium • Fibre • Residue
3.	Nutrition and Weight management (Obesity and Underweight), 6
57	Concept of energy balance.Body Composition and Fitness. Parameters
E	for assessment, Grades of obesity and underweight, Types of obesity,
	etiology and pathophysiology of obesity, Medical Nutrition Therapy of
	weight management, Diet, Exercise, Behavioral modification strategies,
	Pharmacological treatments Surgical treatments.
	A brief dietary guideline to states like anorexia nervosa and Bulimia 2
	nervosa, FAD Diets, Medical Nutrition Therapy for thyroid related
	disorders and poly cystic ovarian disease (PCOD)

4.	Nutritional Status, Immunity and Infections, Immune Systems- Brief	3
	Introduction, Nutrients for Immunity, Medical Nutrition Therapy for	
	different types of fevers Food borne : Typhoid, Tuberculosis Vector	
	borne, Malaria, Dengue, Viral fever: -H1N1. Pathophysiology and	
	Medical Nutrition Therapy for HIV.	
5.	Pathophysiology and Medical Nutrition Therapy of the following	6
	conditions: Disorders of the upper Gastrointestinal tract;	
	Gastroesophageal Reflux, Esophagitis, Hiatus Hernia. Disorders of the	
	stomach, Gastritis Peptic ulcers	
	Diseases / Disorders of the Lower Gastrointestinal tract-	
Sul Sul	Pathophysiology and Medical Nutrition Therapy of the following	
0	conditions: Constipation and Diarrhea. Celiac Disease and Tropical	
0	sprue, Lactose Intolerance Inflammatory Bowel Disease, Crohn's	
AL	Disease, Ulcerative colitis, Irritable Bowel Syndrome • Diverticular	1
$\geq$	Disease	
10	Discuse	
6.	Diseases of the liver: Hepatitis, Cirrhosis, Hepatic failure, Alcoholic	6
Z	liver disease, Liver abscess, Nonalcoholic steatohepatitis (MASLD),	S
	Wilson's disease, Liver transplant	
	Diseases of gall bladder: Cholelithiasis, Cholecystitis, Cholestasis	-
3	Acute and chronic pancreatitis :	
80	Liver, Gall bladder, and Pancreas Function tests- a brief introduction	
T	रपारच्यन् रापांच रावगन् क्र	
7.	Dietary Guidelines; Elimination Diets; Allergen Tests, Food Challenge.	
	Osteoarthritis ; Rheumatoid , arthritis , Gout	3
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	the work the second	
	र्भ स्वास्थ्य देखा	

Practical	Τ	
Unit	Торіс	Hours
1.	Modified hospital diets: Standardization of recipes for the following: Consistency and texture modifications, Clear liquid, Full liquid diets, Soft diets, Mechanically soft diets, Convalescent diets, and Regular diets. Nutrient modifications ;Sodium, Fibre , Residue	8
2. NATIONAL COMPOSITION	<ul> <li>Planning and preparation of diets and standardized recipes with the concept of portions and portion control in My Indian Plate (ICMR, NIN 2024)</li> <li>Overweight</li> <li>Obesity Grade 2</li> <li>Bariatric surgery</li> <li>Bulimia /Anorexia Nervosa</li> <li>Underweight</li> <li>Thyroid Disorders</li> <li>PCOS</li> </ul>	
3. 4.	Nutrition, Immunity, and Infection Planning of Diets for the following conditions: Fevers Foodborne, Typhoid, Tuberculosis, Vector-borne, Malaria, Dengue, Viral fever:-H1N1; COVID; HIV. Diseases / Disorders of the Upper Gastro-Intestinal tract Disease : Planning and preparation of diets for the following conditions: Constipation and Diarrhea, Celiac Disease, and Tropical sprue, Lactose Intolerance, Inflammatory Bowel Disease, Crohn's Disease, Ulcerative colitis, Irritable Bowel Syndrome • Diverticular Disease. GERD	6

5.	Pathophysiology and Medical Nutrition Therapy of the Diseases of	15
	Liver, Gallbladder, and Pancreas Planning and preparation of diets for	
	the following conditions: Viral Hepatitis (A and C) Cirrhosis, Hepatic	
	failure, Alcoholic liver disease, Nonalcoholic steatohepatitis , Metabolic	
	dysfunction-associated steatotic liver disease (MASLD), Cholelithiasis	
	Cholecystitis, Acute and chronic pancreatitis	
	ALLIED AND HA	
6.	Diagnosis and management of food allergies.	-
	Planning of diets for the following conditions, Elimination Diets, Food	6
	Challenge	
	Pathophysiology and Medical Nutrition Therapy for Rheumatic	
8	Disorders	
G	Osteoarthritis; Rheumatoid arthritis, Gout	
NATIONAL A	स्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 और स्वास्थ्य देखार्ग्यं	

### **BND 305 ADVANCED BIOCHEMISTRY**

CL	СР	L	Р
3	0	45	0

Course Name	BND 305 ADVANCED BIOCHEMISTRY
Course Description	• Study of Biochemistry of Major Nutrients, Classification- Structure and Properties of Carbohydrates, Lipids, Amino acids and Proteins, Nucleic acids, Enzymes and Vitamins
Objectives	• To acquire knowledge on basic concepts of biochemical reactions
DNAL	• To understand the biochemical reactions involved in the metabolism of various nutrients in the body.
Text Books	• U. Satyanarayana, U. Chakrapani (2013) <i>Biochemistry</i> (4th ed).Elsevier.ISBN-13 : 978-8131236017
VIAS I	<ul> <li>Dean R. Appling, Spencer J. Anthony Cahill, Christopher K. Mathew (2019) <i>Biochemistry concepts and connections</i> (2nd ed). Pearson Education, Limited.</li> <li>JK Dickson (2020) <i>Food Biochemistry</i>, CBS Publishers &amp; Distributors Pat Ltd ISDN 12 + 078 0280206255</li> </ul>
Reference	• Adams M. P. & Moss M. O. (2006 Reprint) Food
Books	<ul> <li>Mains, M. R., &amp; Moss, M. O. (2000 Rephil). Food microbiology.New Age International. ISBN-8122410146.</li> <li>Cappuccino, J. G., &amp; Sherman, N. A. (2013). Microbiology: A laboratory manual. Pearson Benjamin Cumming. ISBN-13 : 978-0321840226</li> <li>Jay, M. J. (2005). Modern food microbiology (4th ed.). CBS Publishers &amp; Distributors. ISBN-13 : 978-8123904757</li> </ul>

Webliography	• Gavin Publishers. Advances in biochemistry and bio	technology
	(ISSN 2:	574-7258).
	https://www.gavinpublishers.com/journals/details/advance	<u>es-in-</u>
	biochemistry-and-biotechnology-issn-2574-7258	
	• Fenteany, G. Biochemistry web. <u>http://biochemweb.fentea</u>	ny.com/
	• AOAC India. <i>E-learning</i> . <u>https://aoac-india.org/e-learning</u>	<u>p/</u>
Prerequisites	• Fundamentals of Biochemistry	
Course Plan	A PX	1
Unit	Торіс	Hours
<ol> <li>Carboi Types compa energe manno alcoho cycle.</li> <li>cycle, signifi</li> <li>Lipid Synthe essent Biosyn glycol</li> </ol>	hydrate Metabolism of metabolism: Anabolism and catabolism, artmentalization of metabolic pathways. Glycolysis and its etic, Entry of other carbohydrates (fructose, galactose, ose) into the glycolytic pathway, Fates of pyruvate to lactace, of and acetyl –CoA, TCA Cycle and its energetic, Glyoxalate Glycogen metabolism- Glycogenesis, Glycogenolysis, Cori Gluconeogenesis, Hexose monophosphate shunt and its cance, Glucuronic acid pathway Metabolism esis of Fatty acids- saturated and unsaturated, synthesis of ial fatty acids. Fatty acid β-oxidation. Ketone body formation. athesis and degradation of triglycerides, phosphor; lipids, ipids and cholesterol	12 ESSIONS

3.	Protein and Amino acid Metabolism	12
	General reaction of amino acid degradation- Transamination,	
	deamination and decarboxylation. Ketogenic and glucogenic amino	
	acids. Urea cycle and its significance. Biosynthesis of protein	
4	Nucleic acid Metabolism	9
	Anabolism and Catabolism of Nucleic acid bases, Fate of Purine	
	bases after catabolism, Mechanism for types of Ribonucleic acid	
	reductase enzymes.	
NATIONAL CON.		PROFESSIONS .

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### BND 306 FOOD PROCESSING AND PRESERVATION

CL	СР	L	Р
2	1	30	30

Course Name	BND 306 FOOD PROCESSING AND PRESERVATION		
Course Description	Food Processing, Different techniques on Food Processing and Preservation, Standard specifications for food products		
Objectives	1. To gain knowledge of the processing methods for various foods		
20	2. To understand packaging techniques for different food products.		
NAL	3. To develop marketing skills to promote new food products.		
Text Books	1. Warris, D. S. (2020). <i>Food processing and preservation</i> . CBS Publishers & Distributors.ISBN-13 : 978-9389688597		
Z VIRA	<ol> <li>Subbulakshmi, G., Udipi, A. S., &amp; Ghurge, S. P. (2021). Food processing and preservation (2nd ed). New Age International Private Limited. ISBN-13 : 978-8122472332</li> </ol>		
	3. Sharma, M. (2015). Analytical techniques in food processing. Random Publications.ISBN-13 : 978-9351116073		
Reference Books	<ol> <li>Dr. Joshi R.D., Dr.AdapureNitin (2017) Food Processing , Packaging, Preservation, Irradiation, Allergy and Safety, Agrotech press. ISBN-139789384568689</li> </ol>		
	2. Pander S.N., (2015) Handbook of Food Processing Design, Raj Publication. ISBN-13: 9789382983460		
	3. Ruth, S. K. (2017). <i>Food storage and preservation</i> . Navyug Books International. ISBN-13: 9789380731865		

Webliog	graphy 1. Ministry of Food Processing Industries. (n.d.). Food processing				
	schemes. Government of India. <u>https://www.mofpi.gov.in/</u>				
	2. National Agricultural Library. National Center for Home Food				
		Processing and Preservation. U.S. Department of A	griculture.		
		https://www.nal.usda.gov/research-tools/food-safety-researc	ch-		
		projects/national-center-home-food-processing-and-preserva	ation.		
		3. Institute of Food Technologists. (n.d.). Food processing. In	nstitute of		
	C	Food Technologists. <u>https://www.ift.org/p</u>	olicy-and-		
	NS	advocacy/advocacy-toolkits/food-processing	$\mathbf{N}$		
Prerequ	isites	Basics of food science	DD		
Course	Plan		OF		
Unit		Торіс	Hours		
	Traditio	onal and Modern Food Processing Techniques & Food	9		
АТ	Additiv	res	NC		
Z	Element and basic riles of food processing. Traditional food				
	processing drying, smoking, freezing, explosive puffing, vacuum				
A	packaging, addition of salt, sugar and pickling. Modern food				
processing techniques- microwave processing, irradiation,					
evaporation, ohmic heating, hydrostatic pressure treatment and high					
voltage pulse electric field technique. Food additives definition, need					
and types of food additives, antioxidants, chelating agents, coloring					
	agents,	curing agents, emulsifying agents and flavor enhancers			
II	Types of	of Processed Foods	6		
	Types -	- Fresh and processed foods, ready to eat and ready to cook			
	foods, e	extruded, fabricated, value added and designer foods, health and			
	nutragenics supplements, special functional foods (sports, space, and				
	therapeutic uses), process of product development and standardization,				
	product	testing (sensory objective and shelf life evaluation).			
	-				

III	Introduction to Food Preservation	9		
	Importance of Food Preservation, Types of Food Preservation, Types			
	of Spoilage, Basic Principles of Food Preservation. Vegan Foods and			
	Organic Foods. Preservation by the Use of Low and High Temperature			
	Refrigeration and Freezing Advantages, Factors to be Considered,			
	Difference Between Refrigeration and Freezing, Freeze drying and			
	Freeze concentration, Steps Involved in Freezing Common Foods,			
	storage Canning, Pasteurization and Sterilization Practical			
IV	Preservation by Using Chemicals and Salts Fermentation	6		
	Definition, Types of fermentation, Advantages. Common fermented			
	foods, Wine and Cheese making, Tomato processing, General	D.		
	consideration involved in preparation of sauce/ ketchup. Pickling-	PS		
	Principles involved and Types of Pickles- Indian pickles, Vinegar, Salt	T		
Z	preservation. Chemical preservatives- Definition, types of	E.		
0	Preservatives, Role of Preservation, Permitted Preservatives and FPO	S		
ΔTI	Specifications.	01		
FOOD PROCESSING AND PRESERVATION PRACTICAL				
Unit	Торіс	Hours		
1	Stages in sugar cookery, Evaluation of pectin quality, sugar	210		
4	concentration (Brix), pH and acid content	46		
2	Preparation of jam, jelly, marmalades, preserves, candied, Tutti fruity,	10		
	Glazed, Crystallized fruits, Toffees			
3	Preparation of squashes, fruit juice, and Ready to Serve (RTS)	6		
4	Preparation of Tomato sauce, Tomato ketchup, Preparation of pickles	4		

#### **Fourth Semester**

## **BND 401 Clinical Biochemistry and Pathophysiology**

						1
		CL	СР	L	Р	
		3	1	45	30	
		OD A	LLIED	AND	LIN	
Course Name	Clinic	al Biochemi	stry and Pat	ho-physio	ology	1/2
5	5/017					HCA
Course	• 1	t is a c <mark>our</mark>	rse that inte	grates the	patho	physiology of therapeutic
Description	r	nutrition and its interrelationship with clinical biochemistry.				
Objectives	• 7	• To integrate the pathophysiology of diseases with various organ				
AL	S	systems.				
NC	• 7	<mark>Fo id</mark> entify a	nd interpret th	he clinical	ma <mark>nife</mark>	station of diseases.
Reference	• 1	Voet, D., Vo	et. J., & Pra	tt. C. W. (	(2013).	Principles of biochemistry
Books	(	(4th ed., International student version). John Wiley & Sons. Inc.				
	• 5	• Satyanarayana, U., & Chakrapani, U. (2013). Biochemistry (4th ed.).				
	Elsevier.					
3	• 1	Berg, J. M., '	Tymoczko, J	. L., & Sti	ryer, L.	(2012). Biochemistry (7th
2	ed.). W. H. Freeman and Company.					
E.	• •	Rama Rao, A	A. V. S. S.,	& Suryala	akshmi,	A. (2009). A textbook of
R R	ť	biochemistry	(11th ed.). U	BS Publis	hers' Di	istributors Pvt. Ltd.
	• Lehninger, A. L., Cox, M. M., & Nelson, D. L. (2004). Lehninger					
	principles of biochemistry (4th ed.). W. H. Freeman Company.					
	• 1	Baynes, J., &	Dominiczak	, M. (2002	l). Medi	ical biochemistry. Mosby.
	• 1	Murray, R. 1	K., Granner,	D. K., N	layes, 1	P. A., & Rodwell, V. W.
	(	2000). Harpe	er's biochemi	stry. McG	raw-Hil	ll.
	• \$	Stryer, L. (	1997). Bioc	hemistry	(4th ec	1.). W. H. Freeman and
		Company.				
	1					

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	• Marshall, W. J., & Bangert, S. K. (2008). Clinical bioche	mistry.
	Metabolic and clinical aspects (3rd ed.). Churchill Livingstone.	
	• Chatterjee, M. N., & Shinde, R. (1995). Textbook of r	nedical
	biochemistry (2nd ed.). Jaypee Brothers Medical Publishers (P)	Ltd.
	• Rastogi, S. C. (1993). Biochemistry. Tata McGraw Hill.	
	• Orten, J. M. (1990). Human biochemistry (10th ed.). C. V.	Mosby
	Publishers,	
	• Godkar, P. B., & Godkar, D. P. (2003). Textbook of r	nedical
G	laboratory technology (2nd ed.). Bhalani Publishing House.	
P	• Gowenloc <mark>k, A. H. (Ed.).</mark> (1996). Varley's practical	clinical
Prerequisites	biochemistry (6th ed.). CBS Publishers.	
S.	• Oser, B. L. (Ed.). Hawk's physiological chemistry (14th ed.	). Tata
	McGraw Hill.	1
N	Basics of Biochemistry	
Course Plan		Ś
Course Plan		0
THEORY		Hours
UNIT ONE		15
Nutrition and Wei	ight Management, Energy Metabolism, and weight management.	
Endocrine system	physiology, functions, and disorders of the endocrine system 7	
Dental Health Pat	hogenesis and Treatment of Dental Diseases.	
		15
Bone Health path	on the skelatel system	13
Costrointestinal S	ustern Dhysiology Dupotions and disorders of the disortius system	
Gastronnestinal S	ystem Physiology, Functions and disorders of the digestive system.	
Liver Gandladder and Pancreas; Disorders of Liver, Galibladder and Pancreas.		
UNIT THREE		
Cardiovascular System; Physiology, functions and disorders of the circulatory system.		
Cardiovascular Sy	ystem; Physiology, functions and disorders of the circulatory system.	
Cardiovascular Sy Pulmonary Syster	ystem; Physiology, functions and disorders of the circulatory system. n; Physiology, functions and disorders of the respiratory systems.	15
Cardiovascular Sy Pulmonary Syster	ystem; Physiology, functions and disorders of the circulatory system. n; Physiology, functions and disorders of the respiratory systems.	15



### **BND 402** National Health and Nutrition Programs and Policies

CL	СР	L	Р
2	2	30	60

Course Name	National Health and Nutrition Programs and Policies			
.01	AFO!			
Course	National health and nutrition programs to improve health through			
Description	initiatives like maternal care, disease prevention, food security,			
NO	and water sanitation, supported by international organizations.			
Objectives	To understand the history, development and current state of health			
VA/	and nutrition policies.			
0	To identify the key health and nutrition programmes, goals,			
AT	strategies, outcomes, and framework.			
Z	To explain the evaluation of effectiveness and Health Economics			
	of the health and nutrition programmes.			
Reference	• Park, K. (2023). Park's textbook of preventive and social			
Books	medicine. 27th Edition. Banarsidas Bhanot Publishers. Jabalpur. ISBN: 9789382219194.			
L L	• Vir, S.C. (Ed.) (2011). Public Health Nutrition in Developing			
	Countries 2nd Edition (2 Volume Set). Woodhead Publishing			
	India Pvt Ltd. ISBN: 9789388320351.			
	• Vir, S.C. (Ed.) (2023) Child Adolescent and Women Nutrition			
	in India, Public Policies, Programmes, and Progress. Taylor and			
	Francis. Kindle Edition.			
Webliography	RMNCAH+N :: National Health Mission (nhm.gov.in)			
	Guidelines on PM POSHAN SCHEME.pdf (education.gov.in)			
	Anaemia Mukt Bharat :: National Health Mission (nhm.gov.in)			

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Prerequ	isites	Semester 4	
Course ]	Plan		
Unit		Торіс	Hours
1. 2. WOIL	<ul> <li>Univa</li> <li>Univa</li> <li>Univa</li> <li>Univa</li> <li>Missi</li> <li>Goals</li> <li>(NRH</li> <li>Nation</li> <li>Healt</li> <li>Nation</li> <li>Minis</li> <li>Organ</li> </ul>	ersal Health Coverage ersal health Coverage – World Health Organization ersal Health Coverage Policies by GOI -National Health ion s and Objectives ; National Rural Health Mission HM), onal Urban Health Mission (NUHM) h Systems in India onal Health and Nutrition Programs and Policies by the stry of Health and Family Welfare: Overview, nograms, programs and their objectives (MAA, JSY,	4 A PEPROFESSION
3.	<ul> <li>Unde Progr</li> <li>Desig</li> <li>Plan</li> <li>Imple</li> <li>Opera</li> <li>Surve</li> <li>Evalu</li> </ul>	rstanding the Principles Health and Nutrition ramme Management gn TREAT HALANA ementation, ation monitoring, eillance, and Since-2021 tation	

4.	•	Health Economics	4
	•	Macroeconomics	
	•	Microeconomics	
	•	Understand the effectiveness and cost efficiency of Health	
		and Nutrition budgets of the past 5 years compared to the	
		burden of disease, Overnutrition, undernutrition and	
		micronutrient malnutrition <b>CD</b> AND	
	•	Cost-benefit, Cost-effectiveness, and cost efficiency	
5.	•	National Nutrition Mission of India	6
3	•	POSHAN 2.0	
8	•	National Health and Nutrition Programs and Policies by the	· P
3		Ministry of Women and Child Development : Overview,	6
$\geq$		Organograms, programs and their objectives	T
Z	•	Integrated Child Development Services Scheme-	, v
0	•	Universalization of ICDS with quality,	S
T A	•	ICDS in Mission mode,	
Z	•	Objectives & target groups,	S
	•	Monitoring system	
A	•	Mode of implementation,	
-	•	Administrative setup,	5
-52	•	Coverage and compliance, Coverage and compliance, Coverage and compliance, Coverage and Covera	
5	•	Impact NCALD	5
	•	PM POSHAN- Mid-Day/ Nutritious Meal Program	5.
6.	•	National Programs to Combat Micronutrient Malnutrition	4
	•	Anemia Mukt Bharat (Nutritional Anaemia Control Program,	
	•	National Iron Plus Initiative (NIPI, I-NIPI)	
	•	National Deworming Campaign	
	•	Vitamin A: Vitamin A Prophylaxis Program (VAPP)	
	•	Iodine: National Iodine Deficiency Disorders Control	
		Program (NIDDCP),	
	1		

	• Universal Salt Iodization (USI), Double Fortified Salt (DFS)	
	• Diarrhoea Control Program: Role of Zinc, ORS	
	Fluorosis Control Program	
7.	• National Program for Prevention and Control of Cancer,	4
	Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)	
	Rising Burden of Non-Communicable Diseases	
	Public Health strategies to control NCDs	
	NPCDCS: Objectives and Key Strategies	
PRACTI	ICALS	CREDITS
1. 8	Critical appraisal of existing interventions and government	20
	programs and suggestions for improving the same	ROL
2.	Field exposure in the operational public nutrition programs,	20
VOI	Nutrition rehabilitation centers	S
T.A.I	Budget and cost analysis of nutrition programmes.	20 N

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# BND 403 Micronutrients in Human Nutrition (Theory)

CL	СР	L	Р	
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Course Name	Micro Nutrients (Theory)
Course	The course enables students to understand basic principles of Food
Description	chemistry revolving around micronutrients in the food environment
Objectives	1. The subject will focus on the main components of food:
0	Vitamins, Minerals, and antioxidants. The subject deals in depth
AI	with the relationship between the chemical structure of the
20	components and the reactions and function of the components in
	food
ZN	2. The students should have acquired a deeper understanding of
	selected topics within food chemistry of Micronutrients
Reference	1. Manay, N.S. and Shadaksharswamy, M. (2001). Food facts and
Books	principles, II Ed New Age International (P)Ltd. Publishers,
アダイ	New Delhi. H HOLEHEITH
EX (	2. Aurand, L.W. and Woods A.E. (1973). Food chemistry. The
K K	AVI Publishing Company, Inc., Westport Connecticut.
6.9	3. Mondy, N.I. (1980). Experimental food chemistry. AVI
	Publishing Company, Inc. Westport Connecticut.
	4. Owen r, Fennema, 1996. Food Chemistry, 3 rd Edition, Marcel
	Dekker, Inc., New York, USA
	5. H.D. Belitz, 2009.Food Chemistry, 4 th Edition. Springer
Prerequisites	12 th standard – with Biology, Physics and Chemistry

Course Plan		
Unit	Торіс	Hours
1.	<ul> <li>Flavour: Definition, classification, extraction and purification of flavours, Natural and synthetic flavours; Flavour compounds – structure and occurrence of terpenoids, flavonoids, Polyphenols, sulphur compounds and volatile flavour compounds in foods( plants and animal foods)</li> <li>Analysis of flavor compounds – HPLC,GC and GCMS; Sensory assessment of flavours</li> <li>Concepts of flavor retention, Flavour modification and Flavour enhancement, taste modification and taste enhancement</li> <li>Flavours produced during fermentation – wines, fermented milk and meat products</li> </ul>	15
	<ul> <li>Pigments in Animal foods: structure, function and chemical transformation of hemoglobin and myoglobin; Stability of Myoglobin in cured meats; Role of nitrates and cure accelerators in colour fixation in meat</li> <li>Pigments in Plant Kingdom: Classification; Structure, physical properties and chemical properties - Chlorophyll, Carotenoids, Anthocyanins, Betalaines</li> <li>Pigment behavior and colour changes during processing and cooking - Chlorophyll, Carotenoids, Anthocyanins, Betalaines; Effect of various cooking media (Acid and Alkali) on pigment colour and hue</li> </ul>	

<u>г</u>	1 1	
• Te	echniques for colour extraction, retention, and	
es	stimation - Chlorophyll, Carotenoids, and	
A	nthocyanins	
• Sy	ynthetic colourants- permitted and non- permitted	
со	olours; Dyes and Lakes; advantages and	
di	sadvantages; safety regulation of food colours;	
pr	oduction of synthetic colours –azo coupling	
3. • Vi	itamins- Classification, requirements, 15	
all	lowances, toxicity, losses, retention and	
ot	ptimization	
• Fa	at Soluble vitamins: A, D E, and K – Structure,	
G	eneral properties, stability, mechanism of	
de	egradation; factors affecting absorption and	
bi	oavailability	
<b>o</b> • w	Zater Soluble vitamins: Structure, General	
pr	operties, stability, mechanism of degradation ;	
fa fa	ctors affecting absorption and bioavailability –	
Tł	hiamin, Riboflavin, Niacin, Ascorbic acid,	
Vi	itamin B6, Folic acid, Biotin, Vitamin	
B	12(Cyanocobalamin)	
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4.	• Nutritional aspects of minerals, mineral 15
	composition of foods, chemical, and functional
	properties in foods
	• Macrominerals – types, sources, requirements,
	allowances, absorption and bioavailability of
	minerals like calcium, phosphorous, magnesium,
	sodium, potassium, chloride and sulphur
	• Microminerals - types, sources, requirements,
- C	allowance <mark>s, absorption and</mark> bioavailability of
5	minerals like Iron, Zinc, Copper, Molybdenum,
- Eu.	S <mark>elenium, Iodine, Chromium, and Manga</mark> nese
6	• Toxicity of macrominerals and microminerals;
0	Losses of minerals – Leaching, Retention and
AL	optimization
Z	• Chemistry of Antinutritional factors – saponins,
0	phytic acid, Hemagglutinins and Lectins
A	• Effect of enzymes on food in processing – Types
Z	and their role in processing
•	
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		CL	СР	L	Р	
		3	1	45	30	
Course Name	NF	ORBN	ID 404 Fu	D AA nctional F	foods and	Nutraceuticals
Course	An a	dvanced	course to	learn the	e concepts	of Functional foods and
Description	Nutra	ceuticals,	Categoriz	ation, Pro	biotics, P	rebiotics, and Synbiotics;
NO	Funct	ional natu	re of nutra	ceuticals,	and Regul	atory aspects.
Objectives	To le functi	arn the d	evelopmei s	nt of func	tional food	ds along with the types of
ATIO	Το ι mech	inderstand anism of a	the cat action and	egory of	nutra <mark>ceu</mark> nature.	ticals based on sources,
Z	To an	alyze the	health ben	efits of foo	ods of diffe	erent biotics origin
Y d	To ac with t	equire the	skills i1. efficiency	identificat	ion of foo	ds of bioactive compounds
	To b Funct	e aware ional food	of the Na ls	tional and	l Internati	onal regulatory aspects of
Text Books	Gibso prodi	on, G. R., uct. CRC I	& Williar Press. ISB1	ns, M. C. N-13: 9780	(2000). Fi 084930851	unctional foods: Concept to 2
	Wildt Nutra 978-1	man, R., V <i>aceuticals</i> 49877063	Wallace, T and Funct 37	. C., & W tional Foc	ildman, R. ods (2nd ec	. E. C. (2016). <i>Handbook of</i> d). CRC Press. ISBN-13 :
	Schm foods	idl, M. .Aspen Pu	K., & La ıblishers Ir	buza, T. nc.,U.S. IS	P. (2000) BN-13 : 9	). Essentials of functional 978-0834212619

# **BND 404 Functional Foods and Nutraceuticals**

Reference	Webb G.P (2011), <i>Dietary Supplements and Functional Foods</i> (2nd ed					
Books	Wiley-Blackwell					
	BooksWiley-BlackwellBalamurugan, V., Fatima, S. M., & Velurajan, S. (2019). A guide to phytochemical analysis. International Journal of Advance Research and Innovative Ideas in Education, 5(1), 236–245.Nijhawan, R. (2024). Food Safety and Standards Act, 2006, Rules & Regulations ILBCO (25th ed). ILBCO INDIA.978-8194507123Hasler,C.M. (2005). Regulation of Functional Foods and Nutraceuticals Wiley-Blackwell.ISBN-13: 9780813811772					
Webliog	raphy	MDPI. Nutraceuticals & functional foods.	Foods.			
C S		https://www.mdpi.com/journal/foods/sections/Nutraceuticals F	unctional			
IAL IAL		Foods	FEO			
6		Westminster University. (n.d.). Centre for nutraceuticals. Westminster				
		University.https://www.westminster.ac.uk/research/groups-and-	0			
NA	centres/centre-for-nutraceuticals					
Prerequ	isites	Basics of Food Science and Nutrition				
Course l	Plan		4			
Unit	2	स्वास्थ्यम् रकृती थे साधनम्	Hours			
1.	Introdu	ction to Functional Foods and Nutraceuticals	12			
	Definition, History, Classification- designer foods and pharma foods,					
	Nutritional Supplements, Health effects of functional foods, Stages					
	involved in development of functional foods.					
2.	Categorization of Nutraceuticals 12					
	Classification - Based on food source, mechanism of action and					
	chemical nature isoprenoid, phenolic substances, fatty acids and					
	structural lipids, terpenoids-saponins, tocotrienols and simple					
	terpenes, carbohydrates and amino acid based derivatives, isoflavones					

3.	• Probiotics, Prebiotics and Synbiotics	9
	• Probiotics:Concept,Human gastro intestinal tract and its	
	microbiota, Classification of Probiotics, role of probiotics in	
	health and diseases	
	• Prebiotics: Oligosaccharides, Dietary fiber, Resistant Starch,	
	Gums, Spirulina as bioactive components.	
4.	• Functional nature of Nutraceuticals and Regulatory Aspects	12
	• Polyphenols: Flavonoids, Catechins, Isoflavones,	
	Tannins: Phytoestrogens, Phytosterols, Glucosinolates,	
	Pigments, Organo sulphur compounds, proteins and peptides,	
i	Conjuga <mark>ted linole</mark> ic acid, Omega 3 Fatty acids, Bioactive	0
$\sim$	compounds: Saponins, Hemagglutinins, Resveratrol,	PO
	Kaempferol, Quercetin, Cinnamaldehyde, Lutoline, Capsaicin,	T
$\leq$	Piperine, Gingerol, Eugenol, Rosemarinicacid, Apigenine,	S
0	Thymoquinone.	S
F	• Regulatory aspects- International and national regulatory	0
A N	aspects of functional, foods in India.	S
4		4
8		R
7.	र्र स्पास्थ्यम् सपायसावगम्	3
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Unit	Торіс	Hours
1.	Preparation of Sample	4
2.	Methods of Extraction	6
3.	Qualitative analysis of Primary metabolites	3
4.	Qualitative analysis of Secondary metabolites	3
5.	Qualitative analysis of Vitamins	4
6.	Determination of Total Phenols and Flavonoids	4
7.	Development of Functional food products	6
NATION,	स्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 अरे स्वास्थ्य देखान्स्य	SSIONS • Trip
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# **BND 405 Advanced Dietetics**

CL	СР	L	Р
3	1	45	30

Course Name	BND 405 Advanced Dietetics
Course	It is an Advanced Course in therapeutic nutrition. The course will
Description	enable students to expand their knowledge on the complex impact of
.5	nutrition on human health. This course will focus on advanced
M	nutritional principles and their application in various health conditions.
Objectives	1 Develop skills in planning, preparation, and evaluation of various
7	therapeutic diets.
$\geq$	2 Develop the ability to apply, integrate the principles of medical
10	nutrition therapy in combination of clinical disorders.
A	3 Understand the principles of planning therapeutic diets for advanced
Z	clinical disorders in hospital settings.
Reference	1. Raymond, Janice L., and Morrow, Kelly. (2022). Krause and Mahan's
Books	Food and the Nutrition Care Process (16th ed.). St. Louis, MO: Elsevier.
F St	2. Skipper, Annalynn. (2009). Advanced Medical Nutrition Therapy Practice. Jones & Bartlett Learning.
	3. Marian, Mary, Mary K. Russell, and Scott A. Shikora. (2008).
	Clinical Nutrition for Surgical Patients. Jones & Bartlett Learning.
	4. Thomas, B. (Ed.). (1994). Manual of dietetics practice. Blackwell
	Scientific Publication.
	5. Wardlaw, G., & Hampl, J. S. (1999). Perspectives in nutrition (4th
	ed.). McGraw-Hill Education.
	6. Zeman, F. J., & Ney, D. M. (1988). Applications of clinical nutrition.
	Prentice-Hall International.
	7. Shils, M. E., Olson, J. A., Shike, M., & Ross, A. C. (Eds.). (1994).
	Modern nutrition in health and disease (8th ed.). Lea & Febiger.

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	8. Williams, S. R. (1993). Nutrition and diet therapy (7th e	ed.). Mosby		
	Year Book, Inc.			
	9. Anderson, L., & Dibble, M. V. (1982). Nutrition in health and disease			
	(17th ed.). J. B. Lippincott Company.			
	10. Alpers, D. H., Stenson, W. F., Bier, D. M., & Taylor, E	B. E. (Eds.).		
	(1995). Manual of nutritional therapeutics (3rd ed.). Little,	Brown and		
	Company.			
Prerequisites	12 th standard - HSc, ICSC with Science ( Biology and	Chemistry/		
S	Food, Nutrition and Dietetics) who has completed the first	year of BSc		
M	Nutrition and Dietetics.			
Mo		D		
Course Plan		101		
Unit	Торіс	Hours		
	Cardiovascular Diseases	10		
ΔT	• Hypertension	NO		
Z	• Hyperlipidemia	S		
	Atherosclerosis			
K	• Ischemic Heart Disease (Compensated and			
-	Decompensated)	5		
×2 7	• Cardiac Function tests			
E	Congestive Heart failure	'פי		
R R	Rheumatic Heart Disease			
67	Since-2021			
2.	• Diabetes Mellitus and Metabolic Disorders	10		
	Introduction and Classification of Diabetes Mellitus			
	• Metabolic syndrome, Prediabetes and other disorders and its distary management			
	Medical Nutrition Therapy (MNT) for Type 1			
	Diabetes, type 2 Diabetes and Gestational Diabetes.			
	• Pharmacotherapy in Different types of Diabetes and			
	• Pharmacotherapy in Different types of Diabetes and its relationship with diet.			

<ul> <li>MNT for persons with diabetes in special conditions.</li> <li>vi Complications of Diabetes Mellitus (Acute and Chronic) and its Management.</li> <li>vii Education and Counseling in Diabetes</li> <li>3.</li> <li>Renal Diseases</li> <li>Functional Units in the Kidney</li> <li>Etiology ; Clinical findings and medical nutrition therapy of different stages of renal disease 7 Glomerulonephritis; Nephrotic Syndrome; Acute Renal Failure; Chronic Kidney Disease; Renal Replacement Therapy; Renal Transplant; Renal Calculi.</li> <li>Protein Requirements, Electrolyte and fluid Balance with the progression of renal disease.</li> <li>Medical Nutrition Therapy, protein, sodium, potassium, phosphorus Exchange, Acid-Base Balance in renal disease.</li> </ul>	8 R PROFESSIONS
<ul> <li>4.</li> <li>Enteral and Parenteral Nutrition Basic Principles; Formulations; Conditions, Indications, Contraindications, Management of complications.</li> <li>Medical Nutrition Therapy of a range of pulmonary disease - bronchitis, asthma, chronic Obstructive Pulmonary Disease.</li> <li>Food and Drug Interactions of commonly used medications in various disease conditions and the dietary guidelines.</li> <li>Effect of Nutritional Status and Nutritional Deficiencies on the efficacy of drug utilization in the body.</li> </ul>	5

Practical				
Unit	Торіс	Hours		
Cardiovascula	Planning Diets for the following conditions:	6		
r Diseases	• Hypertension			
	<ul> <li>Hyperlipidemia</li> <li>Atherosclerosis</li> </ul>			
	• Ischemic Heart Disease (Compensated and			
S	Decompensated)			
MS	Congestive Heart failure			
A.				
Diabetes	Planning diets for the following Conditions:	P		
Mellitus and	Metabolic syndrome. Prediabetes and other disorders	OT I		
Metabolic • Type 1 Diabetes type 2 Diabetes and Gestational				
Disorders	Diabetes.	S		
E	• Complications of Diabetes Mellitus ( Acute and	0		
Chronic) and its Management.				
	• Education and Counseling in Diabetes			
Y TREAT HE REC	म्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 अर्भर स्वास्थ्य देखान्येख	Le lite		

Renal Diseases	Planning diets for the following Conditions:	7					
	Glomerulonephritis; Nephrotic Syndrome; Acute Renal						
	Failure; Chronic kidney Disease; Renal Replacement						
	Therapy; Renal Transplant; Renal Calculi.						
	Focus on Protein Requirements. Electrolyte and fluid						
	Balance with the progression of renal disease						
	Development of protein, sodium, potassium, and						
	phosphorus Exchange in renal disease.						
S							
Enteral and	Market survey of Enteral Formulations; Demonstration of	2					
Parenteral	preparation of enteral feeds.						
Nutrition	Basic orientation for parenteral feeds in a clinical setting.	P					
		<u> </u>					
AL		m					
Pulmonary	Planning diets for the following Conditions:	40					
Disease	Range of pulmonary disease - bronchitis, asthma, Chronic	0					
AT	Obstructive Pulmonary Disease.						
Z		S					
Cancer	Understand the role of the registered dietitian in the	6					
A	oncology setting, Nutrition screening and assessment in	4					
	oncology, Understand how caloric needs of cancer patients	5					
are affected by the treatment phase (pretreatment, during							
E.	treatment, post-treatment), Describe how different types of						
Ŕ	cancer treatment (including chemotherapy, radiation,						
	surgery, and immunology) affect food intake						
	क अर्भर स्वास्थ्य देखा-रेखी						

# **BND 406 Food Safety and Standards**

CL	СР	L	Р
2	0	30	0

Semester	IN FOR ALLIEU AND HEALTH				
Course S	BND 406 Food Safety and Standards				
Name					
0	This subject is important because the student must know, classify,				
Course	apply, develop and systematize the main hygicane and sanitation				
Description	applications to enhance their application as a health professional for				
N	the exit profile, such as:				
0	• Life Sciences (in areas related to Nutrition and Dietetics);				
AT	• Public Health and/or Community Nutrition;				
Z	• Management and Quality Control in Public and Collective				
	Catering				
	• To understand the factors that threaten the safety of foods				
Objectives	C To understand safe preparation, holding and storage of foods				
	To understand food safety laws				
.6.	Since-2021				
	र जोर स्वास्थ्य देखा				

		•	Roday S.	. (2017) Food Hygier	e and Sanitation, 2nd	d Edition,
Reference		Tata Mc Graw Hill Publication. ISBN: 978-0070700208				
Text Books			Food Sat	fety and Standards	(Licensing & Regis	tration of
			Food	Businesses)	Regulations,	2011.
			( <u>http://w</u>	ww.fssai.gov.in/home	e/fss-legislation/fss-	
			regulation	<u>ns.html</u>		
		- 0	Food	Safety &	Standard Act,	2006
		NFI	( <u>http://w</u>	ww.fssai.gov.in/home	e/fss-legislation/food	-safety-
	3	3	and-stand	dards-act.html)	HO	
	S	•	http <mark>://ww</mark>	ww.who.int/news-room	m/fact-sheets/detail/f	<u>`ood-</u>
N.			<u>safety</u>		· · · · · · · · · · · · · · · · · · ·	
Duduanuisi	har			Som opton 4		P
Prerequisit	les			Semester 4		Ó
AL				Course Plan		Ē
Unit				Торіс		Hours
1.	Foo	od hygiene	e concepts			6 9
N	Imj	portance o	of food hygi	iene and sanitation in	a	S
	a	. Comm	unity setting	g,		
	b	. Hospita	al setting an	nd		6
3	c	. Food b	usinesses			
50	Sele	ction and	purchase of	f food	मनउम	R
E.	a	. Receiv	ing and sto	ring food safely		3
b. Preparing and holding food safely						
c. serving safe food						
	d. storing cooked food safely					
	e. Personal Hygiene					
				Alter		
	1					

	Find referenced contaction to historical phasical and	(			
2.	Food safety and contaminants -biological, physical or	0			
	chemical nature.				
	a. Importance in food security and associate different				
	contaminants with risks and relevance to food safety				
	and food safety.				
	b. Precautions against contamination				
	c. Risk Analysis				
	d. Know and define risk analysis				
	e. HACCP system, characterize each phase and apply the				
S	system to case studies – collective restoration	2			
3.0	Storage temperatures; relative humidity of the environment;	6			
3	presence and concentration	30			
_	a. Identify temperatures in food processing and	T			
Z	conservation;	S			
10	b. Identify the humidity reference values;	S			
Ľ	c. Identify the importance of air quality in food hygiene.	0			
ΔN	d. Importance of water and sanitation as an important				
	element in food, hygiene and health promotion.				
	e. Strengthening sustainable WASH programming				
Y	(UNICEF / WHO guidelines)	FA			
4.	Pest control and waste management	6			
5	a. Insect, rodent and bird infestation	3			
	b. Use of pesticides and Integrated pest management				
	c. Waste disposal- Solid waste, Liquid waste, ETP				
5.	Food Standards -Legal and regulatory documents related to	6			
	food safety				
	a. Codex				
	b. FSSAI				
	c. Food Hygiene and Safety Audits				
	d. Define audit and phases of an audit				
	· · · · · · · · · · · · · · · · · · ·				

#### **Fifth Semester**

#### 501 Research Methodology and Statistics (Theory)

CL	СР	L	Р
4	0	60	0
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	FOR ALLIED AND HEAL
Semester	s v
Course	Research Methodology and Statistics (Theory)
Name	· PP
Course	It is a course which is an introduction to Research Methods and Statistics at
Description	the Graduation level
Objectives	1. To understand different types of research.
	2. To develop the ability to identify and apply appropriate research and
NA	statistical methods for research.
	3. To be able to develop appropriate tools for data collection and appropriate
	style of documenting Bibliography.
A	4. To be able to prepare a research proposal.
Reference	1. Research methodology: methods and techniques (C R Kothari), New age
Books	international publishers
ŀ	2. W. W. Daniel, C. L. Cross. Biostatistics: A Foundation for Analysis in the
	Health Science, 10/e., Wiley, 2013
Prerequisites	12th standard - HSc, ICSC with Science (Biology and Chemistry) who has
	completed Second year of BSc Nutrition and Dietetics

#### **Course Plan**

Unit	Topics	Hours
1.	Introduction to research methodology: What is	30
	Research, importance of research, Steps in research	
	Types of research - Qualitative and Quantitative	
	research, cross-sectional and longitudinal research with	
	examples from papers.	
	Variables and levels of measurements - Independent and	Ca
A A	Dependent variables; Categorical Variables: nominal	12
Z ^r	and ordinal Scale; Continuous variables; Interval ratio	P
3	scale; Primary Data, Secondary data	RO
$\leq$	Methods of Data Collection: Questionnaire and	T
X	Interview techniques and development; Dietary data	IS IS
0	Collection - FFQ and Dietary Data collection	S
E	techniques; Merits, Demerits and suitability in specific	0
JN	studies.	NS
2	Report writing ; Proposal writing;	30
A	Types of research papers - Interpretation and	
	presentation	T
+2	Referencing and reviewing literature using search	T A
E.	engines and indexed peer reviewed journals.	× '5'
	Bibliography - styles and detailing.	2E
	Statistics : calculation of measures of central tendency	35
	and dispersion ; understanding various tests and their	
	interpretation with the help of examples from paper ; T	
	test, ANOVA, Chi square, Pearson's Correlation,	
	Regression analysis, Levels of significance	
	Use of technology in statistical analysis, google forms,	
	excel based data coding and compilation; use of SPSS	
	software.	

# **BND 502 Sports Nutrition**

CL	СР	L	Р
2	2	30	60

Semester	FOR ALLIED AMD HEAL
Course	BND 502 Sports Nutrition 4 (2+2)
Name	
Course	This course covers the principles of sports nutrition, focusing on the role of
Description	diet in athletic performance, recovery, and overall health. Students will
	explore the nutritional needs of athletes, the impact of various nutrients,
NA,	dietary strategies for different sports, and the latest research in the field.
Objectives	1 To learn the fundamental principles of sports nutrition.
- YN	2 To identify the nutritional requirements of athletes in various sports. $\geq$
	3 To assess the role of macro and micronutrients in athletic performance
A	and recovery.
A.	4 To develop individualized nutrition plans for athletes.
( Z K	5 To understand the psychological and physiological aspects of eating disorders in athletes.
Doforonco	1 Kang Land Barnett S. P. N(2022) Nutrition and Metabolism in Sports
Books	Fxercise and Health (2nd Edition) Routledge publishing company
DUUKS	2. Maughan R J and Burke L M(2023) Sports Nutrition: Enhancing
	Athletic Performance" (3rd Edition). CRC Press
	3. Dunford M J, Doyle A and Kalman D M(2021) Nutrition for Sport,
	Exercise, and Health (2nd Edition)Cengage Learning
	4. Burke L and Deakin V (2022) Clinical Sports Nutrition (6th Edition)
	McGraw-Hill Education

	5. Ryan M (2020) Sports Nutrition for Endurance Athletes (3rd Edition).
	VeloPress
	6. William D. McArdle, F I K and Victor L K (2020)Sports and Exercise
	Nutrition (5th Edition). Wolters Kluwer
	7. Austin K G and Seebohar B(2021)Performance Nutrition for Athletes.
	Human Kinetics
	8. Heather Hedrick Fik and Alan E. Mikesky(2015) Practical Application
	in Sports and Nutrition. Fourth Edition. Jones & Bartlett Learning,
	Burlington, MA 01803.
S	9. <u>www.eatright.org/fitness</u>
R.	10. <u>www.nutritionist-resource.org</u>
S.	11. <u>www.sportsoracle.com</u>
5	12. <u>www.nutritionaustralia.org</u>
47	13. <u>www.acsm.org/nutrition</u>
N	14. www.sportsnutrition society.org
0	15. <u>www.sportsdietitians.com</u>
Duouoguigitag	Following proroquisites are recommended to ensure that the students have
	the foundational knowledge necessary to understand and apply the
	concepts discussed in the course sports putrition. The turical pre requisites
A	are:
	are.
52	2. Knowledge about human anatomy and exercise physiology
E	3 Knowledge about dietetics including dietary assessment nutrition
Ŕ	5. Knowledge about dieteries including dietary assessment, nutrition
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Course Plan		
Unit	Торіс	Credit Hours
1.	Sports nutrition and physical fitness Overview of sports nutrition, Definition and scope, training and exercise, nutrition guidelines and principles. Basic nutrients for sports persons. Physical fitness - principles, types and components Techniques and methods of measuring physical fitness	6
2. VOILA 3.N VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA VIANA	Body composition and energy balance concept Body composition in different physiological conditions and factors affecting it and methods of assessing body composition. Energy –energy concept and factors affecting energy and methods of measuring energy intake and expenditure and concept of energy balance. Nutrient metabolism and fluid management Macronutrients in Sports Nutrition - Carbohydrates: Types, role, timing, and loading strategies. Proteins: Requirements, sources, timing, and muscle protein synthesis, Fats: Types, roles, and their use as energy during exercise. Micronutrients and Hydration. Key vitamins and minerals for athletes, Electrolyte balance and its importance - Hydration strategies and fluid replacement	ROFESSIONS 8 Jackson

4.	Nutritional Strategies for Training and Competition	6
	Pre-exercise nutrition - Intra-exercise nutrition - Post-exercise	
	recovery nutrition and special considerations for different	
	sports (endurance, strength, team sports, etc). Sports nutrition	
	products - supplements related to energy metabolism - weight	
	reduction, Botanical and herbal supplementErgogenic aids	
	and their efficacy - Safety, regulations, and ethics.	
	Special nutritional consideration for women athletes, young	
	teen athletes, athletes with diabetes, vegetarian athletes.	
S	Specific nutrition for gymnastics and weight lifters, skiers and	
R.	cyclists, swimming and skating. Addressing eating disorders	
204	and disordered eating in athletes.	PR
5.	Emerging Trends and Research in Sports Nutrition, ethics	4
N	and Professional Practice	Ē
NO	Advances in sports nutrition research - Current trends in	S
	dietary practices among athletes. Future directions in sports	0
MA	nutrition. Professional responsibilities of a sports nutritionist-	Z
	Ethical considerations in sports nutrition counselling.	
	Working with a multidisciplinary team (coaches, trainers,	
Y	medical staff).	F
Unit	Practical 9 7 FIFIH	Credit
E		Hours
Ŕ	1 Devicement of wethodalays for a floring of data and	(0)
	nutritional status Since-2021	60
	2. Development of methodology for collection of data on	
	physical fitness	
	3. Clinical and dietary assessment techniques for athletes	
	4. Clinical and dietary assessment techniques for group	
	activities	
	5. Assessment of nutritional status of athletes	
	6. Assessment of nutritional status of group activities	

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r	1	
	7. Creating and evaluating nutrition plans for athletes	
	8. Planning diet for energy dense and high protein recipes	
	9. Planning diet for fat recipes for athletes	
	10. Planning diet for athletes and endurance sports	
	11. Planning nutritional requirements for sports injuries	
	NILLIED AND	
	12. Assessment of physical fitness of athletes	
	13. Assessment of physical fitness of group activities	
	14. Assessment of body composition of athletes and	
A.	performed sports activities.	
<u>Z</u>	15. Development and standardization of tool for physical	0
2	fitness.	R
~	16. Assessment of physical fitness of men athletes using	T
A	standard tool	E
0	17 Assessment of physical fitness of women athletes using	S.
	standard tool.	0
<b>M</b>	18. Use and practice of ergonomic Ft for assessment of energy	Z
~	expenditure.	
	19. Market survey of commercially available sports	
K	supplements.	E
<u>s</u>	20. Visit to a sports academy and fitness centres.	R
4.2	स्वास्थ्यम् सवाथसाधनम् 🐰	5
K K	NCAHP &	
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## **BND 503 Tools and Techniques for Nutrition Counselling**

CL	СР	L	Р
1	3	15	90

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Semester	VALTH
Course Name	BND 503 Tools and Techniques for Nutrition Counselling
Course Description	The course is designed to introduce students to the concept of nutrition counseling and provide internship in hospital setups for experiential learning.
Objectives	<ol> <li>To enable the students to learn about diet counseling skills</li> <li>To provide practical learning experiences with patients through case studies</li> </ol>
Reference Books	<ol> <li>Mahan, L.K. and Escott-Stump, S. (2021): Krause's Food Nutrition and Nutrition Care Process, 16th Edition, Elsevier Pvt. LtdISBN 032381025X</li> <li>Wardlaw GM, Hampi JS, DiSilvestro RA (2004). Perspectives in Nutrition, 6th edition. McGraw Hill. ISBN 0072921633,</li> <li>Anita Jatana. Daphne JK, Harita Shyam, Priyanka Rohtagi,Kajal Pandya Reptho Apollo Clinical Nutrition Handbook.(2022). Jaypee Brothers ISBN 978-9354650895</li> </ol>

4. Bamji MS, Krishnaswamy K, Brahmam GNV (2009).Textbook of Human Nutrition, 3rd edition. Oxford and IBHPublishing Co. Pvt. Ltd.

5. Srilakshmi B. 9th Edition (2023). Dietetics. New Age Publishers.ISBN 939516184

Prerequisites Understanding of Basics of medical nutrition therapy and advanced dietetics

# **Course Plan**

Unit V	Topic	Hours
1. 0	Introduction to Dietary Counseling ;	2 5
Ē	Definition, Expectations, goals, scope and	0
<b>N</b>	limits Counseling Responsibilities and Role	$\leq$
	of Nutrition Counselor	
	Ethical code and responsibility.	
4	Characteristics of an effective counselor	F
न्द्र स्व	Skills and attributes of the nutrition educator or counselor	म् र्द्ध
	a. Cultural Competency	de la
	b. Client's Perspective	A C
· · ·	c. Informed Negotiation	
	d. Empathy and Rapport	
	. ५ म्वास्थ्य ५०.	

2.	<ul> <li>Stages of Diet Counseling:</li> <li>Stage I: problem exploration and clarification,</li> <li>Stage II: Developing new perspectives and setting goals,</li> <li>Stage III: Implementation follow up and evolution</li> <li>Stages of Change: Precontemplation,</li> </ul>	3
MISSIU	Contemplation, Preparation, Action, Maintenance, Relapse	YCAP
3. BUDIAN BASE FO	Behaviour Change Models         1. Behaviour change and factors affecting the ability to change         2. Models for behaviour change         a. Health Belief Model         b. Social Cognitive Theory         c. Theory of Planned Behaviour         d. Transtheoretical Model of Change         3. Models for educational program development         Cognitive behavioral therapy (CBT)         Acceptance and commitment therapy (ACT)         Motivational interviewing (MI)         4. Different approaches of counselling-         a. Psychoanalytical approach         b. Cognitive- Behavioural approach         c. Humanistic approach (Client centred therapy and Gestalt therapy)	4 PROFESSIONS

4.   Facilitating Change:
Expressing empathy
Understanding cultural factors
Developing discrepancy
Avoiding arguments and defensiveness
Rolling with resistance
Supporting self efficacy
5. Different types of counselling methods
1. Types of Counselling
a. Multicultural counselling
b. Motivational counselling
c. Directive counselling
d. Guided counselling
2. Conditions during diet counselling sessions, components of first session and follow-up visits, Group counselling
3. Not ready to change Vs. Unsure about change counselling Sessions
6. Resistance Behaviour and Strategies to 3 a. Reflecting
b. Shifting Focus
c. Agreeing with a twist 021
d. Reframing
e. Ending the Sessions
Ready to change Counselling Sessions
a. Setting Goals
b. Action Plan

Practicals		
1 VININA COMMISSION	<ul> <li>Development of IEC materials and patient counselling</li> <li>1.Preparation of different types of models like cardboard models/wax models of various food items like chapati, bhakri, fruits, vegetables and other various food groups and use of diet atlas</li> <li>2.Development of innovative IEC material like brochure, posters, cards, puzzle, games, calendar for imparting key messages / information.</li> <li>3.Use of social networking sites to impart nutrition knowledge in community</li> <li>4.Planning, preparation, implementation, testing of IEC material for a target group alongwith feedback.</li> </ul>	30
2.	Use of online applications like Ntuitive Calculator, Diet Cal,	10
3.	Planning and making diet charts for patients using nutrition education resources and apps for various diseases and special conditions.	20
4.	Case Studies in Dietary Counselling in Hospital/clinical settings.	30

# BND 504 Nutritional Epidemiology and Anthropology

CL	СР	L	Р
4	0	60	0

Semester	FOR ALLIED AND HEAD
Course Name	BND 504 Nutritional Epidemiology and Anthropology
Course	The course covers the principles and methods used to study disease
Description	p <mark>atterns in populations. Topics include</mark> disease transmission, risk
0	factors, study designs, and data analysis. It's crucial for understanding
0	public health challenges and designing interventions to improve
NAL	community health.
Objectives	1. To understand the epidemiology of important nutrition deficiency
AT	disorders in India
Z	2. To develop skills on various study designs to assess, understand and
	treat various health and nutritional deficiency disorders
9	3. To understand anthropology and its importance for interpreting
	dietary intakes, nutritional status, food choices and cultural environment.
<b>Reference Books</b>	1. Bonita, R., Beaglehole, R., & Kjellström, T. (2006). Basic
6.0	epidemiology. World Health Organization.
	2. Norell, S. E. (1995). Workbook of epidemiology. Oxford University
	Press, USA.Moon, G., & Gould, M. (2000). Epidemiology: an
	introduction. McGraw-Hill Education (UK).
	3. Chrzan, J., & Brett, J. (Eds.). (2017). Research Methods for
	Anthropological Studies of Food and Nutrition: Volumes I-III (Vol.
	1). Berghahn Books.

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	4. Nambiar, V. (Ed.). (2021). Indian Food Anthropology and the Eat
	Right Movement- Volume 1. Selective & Scientific Books. ISBN:
	978-81-951492-2-3.
	5. Nambiar, V. (Ed.). (2021). Indian Food Anthropology and the Eat
	Right Movement- Volume 2. Selective & Scientific Books. ISBN:
	978-81-951492-4-7.
	6. Bernard, H. R. (2012). Research methods in anthropology. <i>AltaMira</i> .
Webliography	https://nie.gov.in/
Prerequisites	Bachelor of Nutrition and Dietetics 4 th Semester



# **Course Plan**

Unit	Торіс	Hours
		(60 hours)
1	1) Introduction to Epidemiology	7
	2) Definition, uses, branches of Epidemiology	
	3) Epidemiology and public health nutrition :	
	a. Causation of diseases based on nutritional deficiencies	
	b. Natural history of disease based on nutritional deficiencies	
	c. Health status of populations	
	d. Evaluating interventions	PP
2	1. Measurements in Health and Disease with a focus on nutrition	8
	2. Definitions of diagnostic criteria: Measuring disease frequency,	m
	Population at risk, Incidence and prevalence, Case fatality	S.C.
0	3. Interrelationships of the different measures :	00
A	4. Mortality- Death rates, Infant mortality, Child mortality rate,	N
Z	Maternal mortality rate, Adult mortality rate, Life expectancy, Age-	S
	standardized rates.	
	5. Morbidity -Disability, Health determinants, indicators, and risk	
	factors	A
3	1. Types of studies : Observational epidemiology- Descriptive studies,	8
	Ecological studies, Cross-sectional studies, Case-control studies,	
	Cohort studies. Examples of importance studies related to health	
	and Nutrition in each category	
	2. Experimental epidemiology- Randomized controlled trials, Field	
	trials, Community trials	
	3. Potential errors in epidemiological studies	
	a. Random error	
	b. Sample size	
	c. Systematic error	
	d. Selection bias	
I		

4	e. Measurement bias         f. Confounding         Other key concepts         a. The control of confounding         b. Validity         c. Ethical issues         Epidemiology and prevention: with a focus on chronic DRNCDs         7         1. Preventive potential         2. Causation framework         3. Levels of prevention         a. Primordial prevention         b. Primary prevention         c. Secondary prevention         d. Tertiary prevention         d. Tertiary prevention         e. Screening         a. Types of screening         b. Criteria for screening         communicable disease: epidemiology surveillance and response         The burden of communicable disease         Epidemic and endemic disease :Epidemics, Endemic diseases, Emerging and re-emerging infections         Chain of infection         a. The infectious agent         b. Transmission         c. Host
	Chain of infection Since-2021 a. The infectious agent b. Transmission c. Host

	Environment	
	a. Investigation and control of epidemics	
	b. Investigation	
	c. Identifying cases	
	d. Management and control	
	e. Surveillance and response	
6	Environmental and occupational epidemiology	8
	1. Environment and health	
	2. Impact of exposure to environmental factors	
	3. Evaluation of preventive measures	
	4. Exposure and dose	0
	a. General concepts	R
	b. Biological monitoring	T
	c. Interpreting biological data	E
Ó	d. Individual versus group measurements	S
E	e. Population dose	0
A	f. Dose–effect relationships	Z
	g. Dose–response relationships	
	5. Assessing risk	
	a. Risk assessment	F
	b. Health impact assessment	R
	c. Risk management	3
	d. Environmental health impact assessment	
	e. Measuring past exposure	
	f. Healthy worker effect in occupational studies	
	6. Epidemiology of the main foodborne diseases	
	a. Identify the relevance of public health epidemiology and nutritional	
	epidemiology in the context of food-borne diseases.	
7 Anthrop	pology and Management of Nutrition Health and Disease 7	
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1. Types o	of anthropology	
a. I	Physical	
b. \$	Sociocultural	
c. I	Psychological	
d. I	Linguistic	
e. (	Cultural anthropology ED AND A	
2. Its role i	in the prevention and treatment of disease	
8 Method	s of assessing anthropology and its relevance in food and 7	
nutrition	a	
1. Ethnogr	aphic Research Methods	
a. I	Mixed Methods	
b. (	Observations State	
c. 1	In depth Interviews	
d. 7	Transect Walk	
2. Critical	Medical Anthropology	
<b>a</b> . 1	Medical ecological approach to understand biomedicine,	
I	public health and global political economic structures which	
f	focus on Health care systems	
b. 1	Micro level	
C]	Intermediate level	
d. 1	Macrosocial level	
3. Indian H disease	Food and Nutrition Anthropology for combating health and	
0	Since-2021	
	& BYY - HJEL-RUE	

## **BND 505 Food Analysis**

CL	СР	L	Р
2	2	30	60

Semester	DILLED AND			
Course Name	FOOD ANALYSIS			
Course	This course is designed to give the students knowledge about food			
Description	chemistry and analysis			
Objectives	1 · To gain knowledge regarding modern methods of food analysis			
5	2 To understand various physical, chemical and quality characteristics			
47	of foods.			
N N	3. To gain insight into techniques used for the analysis microbial quality			
0	of foods			
TA	DN			
<b>Reference Books</b>	1. Owen R. Fennema (1996) Food Chemistry Third Edition Edited by			
	University of Wisconsin Madison. ISBN 0-8247-9346-3 (cloth : alk.			
Z	paper). — ISBN 0-8247-9691-8 (paper : alk. paper)			
8	https://ipapasca.unpak.ac.id/pdf/Food%20Chemistry%20by%20Fenn			
1 12 4	ema%203rd%20Ed.pdf			
	2. Peter C.K. Cheung and Bhavbhuti M. Mehta (2015) Handbook of			
	Food Chemistry. Edited. Springer Heidelberg New York Dordrecht			
6.0	London Since-2 (ISBN 978-3-642-36604-8			
	https://earthwormexpress.com/wpcontent/uploads/2021/10/Handboo			
	k of Food Chemistry.pdf			

3. D. Belitz, W. Grosch, and P. Schieberle (2009) Food Chemistry				
edited. ISBN 978-3-540-69933-0 e-ISBN 978-3-540-69934-7 DOI				
10.1007/978-3-540-69934-7. Springer Heidelberg New York				
Dordrecht London.				
https://tech.chemistrydocs.com/Books/Food%20Chemistry/Food-				
chemistry-by-H.D.Belitz-W.Grosch-&-P.Schieberle-4th-revised-				
and-extended-edpdf				
4. J. M. Deman, J.M. Finley, W.J. Hurst and C. Y. Lee (2018)				
Principles of Food Chemistry. Springer Heidelberg New York				
Dordrecht London.ISBN 978-3-319-63605-4				
5. L.H. Meyer (2004). Food Chemistry. CBS Publishers.ISBN-13978-				
8123911496				
6. Sahin S. and Sumnu S.G. (2006) Physical Properties of Foods (Food				
Science Text Series). Springer-Verlag New York Inc. ISBN-13. 978-				
0387307800				
7. Vaidya G. (2022) Textbook of Food Chemistry. Book Rivers				
publications.ISBN-13 : 978-93-5515-315-9 ·				
8. 8. Kontogiorgos V. (2021) Introduction of Food Chemist				
Springer Nature. ISBN -978-3-030-85644-1				
9. Iqbal S.A. (2008). Food Chemistry. Discovery Publishing Pvt.Ltd.				
10. AOAC (2023) Official Methods of Food Analysis. Association of				
Official Analytical Chemists Inc. Suite 400, 2200 Wilson				
Bouleward, Arlington, Verginia, USA.				
11. FSSAI (2023) Manual of Methods of Food Analysis: Cereals and				
Cereals Products. Food Safety and Standards Authority of India,				
Ministry of Health And Family Welfare Government of India New				
Delhi.				
https://fssai.gov.in/upload/uploadfiles/files/Manual%20on%20Cerea				
1%20and%20Cereal%20Products.pdf				

12. FS For	SAI (2016) Manual of Methods of Food Analysis: Oil and Fats. od Safety and Standards Authority of India, Ministry of Health		
An	d Family Welfare Government of India New Delhi.		
13. Ra	ghuramulu N. Nair K.M. and Kalyanasundaram (2003) A manual		
of	Laboratory Techniques. NIN, Hyderabad-500007.		
14. Ya	dav P. Food Analysis and Quality Control A Practical Manual.		
0V	depal Yadav, Lecturer in Food Technology, Government		
Pol	ytechnic, Mandi Adampur, Hisar, Haryana, India-125052.		
http	os://gpadampur.wordpress.com/wp-content/uploads/2011/11/6-2-		
faq	<u>c-practicals-08022014.pdf</u>		
15. Sha	arma S. (2007) Experiments and Techniques in Biochemistry.		
Ga	Igotia Publications Pvt Ltd.		
16. N. Siva Subramanian, P. Ushasree and G. Naveen Kumar Red			
	22). Textbook of Food Analysis, Unique Pub International (UPI).		
Prerequisites Bache	lor of Nutrition and Dietetics 4 th Semester		

Unit	Торіс	Hours
1.	Need and importance of food analysis	नम् क्र
2.	<ul> <li>Physical Properties of Food:</li> <li>Hydrogen ion concentration</li> <li>oxidation-reduction potentials</li> <li>adsorption</li> <li>isoelectric points of proteins</li> <li>Specific Gravity/Density</li> <li>Specific Heat Capacity</li> <li>Surface Tension</li> </ul>	

<ul> <li>Viscosity         <ul> <li>plasticity</li> <li>Refractive Index</li> <li>Filth</li> <li>Particl Size</li> </ul> </li> <li>Chemical Properties:         <ul> <li>Moisture</li> <li>Water Activity</li> <li>Protein</li> <li>Fat</li> <li>Volatile Oil</li> <li>Crude Fiber</li> <li>Dietary Fiber</li> <li>Total Ash</li> <li>Acid Insoluble Ash</li> <li>Sulphated Ash</li> <li>Sulphated Ash</li> <li>Reducing and Non-Reducing Sugars</li> <li>Starch</li> </ul> </li> <li>Important food quality attributes         <ul> <li>Sensory quality - colour, texture, flavor and taste</li> <li>Microbiological quality nutritional quality             evaluation for food products.             <ul> <li>Food Adulteration</li> <li>Shelf life studies</li> </ul> </li> <li>Physical and Chemical Properties of Oils and Fats:             <ul> <li>Acid Value and Pree Fatty Acids</li> <li>Unsaponifiable Matter</li> <li>Melting Point</li> <li>Solid-liquid Ratio</li> <li>Specific Gravity</li> <li>Titre Value</li> </ul> </li> </ul></li></ul>		
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Titre Value		Specific Gravity
		Titre Value

	• Colour
	Iodine Value
	Saponification Value
	Acetyl Value and Hydroxyl Value
	Reichert-Meissl (RM) Value
	Polenske Value
	Rancidity     RALLIED AND HE
6.	Colloidal chemistry of foods :
	sols, gels, foams, and emulsions.
Practical	
1. 1.	Physical examination of various food grains. 2
2. 2.	Detection of adulteration: Milk, turmeric powder, pure ghee, wheat flour, khoa.
3.	Determination of the Moisture content in food 2 sample.
4.	Determination of the acid insoluble ash in food <b>2</b> sample.
5.	Determination of fat content in food sample. 2
6.	Determination of the Crude fibre content in food 4 sample.

7.	Determination of the Protein Content in food sample.	4
8.	Calculation of carbohydrate content of food sample on the basis of principle of proximate composition	2
9.	Determination of quality of fats/oils	6
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#### **BND 506 EMERGING CONCEPTS IN NUTRITION**

CL	СР	L	Р
2	0	30	0

Semester	FOR ALLIED AND HEAD		
Course	BND 506 EMERGING CONCEPTS IN NUTRITION		
Name	S' To		
Course	Investigation, discussion and presentations of emerging concepts in nutrition.		
Description	RO		
Objectives	1. To orient students with current concepts in Human Nutrition		
NN	2. To Know about the Emerging trends in Nutrition		
Text Books	1.Singh P. Kumar Y, Singh A (2024). Futuristic Trends in Food Science, Nutrition		
$\triangleleft$	and Technology. P.K. Publishers and Distributors. Delhi, ISBN-10: 8119428625		
Z	2.Sterling, R. A. (2024). Space medicine and nutrition: A comprehensive guide for		
	future healthcare. Independently Published.ISBN-13 : 979-8879788242		
Reference	1.Andjelkovic, M., Paal, P., Kriemler, S., Mateikaite-Pipiriene, K., Rosier, A.,		
Books	Beidleman, B. A., Derstine, M., Pichler Hefti, J., Hillebrandt, D., Horakova, L.,		
5	Jean, D., & Keyes, L. E. (2024). Nutrition in Women at High Altitude: A Scoping		
	Review-UIAA Medical Commission Recommendations. High altitude medicine &		
	biology, 25(1), 9–15. https://doi.org/10.1089/ham.2023.0047		
	2.NASA. (2012). NASA: Space food and nutrition educator guide.		
	BiblioGov.ISBN-13: 9781288291038		
Prerequisites	4 th semester in Nutrition and Dietetics in Honours		

Unit	Торіс	Hours
1.	Artificial Intelligence applications in Nutrition and Dietetics :	8
	Merits and Demerits of the applications of AI nutrition and dietetics, AI	
	sources related to nutrition, Career opportunities by using AI in Dietetics	
2.	Nutrigenomics and Nutrigenetics : Nutrigenomics- Definition of	8
	nutrigenomics, gene expression – transcription, translation, post translational	
	modification, nutrition in the omics era- elementary concepts on epigenetics,	
	transcriptomics, proteomics, metabolomics; genetic variation and nutritional	
	implications.	
	Nutrition and Gene Expression and Nutrigenomics and Complex Diseases :	õ
	Nutrient control of gene expression – amino acids, nucleotides, basic concepts	T
I V C	of nutrigenomics and complex diseases – diabetes, cancer and obesity,	S
	Personalized Nutrition and Precision Nutrition	016
3. <	Microbiome and Nutrition : Human gastrointestinal tract and its microbiota,	6
2	functions, concept of probiotic, prebiotics and synbiotics; applications of	
	probiotics in human nutrition	4
4.	Emerging trends in Nutrition : What's Next in Feeding a Growing Global	4
	Population, Human milk oligosaccharides( HMO), Chrono Nutrition and	
	Nano Nutrition	
5	New technology in Nutrition Research and Practice	4
2.	Application of food tech and smart health care to clinical nutrition service	т
	Telemedicine, mobile, wearable devices and clinical nutrition services	

#### **Semester VI**

#### BND 601 Social Behaviour Change Communication/ Nutrition Health Promotion

	CL	СР		L			Р	
	3	1		45			30	
		FORA	LLIE	:U A/	ND H	EA/		
Semester	c101			VI			HA	
Course Na	ıme		BNI	<b>)</b> 601	Social	and	Behaviour	Change
	Z.		Com	municatio	on		K	
0							4	PP
Course De	escription		This	course a	ims to tea	ch var	ious theorie	s of Social
47			and	Beha	viour	Chang	ge Com	munication
Ž			(SBC	CC) or Co	mmunicat	ion fo	r Developm	ent (C4D),
0			whic	h will	enhance	comm	unication	skills and
AT			esser	ntials of n	utrition he	alth pr	omotion.	NO
Ż			The course aims to teach communication strategies to					
			promote positive behaviours which are needed to					
A			address the most serious health issues in the world at					
			individuals, groups, or communities					
4	र स्व	12371	1. To	understar	nd and ap	ply the	eories and r	nethods of
	E.		soc	ial and be	havior cha	inge co	ommunicatio	n
Objectives	5		2. To learn about the evolution of health promotion					
	6.0		and its role in promoting the SDGs					
		lkc.	3. To gain skills in planning, conducting and				cting and	
2 2 1 P			evaluating Health promotion programs in different settings					
			4. To understand and apply theories and methods of				nethods of	
			soc	ial and be	havioral c	hange	communicat	ion
			1					

	T	
	5.	To learn about the evolution of health promotion and its role in promoting the SDGs
	6.	To gain skills in planning, conducting and
		evaluating Health promotion programs in different
		settings
ap A		IED AND US
References	1.	Glanz K, Rimer BK. Theory at a glance: A guide
CION .		for health promotion practice. NIH, National
.53'		Cancer Institute. 2nd ed. 2005.
	2.	Kristal AR, Glanz K, Curry SJ, Patterson RE. How
St.		can stages of change be best used in dietary
G		interventions? J Am Diet Assoc. 1999;99:679-684.
	3.	STEPS: A framework for surveillance: The WHO
N N		STEP wise approach to Surveillance of
0		noncommunicable diseases (STEPS),
		Noncommunicable Diseases and Mental Health
N		World Health Organization, Geneva, 2003
	4.	Social and Behavior Change Communication
		(SBCC) Training for Information, Education, and
4		Communication (IEC) Officers, USAID, 2013
्रि जनाज्यम	- 5.	Sallis JF, Owen N, Fisher EB. Ecological models
		of health behavior. In: Glanz K, Rimer BK,
P RA		Viswanath K (eds). Health Behavior and Health
	in	Education: Theory, Research, and Practice. 4th
		edition. San Francisco, CA: Jossey-Bass. 2008. pp
र अगर		465-485.
	60	These a

- 6. Spahn JM, Reeves RS, Keim KS, Laquatra I, Kellogg M, Jortberg B, Clark NA. State of the evidence regarding behavior change theories and strategies in nutrition counseling to facilitate health and food behavior change. J Am Diet Assoc. 2010;110(6):879-91.
- 7. Boynton PM and Greenhalgh T, Hands-on guide to questionnaire research, Selecting, designing, and developing your questionnaire, BMJ, 328, 2004, 1312-1315.
- Health Promoting Schools: A framework for 8. action, ISBN 978 92 9061 447 0 World Health Organization, Geneva, 2009
- 9. Lytle LA, Perry CL. Applying research and theory in program planning: An example from a nutrition education intervention. Health Promotion Practice. 2001;2(1):68-80.
- 10. Healthy workplaces: a model for action For employers, workers, policy-makersand practitioner, WHO, 2010
- 11. Simons-Morton BG, Greene WH, Gottlieb NH. (Chpt 8) Evaluation. In: Introduction to Health Education and Health Promotion, 2nd Ed. Prospect Heights, IL: Waveland Press. 1995:218-241.
- 12. Field guide to designing communication strategy, WHO publication-2007.

13. Designing a health communication strategy, John Hopkins University-Centre for Communication programmes.

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## **BND 602 Sustainable Food Systems**

CL	СР	L	Р
3	1	45	30

#### **Course Plans**

Unit	Topics ALLED AND //	45
	LOKAL	hours
1	Food Systems	7
	Overview Defining Food Systems (production to consumption	
	including food waste)	
	Food system development paradigm	
2	Global and National Food Systems	
6	Industrial Food System	2
G	Local Food System and nutrition anthropology (Tailoring food	6
~	systems investments to specific context).	T
Z	Overview of food value chains in India for various food groups.	m
$\geq$	Spatial typology for food system analysis- GIS mapping for food	S S
0	vulnerability	0,
		0
2.	Sustainable diets	6 <
Z	Importance of food systems approach for meeting SDG goals and	S
	improving diet quality and health	
	Sustainable diets for all: A key to meeting the SDGs	
A	Impact of Biodiversity, Environment and Climate on Sustainable	F
	diets	5
50	Impact of Equity and fair trade on Sustainable diets	6
	Eco-friendly local and seasonal foods	3
>	Cultural heritage, skills (Food Anthropology)	
	Food and Nutrient needs, Food security – (availability,	
	accessibility, affordability, utilization and stability).	
	XIG	
3.	Healthy Diets	6
	Understanding dietary diversity	
	Guidelines for measuring household and individual dietary	
	diversity Household Dietary diversity score (HDDS), Women's'	
	Dietary diversity score (WDDS), Minimum acceptable diets	
	(MAD), Minimum Dietary diversity (MDD).	

4	Promoting Nutrition Sensitive Agriculture	6
	Overview of nutrition sensitive agriculture	Ŭ
	Horticulture and healthy diets	
	Shift incentives toward the foods that are most lacking in diets	
	globally (fruits vegetables legumes)	
	Innovations in biofortification, newer technologies for producing	
	nutritious foods including grow your own food (Terrace/kitchen	
	gardening hydrononics atc.)	
	Implement environmentally sound production practices	
	Future of food Shaping a climate smart global food system	
	Future of food shaping a chinate shart global food system	
5	Climate smort agriculture (CSA) and agriculture produce	0
5.	contribution	0
	Quarties alimete change and Food and Nutrition Security	
	Dringinles of CSA	
8	Mitigation of CHC from agriculture	0
G	A deptation of agricultural practices to climate change	2
	Sustainable maintenance	T
Z	A chieving the triple win of CSA	in l
Ň	Increased productivity	S
0	Enhanced resiliance	S
	Paduce amissions	0
V	CSA and the world bank group	$\sim$
Z	Livable planet achieving net zero emissions in agri food	S
	systems	
	Role of government: public sector leveraging its investment to	
A	incentivize private sector to include improved putrition amongst	F
	its goals and its alignment with other social goal	F
1	Identifying the gaps that exist and need to be closed in the	K
	knowledge available to countries in selection of investment	3
9	choices and priorities for food systems in the national nutrition	
	context	
	Since-2021	
6.	Food environments	6
	Understanding physical economic political and socio-cultural	
	contexts in which consumers engage with the food system to	
	make their decisions about acquiring, preparing and consuming	
	food.	
	Urban diets and food systems: Trends, challenges and	
	opportunities for policy action.	
	Rural diets and food systems: Trends challenges and	
	opportunities for policy action	
	<b>FT F F F F F F F F F F</b>	
		1

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7	A nimel Hyshendry/livestoel/fisheries for systemship dista	
/.	Annual Husbandry/Investock/Insteries- for sustainable diets	D
	Extension approaches for climate resilient livestock farming	
	Livestock, fisheries and and sustainable food systems $-a$	
	complex relationship	
	Trade & Taxation Policies to Promote nutritious, sustainable and	
	healthy diets	
	Practical ALLIED AND US	
	Visit farms, markets and food processing units to prepare food	6
	value chains in India for various food groups.	
3	Understand local food vulnerability using available GIS maps.	4
2	Prepare a <mark>tool and</mark> assess Food security – (availability,	4
0	accessibility, affordability, utilization and stability)- in urban and	P
7	rural households- data analysis and interpretation.	OF
А	Assess household and individual dietary diversity Household	4
$\leq$	Dietary diversity score (HDDS) in urban and rural households-	
0	data analysis and interpretation.	S
F		0
IA	Assess Women's' Dietary diversity score - in urban and rural	4
	households- data analysis and interpretation (WDDS)	
	Assess Minimum acceptable diets (MAD), Minimum Dietary	4
3	diversity (MDD) for children - data analysis and interpretation	
	(WDDS)	<b>D</b>
57	ेस्वास्थ्यम् सवाथसाधनम्	5
5	Develop a tool and assess food environment in urban and rural	4
	households- data analysis and interpretation.	
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#### **BND 603 Field Practice in Public Health Nutrition**

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Semester	VI VI VI
Course Name	BND 603 Field Practice in Public Health Nutrition 4 (1+3)
Course Description	Public health nutrition and program management for enhancing public health practice in India. An exploration of program management with a practical, hands-on approach through case studies, class exercises, and field visits.
Objectives	• To understand key components of program management including program design, implementation, monitoring and evaluation, sustainability and scaling up.
AN	• To learn the applicatory use of various methodologies and tools for the successful management of programs.
Z	• To provide exposure in field settings about the functioning of government programs at the sub-national level.
म हुरे	• To explore program management with a practical, hands-on approach through case studies, class exercises and field visits.
H C G	• To connect all aspects of the curriculum including seminars, course works, project experience to establish an understanding, appreciation and working knowledge of public health practice and analyze how their chosen area of intervention or study enhanced public health practice in India.

Reference Books	1.	Schmets G, Rajan D, Kadandale S, editors. Strategizing national health in the 21st century: a handbook. Geneva: World Health Organization; 2016
	2.	United Nations Development Programme 2009. Handbook on planning, monitoring and evaluating for development results. UNDP New York USA
	3.	MWCD 2018. Guidelines for Implementation of ICT-RTM System. POSHAN Abhiyaan. Ministry of Women and Child Development, Government of India
MISSI	4.	Global Nutrition Report March, 2016. How to Make SMART Commitments to Nutrition Action
COM	5.	Sustainability Report. 2013. The Program Sustainability Assessment Tool. Washington University, St Louis, MO. http://www.sustaintool.org
ATIONA,	6.	World Health Organization 2011. Beginning with the end in mind. Planning pilot projects and other programmatic research for successful scaling up. World Health Organization Expand Net
	7.	CORE Group. Nutrition Working Group. Nutrition Program Design Assistant: A Tool for Program Planners. Reference Guide. Washington, DC: 2010
F CAR	8.	The International Training and Education Center for Health (I- TECH) 2008. Technical Implementation Guide. Rapid Evaluation. I-TECH, Washington, USA
HAR	9.	United Nations. Statistical Institute for Asia & the Pacific (SIAP). Results-Based Management: Logical Framework Approach. SIAP Chiba, Japan 2007
	10.	Horld Health Organization. Drinking and Driving: A Road Safety Manual. Module 4: How to evaluate the program

	11. Karabi et al. BASICS II. 2004. Using 'Essential Nutrition Actions' to Accelerate Coverage with Nutrition Interventions in High Mortality Settings. Published by the Basic Support for Institutionalizing Child Survival Project (BASICS II) for the United States Agency for International Development. Arlington, Virginia, 2004.
	12. Save the children. Monitoring, Evaluation, Accountability, and Learning (MEAL). Programme Frameworks, Objectives and Indicators
1510	13. Management, Leadership & Partnership for District Health. WHO 2004 (Module 2)
Webliography	https://www.logframer.eu/content/results-based-management-rbm
INAL CC	http://www.fao.org/investment-learning-platform/background/en/ http://www.fao.org \Results-based Management _ Investment Learning Platform (ILP) _ Food and Agriculture Organization of the United Nations
TIC	https://www.fantaproject.org
N	https://usaidlearninglab.org/events/advanced-project-management- training-course
A	https://www.who.int/hiv/strategic/me/en/
म दूर	https://www.who.int/roadsafety/projects/manuals/alcohol/4- How%20to.pdf
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Unit	Торіс	Hours
1.	Nutrition and Health Program Planning at Sub-National Level Understanding the sub-national level: local, district or regional level situation through the use of available data sets; understanding the local nutrition health delivery systems for Essential Nutrition Actions (ENA), decentralization & governance Strategizing at the sub-national level Concept, need, and importance, fostering increased community participation Bottom-up, inter-sectoral, multi-stakeholder collaboration at the sub-national level (Management, Leadership & Partnership for District Health) Issues to consider during planning social determinants, socio-cultural context, scale up & sustainability Result-based Model for Nutrition Program Management Davids Based Model for Nutrition Program Management	5
<ul> <li>NATIO</li> </ul>	Results Based Management (RBM) – basic concepts, core principles and best practices RBM as a tool for managing the implementation of strategy; logical framework approach Understanding the link between resources and results – inputs and activities leading to outputs, outcomes, and impact	SIONS
3.	Scaling up and Sustainability of Programs Program sustainability – definition, importance, assessment Sustainability Action Plan – tools, agencies, organizations, resources, timeframe Scaling up nutrition and health service interventions – participatory process involving key stakeholders Tailoring and testing the intervention according to the socio-cultural and institutional settings Assessing and documenting the process of implementation, surveillance changes	3

4.	<ul> <li>Nutrition / Health Program Design</li> <li>Gather and synthesize information on the nutrition and health situation</li> <li>Determine initial program goals and objectives (SMART objectives)</li> <li>Review existing nutrition and health services, their coverage, utilization &amp; identify gaps</li> <li>Preliminary program design – determining interventions based on priority areas, program approaches to deliver these interventions, replicability and sustainability</li> <li>Importance of programme frameworks for programme design, monitoring and evaluation</li> <li>Types of monitoring; ICT based real time monitoring</li> <li>Process, impact and outcome evaluation</li> </ul>	5
	Practical	Credits
1. Providence in the second se	<ul> <li>Situational Analysis - Crucial Step in the Planning Cycle</li> <li>Organizing and conducting situational analysis / need assessment - setting priorities based on tracking the local nutrition health targets met and rapid needs assessment based on available data gaps</li> <li>Designing and Pretesting appropriate survey tools - Quantitative and Qualitative tools - their description, advantages and challenges:</li> <li>Structured interviews <ul> <li>Semi-structured interviews with key informants</li> <li>Open / informal in-depth interviews</li> </ul> </li> <li>Planning - Strategic and Operational <ul> <li>Setting goals and objectives - formulating strategic objectives on the basis of SMART criteria</li> <li>Planning at local level (decentralized environment)</li> <li>Issues to consider while planning at sub-national level</li> <li>Selecting appropriate study design and sampling framework and sample size</li> </ul> </li> <li>Steps in operational planning - 2021</li> </ul>	15 25
3.	Implementation, Monitoring and Evaluation	25
	<ol> <li>Execution of implementing plans &amp; their monitoring</li> <li>Identifying output, outcome, impact indicators for discussion for evaluation</li> <li>Identify risks, threats, issues, and tasks – tools and methodology</li> <li>Reporting progress and performance and disseminating results to stakeholders</li> </ol>	

4.	Field Exposure	25
	in a putrition (health related are grown	
	In a nutrition/nearin related program	
	1. Conduct situational analysis of the selected program/community from the	
	2 Students will do a critique on an existing health nutrition programme with	
	2. Students will do a critique on an existing health hutthon programme with a focus on studying the inter and intra sectoral linkages in planning and	
	implementation	
	3 The students will conduct formative research using qualitative and	
	participatory research tools to assess the nutrition health perceptions of	
	health services providers clients and the community	
	4 Students will critique the IEC materials and techniques in the relevant	
	health and nutrition programmes of the government or NGO.	
	5. The students will plan, implement, and evaluate a focused intervention	
	covering the above components in consultation with the field agency	
	6. The students will analyze the data manually and using the computers and	
	submit a report.	2
	7. The class will carry out selected components of the above (as feasible) in	
	urban as well as rural/ tribal settings	S
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#### **BND 604 FOOD PRODUCT DEVELOPMENT**

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Semester		FOR	ALLIEI		HEAL	
Course Name	L C	3ND 604 FO	DD PRODUCT	DEVELOP	PMENT	40
Course	SI	ntroduction to	) F <mark>ood Product</mark>	ion and proce	essing of foods	s, Criteria for selection of
Description	r	aw mat <mark>erials</mark>	for food proc	essing, Prin	ciples and sta	ges involved in product
0	Ċ	levelopm <mark>ent,</mark>	Sensory, Chem	ical and Mic	crobial evaluat	ion, Packaging, Labeling
7 0	a	ind <mark>Food Sta</mark> n	dards and Mark	eting of Food	d Products	Ŷ
<b>Objectives</b>	1. 7	Го gain insigh	ts on production	n and process	ing <mark>of food</mark> s	S
0	2. ]	Fo learn about	quality manage	ement consid	erations	S
Ē	3. 1	Γo devel <mark>op n</mark> e	w marketable, r	nutritionally a	and economical	lly viable food products
N N	4. ]	Fo gain know	edge about pac	kaging of fo	ods, packaging	materials and systems of
	1	abeling, testin	g and evaluatio	n of package	d foods.	
	5. ]	Γo develop en	trepreneurship s	skills for setti	ing up small sc	ale food industries
a de						The second
Text Books	1. F	Potter, N. M.	(2007). Food	science (5th	ed). CBS Pul	bl & Dist Pvt Ltd India.
5	I	SBN-13 : 97	8-8123904726	ΥΗΡ		
	2. I	Fuller, G. W. (	(2015). New foo	od product de	evelopment (2n	d ed.). CRC Press. ISBN-
	()	3 : 978-0849	9316739	-2021		~
		KC. P			RO	

Reference	1. Lawless, H. T., & Heymann, H. (2010). Sensory evaluation of foods (2nd ed.).
Books	Springer.

 Jaiswal, P. K. (2020). Food quality and safety. CBS Publishers and Distributors Pvt. Ltd. ISBN 13:978-8123917757

Webliography	1. Ministry of Food Processing Industries. Government of India. https://www.mofpi.gov.in/
	2. Food Research Lab. New product development service. <i>Food Research Lab.</i> <u>https://www.foodresearchlab.com/what-we-do/new-product-development-service/</u>
Prerequisites	Fundamentals of Food Science and Food processing
MATIONAL COM	ALLAND AND ALLAND ALLAN
"Curriculum o	of <b>Nutrition and Dietetics</b> (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

Unit	Торіс	Hours
1.	Criteria for Raw Material Selection and Product Development	12
	Criteria for selection of raw materials for food processing.	
	Manufacture of food - small scale, large scale, manual, automated and computerized.	
	Principles and stages involved in product development, Sensory,	
	chemical and microbiological evaluation of processed foods.	
	Convenience Foods, Extruded foods, Health foods. Nutritional	
i	supplements, RTS, and RTE foods	0
2	Definition, classification, characterization, factors influencing product	PS
	development- Social and health concerns, generation and screening of	T
Z	ideas for new product development, impact of technology and	E
10/	marketing.	SI
2.	Packaging, Labeling and Food Standards	9 9
Z	Definition, Principles, Classification Packaging methods and materials	S
	for packaging conventional and innovative packaging techniques.	
A	Food labeling, Recent trends in packaging materials and labeling.	4
1	Food Safety and Standards Act, 2006 (FSSAI) and HACCP for	5
4	processed and packed foods.	lin
3.	Marketing of Food Products	9
	Product Cost Calculation, Product Specifications, Marketing	
	Strategies, Advertising Methods, Consumer Behavior and Food	
	Acceptance	

Unit	Торіс	Hours
1.	Cereal and Pulse based foods	18
2.	Ready to Serve (RTS), Fruit juices, Squash, Jams and Preserves	18
3.	Pickles, Ketchup, Sauce	12
4.	Weaning Foods	12
5.	Health Foods and Nutritional Supplements	12
6. 2	Convenience foods	18
17 27	Selection of a product, preparation, standardization and quality cooking	12 70
10Ns	Selection of packaging material, labeling, cost calculation and marketing	
9.	Presentation of report	6 9
Total ho	ours	120

#### FOOD PRODUCT DEVELOPMENT PRACTICAL

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# BND 605 Case Study Reviews ( Practical)

CL	СР	L	Р
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Semester	EOR ALLIEU ANY HEAL
Course	Case Study Reviews ( Practical )
Name	
Course	It is an advanced applied course in therapeutic nutrition. The course
Description	enables students to apply principles of Medical nutrition Therapy in
7	clinical conditions through Case Study Reviews.
Objectives	1. To comprehend case study methodology and guidelines for researchers.
0	2. To document case studies and read case study reports .
	3. To apply the key methodological considerations in relation to the
N	design, planning, analysis, interpretation and reporting of case studies.
	4. To Identify the key issues of the case, analyze the case using relevant
	MNT Principles, concepts and recommend a course of action for that
3	particular case.
Reference	1. Billon, W. (2006). Clinical nutrition case studies (4th ed.). Wadsworth.
Books	2. Douglas, P. (2016). Dietetic and nutrition case studies (1st ed.). Wiley-
15	Blackwell.
	3. Emery, E. Z., & Jones, E. (2011). Dietetic and nutrition case studies.
	Jones & Bartlett Publishers.
	4. Mahan, K. L., & Stump, S. E. (2012). Food and the nutrition care
	process (13th ed.). Saunders Elsevier.
	5. Skipper, A. (2009). <i>Medical nutrition therapy practice</i> . Jones & Bartlett
	Publishers.
	6. Mariah, M., Russell, M. K., & Shikora, S. A. (2008). Clinical nutrition
	for surgical patients. Jones & Bartlett Publishers.

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	7. Thomas, B. (Ed.). (1994). Manual of dietetics practice. Blackwell
	Scientific Publications.
	8. Wardlaw, M., & Gordon, D. (1999). Perspectives in nutrition (4th ed.).
	WCB/McGraw-Hill.
	9. Zeman, J. F., & Ney, M. D. (1988). Application of clinical nutrition.
	Prentice Hall International.
	10. Shils, M. E., Olson, J. A., & Shike, M. (Eds.). (1994). Modern nutrition
	in health and disease (8th ed.). Lea & Febiger.
	11. Williams, R. (1993). Nutrition and diet therapy (7th ed.). Mosby Year
	Book, Inc.
	12. And <mark>erson, D., &amp; Dibble, M. (19</mark> 82). Nutrition in health and disease
0	(17th ed.). J. B. Lippincott Company.
5	13. Alpers, D., Stenson, W., & Bier, D. (1995). Manual of nutrition
47	<i>therapeutics</i> (3rd ed.). Little, Brown and Company.
Ž	S
Prerequisites	12th standard - HSc, ICSC with Science (Biology and Chemistry) who
	has completed the Second year ( 4 Semester) of BSc Nutrition and
NA	Dietetics

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Unit	Topics	Hours
1.		40
	Identification and collection of case studies with advanced	
	complications	
	A. Diabetes and Cardiac care ED	
	B. Renal	
	C. Pediatric	
	D. Hepatic	
	E. Critical care	7
i i i	F. Respiratory.	'P
G	G. Cancer	20
$\geq$		T
Ž	Disease Specific Scientific Review & Analysis	40 5
0	i. Metabolic Health & Disease	S
H	ii. Women's Health	0
NZ	iii. Diabetes	S
	iv. Cardiovascular disease	
	v. Geriatric nutrition	
9	vi. Pediatric nutrition	4
4	vii. Renal health Case study discussions and presentations	all's
	i. Standardized protocol for case study presentations	
	ii. Various methods used for case study presentations	40
	iii. Simulations exercises	2
	iv. Mock sessions	
	v. Group discussions	
	. Presentations on the Meta analysis of the literature review	
	collected.	

#### **Semester VII**

#### **BND 701 Information Technology in Nutrition and Dietetics (Theory and Practical)**

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Semester	VII
Course Name	Information Technology in Nutrition and Dietetics (Theory and Practical)
Course Description	It is a course which relates to integration of technology in application of principles of therapeutic nutrition. The course enables students to be twenty-first century ready to improve accuracy and efficiency.
Objectives	<ol> <li>Demonstrate knowledge of the role and relevance of information and communication technology in the area of nutrition and healthcare.</li> <li>Comprehend the concepts of healthcare information management system</li> <li>Apply various technology assisted tools and common software used for assessment and analysis of dietary intake and nutritional status.</li> <li>Integrate the principles of communicating and disseminating nutrition and health related information to varied target groups in the community using technology.</li> </ol>

Reference	1. Mahan, L. K. (2014). Food & nutrition care process (14th ed.). Cengage		
Books	Learning.		
	2. Giblin, L. (2010). <i>Skill with people</i> (Revised ed.). Skill with People.		
	3. Hacker, D., & Sommers, N. (2012). <i>A writer's reference</i> (8th ed.). Bedford/St.		
	Martin's.		
	4. Nandi, C. (2009). Principles of communication. Reference Press.		
	5. Michie, S., van Stralen, M. M., & West, R. (2011). ABC of behavior change		
	theories: An essential resource for researchers and diet practitioners.		
	Silverback Publishing.		
	approach Cengage Learning		
	7. Microsoft Office Excel. PowerPoint, and Access Software.		
	8. Nutritionist Pro. (n.d.). <i>Dietcal: Tutorials and demonstrations</i> . Nutritionist		
	Pro.		
6			
Prerequisites	12th standard - HSc, ICSC with Science (Biology and Chemistry) who has		
	completed the Third year of BSc Nutrition and Dietetics		
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Unit	Theory	Hours
1	Introduction to Information Technology in Healthcare	15
	i. Overview of computer systems, networks and computer	
	based application process ED AND	
	ii. Areas of ICT in health education, research, referral and	
	data management- case studies from each area iii.	
	Significance of information systems for health care	
2	impact on quality of care, economics and efficiency of	12
Z.	health institutions.	'P
5	iv. Initiatives and goals of eHealth, mHealth and	RO
$\geq$	telemedicine; barriers to implementation.	T
Z	v. Basics of developing mobile applications and	S.
0	electronic health modules research trends and examples	S
TΔ	of application in healthcare institutions	01
2	Information System in Health Systems and Dietetic	15 5
	Practice	
N	i. Introduction to the methods of health information	
	processing	To
+2	ii. Health Information management theory and practice	
E.	iii. Technology assisted dietary assessment IPSAS	· 5
	(Interactive Portion Size Assessment System) and the	78
	SCRAN24 (Self-Completed Recall and Analysis of	E State
	Nutrition), electronic diet recall protocols	
	iii. Designing electronic questionnaires, google forms and	
	conducting surveys using the tools; reporting and	
	discussing results.	
	iv. Essentials of report writing, ethics, plagiarism and	
	copyright issues	

	PRACTICAL
MM	<ul> <li>Application of Software for Research and Dietary</li> <li>Analysis</li> <li>A. Training in working with tools and resources/ softwarei. Basic MS office toolsMicrosoft OfficeExcel, Powerpoint, MS Access</li> <li>i. Literature Review and bibliographyMendeley, TurnItIn, Easybib, Purdue Owl</li> <li>ii. Nutritional StatusWHO Anthro Plus</li> <li>iii. Dietary AnalysisNutritionist Pro, DietCal</li> </ul>
IAL C	B. Presentation of the results
NATION	<ul> <li>Nutrition Communication using Media</li> <li>i. Dietetic Practice using social media- LinkedIn, YouTube, Facebook, twitter, Pinterest</li> <li>ii. Designing websites, writing blogs, creating infographics, recipe videos and nutrition podcasts- (Project based learning)</li> <li>iii. Writing for magazines/ newspaper articles, catering to general population</li> <li>i. Research posters- what makes a good poster, how to add content and tables, design templates and examples of effective posters</li> </ul>

#### **BND 702 Entrepreneurship in Nutrition and Dietetics**

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3	1	45	30

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Semester	VII VII VII
Course Name	Entrepreneurship in Nutrition and Dietetics
Course Description	A fundamental outcome of entrepreneurship is the creation of new value, usually through the creation of new products and services, which may lead to the creation of a new business entity. The objective of this course is to demonstrate and understand that exploiting a new opportunities in the field of nutrition and dietetics.
Objectives	<ol> <li>To facilitate the student in identification and exploration of entrepreneurial opportunities and basic understanding about business economics.</li> <li>To support the students in the development of knowledge and skill related to success in entrepreneurial activities in the field of nutrition and dietetics.</li> </ol>
	<ol> <li>To teach about Leadership and social entrepreneurship.</li> <li>To upscale Dietetics, Public Health Nutrition or Food Sciences and quality learnings to Food Industry Formulations and regulations.</li> </ol>

	5. To understand the trends, challenges, opportunities, and future needs of the dietetic workforce.
	6. Upscaling food product development to Food business, Issues, and concerns in Food Service Management.
Reference	1. Chowdhry Ajay. Just Aspire: Notes on Technology,
Books	Entrepreneurship and the Future. Harper Collins India. 2023.
S	2. HBR's 10 Must Reads on Startups and Entrepreneurship (Featuring Bonus Article "Why the Lean Startup Changes
M	Everything" by Steve Blank). Harvard Business Review Press. 2018.
0	3. Vishal Gupta. Research Handbook on strategic Entrepreneurship.
C	Edward Elgar Publishing Ltd. 2023.
47	<b>4.</b> KP Sudheer and Sangeetha K Prathap. Introduction to $1$
NC	Entrepreneurship Development in Food Processing. CRC Press.
) ]]	2021.
Prerequisites	Semester 6

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Unit	Торіс	45
		Hours
Ι	Introduction to Entrepreneurship	3
	a) Definition of Entrepreneurship and Business.	
	b) Evolution of entrepreneurship in today's economy	
	c) Definition of success, entrepreneurial attributes, traits, skills	
	for success	
	d) Understand the ne <mark>eds of target marke</mark> ts related to food	7.
	service, dietetics, public health, and potentially viable	P
Z	business ideas.	ΓD.
,0	Types of Entronyonourship	7
	a) Small business entrepreneurs	
M	b) Large company entrepreneurs	
0	c) Scalable startup entrepreneur	S
F	d) Researcher Entrepreneur	0
ZN	e) Hustler Entrepreneur	
	f) Innovative Entrepreneurs	
	g) Social Entrepreneurs	F
9	h) Trading/Marketing/Manufacturing Entrepreneurs	The second secon
S.	i) Lifestyle Entrepreneurs	R
	j) Intrapreneurs	3
	NCAHP 0	
3	Skills for Entrepreneurship	
	a) State the skills required to be an entrepreneur: Budgeting,	
	this line leadership menoperate desision making	
	thinking, leadership, management, decision making,	
	hetworking, collaboration, public speaking	
	b) Other requirements for an entrepreneur: assets, values and	
	autudes, quanties, roles demands	
	c) barrier to entrepreneursinp.	
		ı
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	d) Examples of successful traits of successful	
	business/entrepreneurs in the area of nutrition and dietetics	
	(Local/national and global).	
4	Customer identification	7
	a) Environmental scan	
	b) Competitive assessment    ED AND	
	c) Marketing strategies - 3 Cs of Marketing (company	
	customers, and competitors).	
	d) How to have a Successful Marketing Plan?	
	e) Components of a Successful Marketing Plan	
1	f) Examples of marketing strategies in the area of nutrition and	
0	dietetics (Local/national and global).	P
0	g) SWOT analysis of Brands	Ó
M		m
5.	Dietitians as an entrepreneur	
	1. Establishing – making a mark	
A	2. Practice roles	
Z	3. Overcoming the challenges through holistic approach	S
	4. Dealing with nutritional non-compliance	
A	5. Skills and competencies required for working in wellness	F
7	Settings	75
53	स्वास्थ्यम सर्वार्थसाधनम	
2	Food Industry Formulations and Regulations	
	Standard for professional practice and code of ethics overview	$\mathcal{L}$
	of Registration, documentation and patents in the area of food	
	service, Nutrition and Dietetics IP and University Tech	
	Transfer Compliances and Approvals	

·		
6.	Business Plans	7
	a) Formulation of business plan: meaning, contents,	
	significance, network analysis, common errors in business	
	plan formulation.	
	b) Generating business ideas : Locating business ideas,	
	Expanding the ideas, Size the potential market for potential	
	viable idea, Validating the opportunity, Develop initial sales,	
	profit, competitive landscape and future growth for potential	
	viable business idea, Match potential viable idea to personal	
	assessment profile	
1	c) Feasibility analysis	
0	d) Examples of startups and successful business in the area of	PD
5	food service, nutrition and dietetics (Local/national and	0
47	global).	T
<u>/</u>		- `v
$\Box$	Entrepreneurship Development Programmes (EDP):	
L	a) Examples and details of local, national and International	9
N	EDPs	S
	b) Funding opportunities for Start-ups: Government & Private.	
	c) Incentives and Subsidies for Women Entrepreneurs	
9	d) National Innovation and Start-up Policy for Students and	F
S.	Faculty	R
1	Practical*	3
	a) Self-evaluation with regard to entrepreneurial interest, intent,	15
	and capabilities.	hours
	b) Elevate of personal leadership style.	
	c) Evaluate personal traits, skills, attitudes and assess the drive	
	necessary to be a successful entrepreneur.	
	d) Identify personal strengths and weaknesses and compare with	
	profiles of successful small business owners.	
	•	

	e) Develop personal growth plans to address weaknesses and
	capitalize on
	f) Strengths in order to increase their potential to succeed in
	small business.
	g) Identify external market conditions in the field of nutrition
	and dietetics (Local/national and global)
2	Stars to prepare a business plan in the area of putrition and 15
4	diatation Proparing a Rusiness Plan and strategy
	a) Opportunity identification and selection: need identification
	a) opportunity identification and selection, need, identification,
3	b) Formulation of business plan: meaning contents
0	significance network analysis
0	c) Common errors in business plan formulation
A	d) Financial aspects and Management Strategies of Start-ups
2	
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Tech .	र्म्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 और स्वास्थ्य देखान्स्पर्ध

### **BND 703 Nutrition in Critically ill**

CL	СР	L	Р
2	2	30	60

Instructor in char	ge			
M.Sc. and / Ph.D. in Foods and Nutrition or equivalent				
	NEULIEALX			
Course	The course shall enable the student to apply medical nutrition			
Description	therapy in critical illness			
Objectives	Learn about optimal and timely nutrition intervention in			
0	critically ill patients.			
0				
Text Book	1. Al-Dorzi H.M., & Arabi Y.M. (2023). Nutrition for critically			
and References	ill patients. Schmidt G.A., & Kress J.P., & Douglas I.S.(Eds.),			
	Hall, Schmidt and Wood's Principles of Critical Care, 5th			
AT	Edition. McGraw Hill.			
Z	2. Mehta Y, Sunavala JD, Zirpe K, Tyagi N, Garg S, Sinha S,			
	Shankar B, Chakravarti S, Sivakumar MN, Sahu S, Rangappa			
A	P, Banerjee T, Joshi A, Kadhe G. Practice Guidelines for			
	Nutrition in Critically Ill Patients: A Relook for Indian			
म हरे	Scenario. Indian J Crit Care Med. 2018 Apr;22(4):263-273.			
E	a. doi: 10.4103/ijccm.IJCCM_3_18. PMID: 29743765; PMCID:			
B	РМС5930530.			
	3. Walker RN, Heuberger RA. Predictive equations for energy			
	needs for the critically ill. <i>Respir Care</i> . 2009; <b>54</b> (4):509–521.			
	अपि स्वार्थ्य देखा			
Prerequisites	BND 405 Advanced Dietetics			

Unit	Торіс	Hours
	Nutrition support practice: Challenges and	6
1	opportunities 1.	
	Role of Nutrition therapy in improving clinical	
	outcomes in critical illness	
2.	Early Indicators of malnutrition in ICU, Energy and	12
	Protein requirements for critically ill, Complications of	
012	nutrition support: Refeeding syndrome, overfeeding,	
1551	hyperglycemia, Enhanced Recovery after surgery	
3.	Nutrition support in Burn, Trauma, and Critically ill	12
8	patients Absorption, metabolism, and sterilization of	2
$\mathcal{S}$	micro and macronutrients, Nutritional status and body	20
7	composition of Burn, Trauma, and Critically ill	T
$\sim$	patients,. Criteria for implementation of nutrition	S.
0	support, Principles of prescription (Route and amount),	S
	Composition of nutrition support formulas for Burn,	0
7N	Trauma, and Critically ill patients, Post ICU	S
	Managemen	

Practical	मनाराम्द्रिमम् मादश्माम	the
Unit	Topic	Hours
	NCAHP	
1.	Enteral nutrition formulations-1	5
2.	Enteral nutrition formulations- 2	5
3.	Nutrition Screening	5
4.	Case studies in Burn patients. for nutritional planning.	15
5.	Case studies in Trauma patients. for nutritional planning.	15
6.	Case studies in Critically ill patients. for nutritional planning.	15

### **BND 704 Management and Administration in Dietetics Services**

CL	СР	L	Р
2	2	30	60

Instructor in char	ge			
M.Sc. and / Ph.D. in Foods and Nutrition or equivalent				
NEON FUR				
Course	The course shall enable the students to learn protocol of			
Description	provision and preparation of of healthy and therapeutic diets to			
N.	the hospital dieted patients as per medical conditions in a			
0	hospital.			
Objectives	Understand the food production process			
AL	Comprehend different kitchen objectives			
N	Analyse different methods of food production			
10	Describe the planning process in food production unit			
AT	Discuss food production in hospital			
Z				
Text Book	1. Drummond, Karen E. and Lisa M. Brefere. 2013. Nutrition for			
and	Foodservice and Culinary Professionals. New Jersey: Wiley.			
References	2. Sethi, Mohini and Surjeet Malhan. 2018. Catering			
र दर्भ	Management: An Integrated Approach. New Delhi: New Age			
E	International Private Limited.			
R R	3. Puckett, Ruby Parker. 2012. Foodservice Manual for Health			
5	Care Institutions.San Francisco: Jossey Bass Publishers.			
	Ser 321			
	भार स्वाउग्र देखा			
Prerequisites	BND 405 Advanced Dietetics			

Unit	Unit Topic			
1	Hospital Food Service Management - Principles and	5		
	Techniques of Effective Management, Leadership and			
	Managerial Abilities. Tools of Food Management -			
	Organizational Chart of the Food Service Team in			
	Hospital. ALLIED AND HAN			
2	Human Resource Management - Recruitment &	5		
0	Selection, Induction, Training, Performance Appraisal,			
S.	Leadership, Communication, Employee Benefits, and			
	Laws Governing Food Service Establishment.	~		
3.	Ph <mark>ysical Fa</mark> cilities and Layout – Size and Type of	5		
G	Kitchen, Design of Kitchen, Ventilation, Lighting,	6		
_	Flooring, Carpets, Wall Covering and Sample Layout	T		
NZ	of Kitchen. Storage Area and Equipment Required	S		
<u> </u>	Food Materials Management - Purchasing of Food	5		
L	Materials, Receiving & Storing – Importance of	9		
NA	Receiving Raw Materials	S		
5.	Hospital Food Production – Menu Planning for Patients			
	and Process of Food Production. Different Methods of			
3	Holding Foods for Service.	4		
6. J	Sanitation and Hygiene - Environmental Hygiene &	5		
	Sanitation, Safe Food Handling Practices, Personal	3		
Ŕ	Hygiene. NCAHP			

Unit	Торіс
1.	Analyse on-site and off-site catering management in a Hospital
2.	Classify the patients in a hospital as per their dietary requirements
3.	Analyse different types of food production procedures in hospitals
4.	Give a brief outline of an organizational chart for a food service
2	team in hospitals.
5. 8	Describe the important types of commercial food production
~	equipment.
6.	Plan and prepare type of menu is generally followed in schools
0	and hospitals
Z	
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### **BND 705 Nutrition in Emergencies**

CL	СР	L	Р
2	1	30	30

Semester	
Course	BND 705 Nutrition in Emergencies 3
Name	
Course	This course delves into the critical role of nutrition during emergencies,
Description	equipping students with the knowledge and skills to address nutritional
	needs in crises such as natural disasters, conflicts, and pandemics. It covers
	the assessment of nutritional needs, the planning and implementation of
VA,	nutrition interventions, and the management of malnutrition in crisis settings
Objectives	. To understand the impact of emergencies on nutritional status.
Y	. To learn methods for assessing and monitoring nutritional needs in crisis
Z	situations.
A	. To gain knowledge of emergency nutrition programs and interventions.
To and the second secon	To develop skills for managing malnutrition and food insecurity in emergencies and the security in the security is security in the security in the security in the security in the security is security in the security in the security in the security is security in the security in the security in the security is security in the security in the security in the security is security in the security in the security in the security is security in the security in the security in the security is security in the sec
, i	. To familiarize with international standards and guidelines for nutrition in
	emergencies Since-2021
Reference	1. Watson, F., & Sandoz, Y. (Eds.). (2020). Emergency Nutrition: Principles
Books	and Practice in Humanitarian Response. Oxford University Press.
	2. Wilkinson, C, & Whitehead, C. (2019). Nutrition in Emergencies. CABI
	Publishing
	3. The Sphere Project. (2018). The Sphere Handbook: Humanitarian Charter
	and Minimum Standards in Humanitarian Response. 4th Edition. Practical
	Action Publishing.

	4. World Health Organization. (2013). Management of Severe Acute
	Malnutrition in Children: Working Towards Results at Scale. WHO.
	5. World Food Programme & United Nations Children's Fund. (2017). Food
	and Nutrition in Emergencies: An Approach to Effective Interventions. WFP
	& UNICEF. A comprehensive guide to planning and implementing nutrition
	interventions in emergencies, including food aid, supplementary feeding, and micronutrient supplementation.
	https://www.who.int/nutrition/topics/nut_emergencies/en/](https://www.who
	.int/nutrition/topics/nut_emergencies/en/)
	https://www.unicef.org/nutrition/emergencies](https://www.unicef.org/nutrit
	ion/emergencies)
6 N	https://spherestandards.org/](https://spherestandards.org/)
5	http://www.fao.org/emergencies/resources/documents/emergency-
4/	prevention-system-for-food-
N	safety/en/](http://www.fao.org/emergencies/resources/documents/emergency
0	-prevention-system-for-food-safety/en/)
AT	https://www.nutritioncluster.net/](https://www.nutritioncluster.net/)
Z	https://www.wfp.org/emergencies](https://www.wfp.org/emergencies)
	https://www.actionagainsthunger.org/nutrition](https://www.actionagainsthu
A	nger.org/nutrition)
	https://reliefweb.int/topics/nutrition](https://reliefweb.int/topics/nutrition)
2	https://www.ifrc.org/nutrition](https://www.ifrc.org/nutrition)
E.	https://www.usaid.gov/glob
Pre	Following prerequisites are recommended to ensure that the students have
requisites	the foundational knowledge necessary to understand and apply the concepts
	discussed in the course nutrition in emergencies. The typical pre-requisites
	are: स्वास्थ्य देखा
	1. Understanding of basic nutrition and dietetics
	2. Knowledge about Public Health Nutrition or Community nutrition
	3. Knowledge about Food Security and Policy, biostatistics and
	epidemiology.

Course Plan		
Unit	Торіс	Credit Hours
Unit - I	Introduction to Nutrition in Emergencies	7
	Definition and types of emergencies (natural	
	disasters, conflicts, pandemics). Impact of emergencies on food security and nutrition.	
	Assessment of Nutritional Needs in Emergencies -	
	Rapid nutrition assessments and surveys. Indicators	$H_{\Delta}$
2	O of nutritional status (anthropometry, biochemical,	As I
hu	clinical, dietary)	ALL D
Unit - II	Emergency Nutrition Programs and Interventions	8
~	Nutritional requirements in emergency-affected	T
M	populations. Types of nutrition interventions: general	L'S
0/	food distribution, supplementary feeding, therapeutic	N N
I	feeding –	0
<b>N</b> N	Micronutrient interventions and prevention of	
	micronutrient deficiencies. Mobilization and	
	distribution of resources - local resources, general	
2 T	fund and social funds.	- FE
Unit III	Managing Malnutrition in Emergencies	म र्र
E	Classification and management of acute malnutrition	
Ě	(SAM and MAM). Community-based Management	2E
	of Acute Malnutrition (CMAM). Role of ready-to-	
	use therapeutic foods (RUTF) and supplementary	
	foods. अर स्वास्थ्य देखा	

Unit IV	Food Security and Livelihoods in Emergencies	8
	Strategies for food security and livelihood support -	
	Importance of water, sanitation, and hygiene	
	(WASH) in nutrition. Coordination and collaboration	
	with humanitarian organizations. Overview of	
	international guidelines (Sphere standards, WHO,	
	UNICEF). Ethical considerations and cultural	
	sensitivity in emergency nutrition.	
Unit	Practical	Credit Hours
	1. Techniques of nutritional assessment.	30
- L	2. Conducting a mock rapid nutrition assessment	
0	using assessment tools and data collection	P
	techniques	9
A	3. Practice in anthropometric measurements (weight,	Ē
20	height, MUAC)	S
Ĭ	4. Calculating and interpreting nutritional indicators	0
$\leq$	(BMI, z-scores	Z
~	5. Developing a plan for a general food distribution	
	program	
R	6. Planning supplementary and therapeutic feeding	E
R	programs	
+2	7. Analyzing case studies of past emergencies	મ્જ
	8. Discussing challenges and solutions in	
ľ	implementing nutrition programs	SC
	9. Role-playing scenarios in emergency response	0
	coordination	
	10. Communication strategies with affected	
	populations and stakeholders	
	11. Creating culturally appropriate nutrition	
	education materials for emergencies	
	12. Designing public awareness campaigns on	
	nutrition and hygiene	

#### **BND 706 Applied Dietetics/Internship Project**

CL	СР	L	Р
0	4	0	120

# Focus areas, impact, and outcomes :

#### **Basic research:**

Basic research focusing on the bioavailability of nutrients, understanding Indigenous foods, and nutrient-gene interactions to improve the food supply for better health and improved individualized nutritional recommendations.

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#### **Outcomes:**

Collaborations with Central Food Technological Research Institute (CFTRI), National Institute of Nutrition (NIN), and other Institutes of the country that have produced novel functional foods and supplements.

#### **Applied research:**

Applied research in appetite and satiety mechanisms exploring how people can be more successful in maintaining a healthy body weight. To engage with Sports Authority of India (SAI) to explore the influence of diet and fluid interventions on athlete participation, well-being, performance etc

#### **Outcomes:**

To well-being and performance of sports person by nutritional intervention will be enhanced

#### **Clinical nutrition research:**

Application of innovative approaches to prevent, manage, and cure diet-related diseases and medical conditions.

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#### **Outcomes:**

The development and implementation of innovative evidence-based practice will improve the nutritional status of the population across the lifecycle.

#### Semester VIII

Name of the program	Bachelor of Nutrition and Dietetics (Honours)		
Course Title	Internship		
Academic year	Fourth year /VIII Semester		
Semester	VIII Semester		
Number of Credits	14		
Course Prerequisite	Students should know and possess skills in planning and demonstrating the therapeutic diet for the required.		
Course Synopsis	This module provides students with an opportunity to integrate and apply acquired knowledge and technical skills in actual clinical settings.		
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## BND 801 Internship in Hospital /Experiential Learning (6 months)

#### **Internship Guidelines**

The aim is to enable all Bachelors in Nutrition and Dietetics (Honors) students to be licensed to practice as professionals in Nutrition and Dietetics.

**Expected Competencies:** 

#### **Key competencies**

Expected Key competencies expected include:

- AND HEALTHCARE PORT I. Ability to identify patients that require nutrition assessment.
- II. Ability to use the nutrition assessment tools available.
- III. Have the technical practice of medical nutrition.

#### **General competencies**

General competencies expected include:

- I. Communication and listening skills.
- II. Nutrition counseling.
- III. Identifying, and evaluating medical family genetic history, social information, nutritional, and medication history. Physical information and laboratory data.
- IV. Accurate measurement and recording of the anthropometric measures using appropriate
- V. equipment/tools in accordance with the available Standard Operating Procedures (SOPs).
- VI. Interpretation and application of the biochemical measures.
- VII. Nutrition physical and assessment skills.
- VIII. Counselling skills.
  - Have good interpersonal relationships; team player. IX.
  - X. Organizing, planning, and coordinating skills. 2021
  - XI. Training skills.
- Skills in research methodology, data analysis, and interpretation. XII.
- Development of Information, education and Communication (IEC) materials. XIII.
- XIV. Documentation and report writing skills.
- XV. Leadership skills.

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#### **Nutrition Screening**

Provides a mechanism to identify patients who would benefit from nutrition assessment The intern is expected to:

- I. Screen patient/client to determine whether they are nutritionally compromised, or at nutrition risk.
- II. Assign a nutrition status or risk of malnutrition for each patient after completing the evaluation and assessment.
- III. Use assigned nutrition status or risk levels to prioritize nutritional interventions.

### Anthropometric

- I. The intern should be able to carry out all the anthropometric measurements such as:
- II. Weight.
- III. Height.
- IV. Mid Upper Arm Circumference (MUAC).
- V. Head circumferences.
- VI. Arm span, waist circumference, skin fold.
- VII. The intern should be able to analyze and interpret the measurements.
- VIII. Use the results to counsel and educate the client/patient.

#### **Biochemical Assessment**

I. The intern should be able to understand, interpret, and apply the results of the biochemical parameters in the nutritional management of diseases.

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II. The intern should also be able to assess vital signs; blood pressure, and random blood sugar.

#### **Clinical Signs**

I. The intern should be able to observe and identify signs and symptoms of nutritional deficiencies and apply them in the nutritional management of the condition.

#### **Dietary Assessment**

The intern should be able to take dietary history using the standard tools.

- An intern should be able to assess:
- Taste change(s).
- Eating and feeding problems.

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- Nausea.
- Vomiting.
- Diarrhoea.
- Constipation.
- Food intolerances, adverse reactions and/or allergies.
- Food-drug interactions.
- Unhealthy dietary behaviours.
- Eating disorders.
- Socioeconomic, religious, ethnic, and cultural background.
- Lifestyle practices

AND HEALTHCAR After the intern has gone through the above processes he/she should be able to interpret analyze, and plan the nutrition intervention. They should be able to diagnose and plan dietary intervention.

### **Nutrition Therapy Process**

#### The Clinical Nutritionist

- Participates with other healthcare team members and the patient in planning and implementing suitable diet therapy intervention(s) through the exchange of information and education.
- Actively participates in interdisciplinary team meetings, ward rounds, discharge planning conferences, peer reviews, performance improvement activities, and other relevant activities to monitor and share findings and recommendations with team members.
- Educates the interdisciplinary team members on the role of nutrition in health and disease and the role of the clinical dietician in giving nutrition guidance.
- Provides consultation and training to other appropriate health care programs and services.
- Initiates or participates in nutrition research.

#### **Nutrition Counselling**

- The Clinical Nutritionist initiates nutrition counseling consistent with the patient's current diet or nutrition therapy needs, recording intervention, and counseling in the medical record.
- These include the patient's level of comprehension and the clinician's assessment of the patient's readiness to learn, expected compliance, and identification of respective barriers.
- Provides nutrition counseling to patients when food-drug interaction significantly alters the patient's food selection.
- Evaluate and document progress toward desired outcomes and/or goals.
- Initiates health maintenance nutrition education.
- Evaluates and implements alternate method(s) or system(s) for nutrition education, as appropriate.
- Monitors, evaluates, and documents individualized nutrition therapy plans.
- Refers or schedules patients for follow-up in the Out Patient Nutrition Clinic or inpatient and outpatient group education activities
- Evaluate educational materials for content, reading level, and other pertinent factors.
- Employs application of technology in nutrition intervention, when appropriate.
- Documents findings utilizing established practice guidelines and quality improvement and assessment indicators.

#### **Nutrition Education**

• Conduct nutrition education sessions as an essential component of medical nutrition therapy and services helping individuals establish and maintain healthy lifestyles, good food habits, and attitudes.

#### **Interdisciplinary Care Team Planning**

• Be an active member of the interdisciplinary care planning team so that medical nutrition therapy is integrated into the patient's care plans as needed.

#### Working within multidisciplinary healthcare teams

- Teamwork and collaboration are central to modern healthcare delivery. By working alongside physicians, nurses, therapists, and other healthcare professionals, dietitians leverage their specialized knowledge to create integrated care plans tailored to each patient's unique needs.
- Examples of collaboration:
- Dietitians and physicians: Develop nutrition plans for chronic conditions or recovery.
- Dietitians and nurses: Monitor dietary intake and assess nutritional needs.
- Dietitians and therapists: Address the nutritional aspects of mental health, eating disorders, and other complex needs.

#### Support of Patient Care Programmes

Programs and services with a nutrition component are supported by a Clinical Nutritionist. These include, but are not limited to:

- Outpatient Clinics/Department.
- Trauma and Emergency.
- Long-Term Patients.
- Primary Health Care Centres.
- Specialized units and Clinics e.g. ICU & HDU, Diabetes, Renal Unit, burns unit, oncology, and others.

#### **Course Outcomes**

Select a writing practice from the acquired skills as a clinical nutritionist and Dietitian Demonstrate an attitude of professionalism when working with colleagues and other health professional staff of the hospital

Utilize skills in record keeping, organizing Material, Presentation of case studies and Effective communication.

Analyse and develop the ability to work independently and as a team member to perform critical thinking and problem-solving skills in different domains.

Design, evaluate, and implement new methods or protocols in different cases.

Evaluate the relationship between nutrition data and pathologic process, and how nutrition data relates to health and disease.

Develop the ability to work independently and as a team member to perform critical thinking and problem-solving skills in different domains.

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## Supervised Practice Work

Content	Competencies
Department	Define the role of dietitian in hospitals
Orientation	Outline the functioning of the dietary department in a hospital and learn about its working schedules and plans. List and summarize the knowledge about the maintenance of the patient's case file and how the details are entered/registered in it.
Food Service Area	Interpret the therapeutic and normal diet settings in the kitchen
ALE NATIONAL CON	Interpret acquiring skills in food procurement quality maintenance and patient food service Acquire skills in : • Menu system • Personnel management • Food supply, procurement, and control • Food production • Food production
Medicine (3 cases)	<ul> <li>Financial management</li> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counseling given to the</li> </ul>
	<ul> <li>patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>

Nephrology and Urology (3 cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counseling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
Cardiology (3 cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counseling given to the</li> </ul>
NATIONAL	<ul> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
Gastroenterology (3cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
4	अर्भ स्वास्थ्य देखान्द्र

Oncology (2 cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
Neurology (3 cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
Obstetrics gynaecology (2cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>

Paediatrics	• Illustrate the assessment of nutritional status among
(2 cases)	<ul> <li>patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration, and formulation.</li> </ul>
Surgery (2cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration and formulation.</li> </ul>
Intensive care unit (3 cases)	<ul> <li>Illustrate the assessment of nutritional status among patients.</li> <li>Interpret and apply dietary interventions in disease condition of the patients.</li> <li>Explain and develop the dietary counselling given to the patients.</li> <li>Illustrate and relate the condition in which Enteral and Parenteral nutrition is provided, its administration and formulation.</li> </ul>

Multi- speciality	• Illustrate the assessment of nutritional status among
clinics(1case)	patients.
	• Interpret and apply detary interventions in disease condition of the patients
	• Explain and develop the dietary counselling given to the
	patients.
	• Illustrate and relate the condition in which Enteral and
	Parenteral nutrition is provided, its administration, and
FUE	formulation.
NO ₁	LTH-
S	Car
Psychiatry/Rehabilit	• Illustrate the assessment of nutritional status among
ation	patients.
0	• Interpret and apply dietary interventions in disease
(2cases)	• Explain and develop the dietary counselling given to the
	patients
Ź	• Illustrate and relate the condition in which Enteral and
0	Parenteral nutrition is provided, its administration and
F	formulation.
$\leq$	
Z	S
Dialysis	• Illustrate the assessment of nutritional status among
R	patients.
(1case)	• Interpret and apply dietary interventions in disease
	condition of the patients.
TX TYICE	• Explain and develop the dietary counselling given to the
	patients.
	• Illustrate and relate the condition in which Enteral and
0.0	formulation
8	Tormulation.
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**Learning Strategies**: Small group discussion (SGD), Problem-Based Learning (PBL), Case Based Learning (CBL), Clinics, seminars.

Formative Assessment: Quiz, Viva, Clinical assessment (OSCE, OSPE, WBPA), Clinical Log Book

Interns will be evaluated periodically i.e. in every quarter of 12 months and aggregate marks of all four assessments will be used to issue internship completion certificates. The internship completion certificate will be issued from the Dean's office, only after Successfully clearing all four assessment exams and

Obtaining a satisfactory completion certificate from the head/in charge of the department at the end of the internship.

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### **BND 802 Research and Trends in Nutrition and Dietetics**

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Semester	EOR ALLIED AND HEAD
Course	BND 802 Research and Trends in Nutrition and Dietetics
Name S	- CAD
Course Description	This course will provide an introduction to the research process, responsible conduct in research, and explore major types of study design in nutrition. Students will examine the literature to evaluate evidence about nutrition problems and interventions. Students will search and exchange the information from journals, books and reports for exchange of ideas in issues
Objectives	related to Nutrition and Dietetics. 1. To develop understanding regarding the principles of research design, methodology, and analysis
TRA R	2. To develop responsible conduct in research, including ethical considerations and plagiarism avoidance
H.C.	3. To developing critical thinking and problem-solving skills to approach complex nutrition-related issues
	4. To communicate scientific information to various audiences

Reference	Vegrove JA., Hodson L., Sharma S. and Lanham-New	w SA. (2015).
Books	Nutrition Research Methodologies (The Nutrit	tion Society
	Textbook). Wiley-Blackwell; 1st edition. Starks	TP. (2006).
	Trends in Nutrition Research. Nova Science Public	shers Inc 1st
	edition. Pounis G. (2018). Analysis in Nutritic	on Research:
	Principles of Statistical Methodology and Interpre	tation of the
	Results. Academic Press Inc. Nelson M. (2020).	Statistics in
	Nutrition and Dietetics. Wiley-Blackwell Chrzan	J. and Brett
	J.(2017). Research methods for anthropological studie	es of food and
.5	nutrition. Berghahn Books Sreelathak NT. and Sreela	tha K. (2021)
Al.	Research ethics and plagiarism. Ess Ess Pubns.	
8		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Prerequisites	Completion of 6th Semester	20
Course Plan		TES
Unit	Practical	Credit O
ATI		Hours
A	Research Process and Responsible Conduct	30 0
	• Principles of research design, methodology, and	
A	analysis	4
	• Ethical considerations for research studies and	5
52 7	concept, factors and solutions related to	
E	plagiarism	· 5
Ŕ	• Identification of complex nutrition-related issues	10
	Since-2021	
п	Study Design and Evaluating Evidence in	30
	Nutrition	
	• Different types of study designs, such as	
	observational studies, experimental studies, and	
	quasi-experiments etc.	

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	• Strengths and limitations of each design	
	• Quality evaluation of research studies	
	• Reviewing the literature on nutrition-related topics	
	• Analysis and interpretation of the findings of	
	research studies	
ш	Literacy skills to search relevant and reliable sources	30
	• Reliable databases, journals, and other sources to	
5	locate scientific evidences and information	
	• Evaluation of the credibility and reliability of	Yp \
N.	information sources	· m
6		P
IV	Knowledge translation to various audiences	30
AL	Principles of knowledge translation	m
N	• Group discussion on perspectives related to	S
0	nutrition-related issues with peers	510
NA		SNG
4		14
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	NCALD	
	NGAIIF	72.
6	Since-2021	3
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### **BND 803 Scientific Writing in Nutrition and Dietetics**

CL	СР	L	Р
0	2	0	60

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Semester	VIII
Course	BND 803 Scientific Writing in Nutrition and Dietetics
Name	
Course	This course will provide students with the skills and knowledge
Description	necessary to effectively communicate scientific information related
AL	to nutrition and dietetics through written reports, articles, and other
N	$\mathbf{A}$ forms of scientific writing. Students will learn to identify and
	critically evaluate research studies, write clear and concise abstracts,
A	introduction sections, methods, results, discussions, and conclusions, $\ge$
Z	as well as prepare tables, figures, and references. The course will
	also cover strategies for editing and revising scientific writing, as
A	well as strategies for communicating scientific information to
B	various audiences.
Objectives	1. To identify the importance of scientific writing in nutrition and
K	dietetics NCAHP
.0.	2. To critically evaluate and interpret research studies in nutrition
	and dietetics
	3. To write a clear and concise manuscript
	4. To develop presentation and communication skills to effectively
	present a research paper at scientific forum

Reference	• Heard SB. (2016). The Scientist's Guide to Writing: I	How to Write							
Books	More Easily and Effectively throughout Your Scient	ntific Career.							
	Princeton University Press.								
	• Wheatley D. (2021) Scientific Writing And Publishing. Cambridge								
	University Press.								
	• Prasann K. and Bharti PK. (2020) Scientific writing and research								
	quality. Discovery Publishing House.								
	Principles of								
c	Statistical Methodology and Interpretation	of the							
5	Results. Academic Press Inc.								
	• Nelson M. (2020). Statistics in Nutrition and Diet	etics. Wiley-							
8	Blackwell								
5	• Sreelathak NT. and Sreelatha K. (2021) Research	h ethics and							
AL	plagiarism. Ess Ess Pubns.	TE							
Prerequisites	Completion of 6th Semester	SI.							
Course Plan		01							
		2							
Unit	Practical	Credit							
Unit	Practical	Credit Hours							
Unit 1.	Practical Introduction to Scientific Writing	Credit Hours							
Unit 1.	Practical Introduction to Scientific Writing 1. Overview of scientific writing in nutrition and	Credit Hours 30							
Unit 1.	Practical Introduction to Scientific Writing 1. Overview of scientific writing in nutrition and dietetics	Credit Hours							
Unit	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science	Credit Hours							
Unit 1.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles,	Credit Hours							
Unit 1.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation         1. Identifying key components of a research study	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation         1. Identifying key components of a research study e.g., background, objectives, methods, results,	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation         1. Identifying key components of a research study e.g., background, objectives, methods, results, conclusions	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation         1. Identifying key components of a research study e.g., background, objectives, methods, results, conclusions         2. Critically evaluating research studies e.g., study	Credit Hours							
Unit 1. 2.	Practical         Introduction to Scientific Writing         1. Overview of scientific writing in nutrition and dietetics         2. Importance of clear communication in science         3. Types of scientific writing (e.g., research articles, review articles, case reports)         Research Study Evaluation         1. Identifying key components of a research study e.g., background, objectives, methods, results, conclusions         2. Critically evaluating research studies e.g., study design, population selection, data analysis	Credit Hours							

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3.	Writing a Clear and Concise Scientific Manuscript30
	1. Abstract and introduction section including
	background information, research question
	2. Methodology comprising appropriate study
	design, participant recruitment models
	3. Results covering effective data presentation
	4. Discussion describing implications of findings
	5. Conclusion including summary of findings
S	6. Preparing effective tables, figures, and correct
5	references
<u> </u>	7. Strategies for editing scientific writing e.g.,
0	grammar, syntax, clarity and concision
4.	Presentation and communication skills for scientific 30
M	forum
0	1. Synthesis, interpretation, and communication of
	research results for professional audiences
AN	2. Oral and poster presentations

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#### 4.2 Masters in Nutrition and Dietetics

#### **Eligibility for admission:**

Bachelor of Nutrition and Dietetics in Honours or equivalent from a recognised university 

#### **Medium of instruction:**

English shall be the medium of instruction for all the subjects of study and examination.

#### Attendance:

A candidate has to secure a minimum

1.75% attendance in theoretical

2.80% in Skills training (practical) for qualifying to appear for the final examination.

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#### **Credit details:**

1 hour lecture per week - 1 credit

2 hours of tutorials per week - 1 credit

2 hours of clinics per week - 1 credit

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### **Curriculum Outline**

#### Masters in Nutrition and Dietetics

#### [2 years program]

#### **Proposed Scheme**



### **Credit details:**

One credit implies one hour of lecture per week two hours of laboratory/practical per week or two hours of

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clinics per week or two hours of Research projects per week

A semester is considered to have 15 weeks. For example,

1 credit course = 15 hours of lectures per semester

3 credits course = 45 hours of lectures per semester

0.5 credit course = 15 hours of practical/laboratory.



**CL: Credit for Lecture** 

**CP: Credit for Practical** 

- L: Hours for Lecture
- **P: Hours for Practical**

#### **Curriculum Outline**

#### **First Semester**

SI.no	Course Titles	Credits		Hours	/Semester		
•				(15 wee	eks)	Total	
		Ineory	Practical	Total	Ineory	Practical	Total
MND	Advanced	$A^{4}LI$	EU AN	$D^4$	60	0	60
101	Human Nutrition			- UF	A1.		
	and Metabolism				KTA		
MND	Advanced	4	0	4	60	0	60
102	Pathophysiology					12	
Z	and Clinical						
S.	Biochemistry					P	
MND	Dreventive &	3	1	1	15	30	75
102	Therementie	5		4	чJ	50	15
103	Therapeutic					ý	
0	Dietetics						
MND	Research	4	0	4	60	0	60
104	Methodology for					Ċ	
	Dietetics and						
	Public Health						
MND		2	2	4	30	60	90
105	Biostatistics		uafof	JITC		R	
TOTAL		17	3	20	255	90 3	345
	N N	NC	AHF				
	TY NOT	Cino	- 2024	1			
	Ser Ser	SIIC	E-2021		JCI -	0	
	9 37.	T		Jol	R		
		र्भव	रिश्र	4			

#### Second Semester

SI.no	Course Titles	Credits		Hours (15 we	/Semester eks)		
		Theory	Practical	Total	Theory	Practical	Total
MND	Nutrition	2	2	4	30	60	90
201	Assessment	ALLI	ED AN	N /			
	Methods &			D HE	A		
	Applications for				K		
	Dietitians					4	
MND	Advances in	2	2	4	30	60	90
202	Enteral and					'D	
5	Parenteral					20	
7	Nutrition					T	
MND	Advances in	3	1	4	45	30	75
203	Public Health						S
XTI	Nutrition						0
MND	Nutrition and	2	0	2	30	0	30
204	Immunity						
MND	Innovation in	1	3	4	15	90	10
205	Food product						5
So.	development		uatef	JITC		R	
MND	Scientific writing	2	0	2	30	0 3	30
206	skills	NC	AHF			12 /	7
TOTAL	6	12	e ⁸ 2021	20	180	240	420
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#### **Third Semester**

SI.no.	Course Titles	Credits		Hours /Semester (15 weeks)			
		Theory	Practical	Total	Theory	Practical	Total
MND	Intellectual	2	-0 AN	$ $	30	0	30
301	Property Rights			2 HE	AI.		
MND	Precision	4	0	4	60	0	60
302	Nutrition					4	
MND	Institutional	1	5	6	15	150	165
303	Food Se <mark>rvice</mark>					D.	
3	Management					PO	
~	and Quantity					T	
NA	Cookery						0
MND	Advanced	1	3	4	15	90	105
304	Communication					9	
4 M	Skills for					(	
	Nutrition						
	Practice						
MND		0	10	10	0	300	<b>3</b> 00
305	Internship		പ്പെ	JITC		R	
TOTAL		08	18	20	120	540	660
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#### **Fourth Semester**

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SI.no.	Course Titles		Credits		Н	ours /Semes (15 weeks)	ter
		Theory	Practical	Total	Theory	Practical	Total
MND	Dissertation	0	20	20	0	600	600
401	2P	ALLI	ED AN	n lin			
TOTAL	FUN	0	10	10	0	600	600
NATIONAL CONN.						WRE PROFESSION	

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#### **First Semester**

#### MND 101 Advanced Human Nutrition and Metabolism

CL	СР	L	Р
4	0	60	0

Semester	FOR ALLIED AND HEAD		
Course	MND 101 Advanced Human Nutrition and Metabolism		
Name 5	CAD TO		
Course	Proper nutrition is the crux of human health along with safe water,		
Description	sanitation, immunization etc. Adequate knowledge about this core		
	course on macro and micronutrients in totality will enable the students		
AL	to handle a population's nutrition situations and how to apply the		
N	knowledge for sustainable handling to induce better health and		
)TT	productivity. 5		
Objectives	To provide in-depth understanding related to macro and micronutrients		
	To impart knowledge about specific requirements of these nutrients as		
R	per age, sex, and physiological conditions for meaningful handling of		
	normal and disease situations.		
	To gain detailed knowledge of the digestion, absorption and		
N. N.	metabolism of carbohydrates, protein, fat, vitamins and minerals, as		
C.	well as energy balance and metabolism.		
Reference	1. Wildman REC and Medeiros DM (2000) Advanced Human		
Books	Nutrition. CRC Press, Boca Raton, Florida.		
	2. Bamji MS, Rao NP and Reddy V (2003) Textbook of Human		
	Nutrition. 2 nd Edition, Oxford and IBH Publishing Co. Pvt. Ltd.		
	New Delhi.		
	3. Eastwood MA (1997) Principles of Human Nutrition. London ;		
	Chapman & Hall.		

	4.	FAO (2004) Human Energy Requirements -Report of a Joint
		FAO/WHO/UNU Expert Consultation. Technical Report Series 1.
		Food and Agriculture Organization, Geneva.
	5.	FAO (2007) Protein and Amino Acid Requirements - Report of a
		Joint FAO/WHO/UNU Expert Consultation. Technical Report
		Series 1. Food and Agriculture Organization, Rome.
	6.	Berdanier, CD and Zempleni, J (2009) Advanced Nutrition:
	4	Macronutrients, Micronutrients and Metabolism. CRC Press, New
C	$O_{L}$	York.
5	7.	Groff J L and Gropper S (2012) Advanced Nutrition and Human
- Ani		Metabolism. 7 th Edition, Yolanda Cossio, New York.
6	8.	Summathi S (2017) Food Chemistry and Nutrition. BS
0		Publication, Hyderabad.
AL	9.	Ross A C, Caballero B, Cousins RJ, Tucker KL and Ziegler TR
N		(2012) Modern Nutrition in Health and Disease. 11 th Edition,
0		LWW, Philadelphia.
AT	10.	Whitney EN & Rolfels CR (2019) Understanding Nutrition. 15 th
Z		Ed., West Publishing Company, USA.
	11.	Stipanuk MH and Caudill MA (2013) Biochemical, Physiological
A		and Molecular Aspects of Human Nutrition. 3rd Edition, Elsevier
		Pub.
+2 -	12.	https://www.nutritionintl.org
E.	13.	https://www.who.int
R R R R R R R R R R R R R R R R R R R	14.	https://www.hsph.harvard.edu/nutritionsource
5	15.	http://www.nin.res.in_2021
Prerequisit	es: Ba	chelor of Nutrition and Dietetics (Honors) (4-year program)
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4.	Regulatory nutrients and water	20
	Functions, absorption, requirement, sources,	
	deficiency, toxicity, metabolism and excretion	
	of fat-soluble vitamins - A, D, E and K and	
	water-soluble vitamins- thiamine, riboflavin,	
	niacin, pyridoxine, folate, B ₁₂ , ascorbic acid,	
	pantothenic acid and biotin; functions and	
	mechanisms of action, digestion, absorption,	
C	transport, excretion, adequate intake,	(H)
.5	requirements, deficiency, toxicity of macro	1
	minerals - calcium and phosphorus and micro	
8	minerals – iron, zinc, sodium, copper, cobalt,	P
G	selenium and chromium; water and electrolyte	6
7K	balance - functions and distribution of water in	TH
$\geq$	body; electrolyte composition of body fluids	S.
0	and electrolyte balance.	S
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#### MND 102 Advanced Pathophysiology and Clinical Biochemistry

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Semester	I FOR
Course Name	MND 102 Advanced Pathophysiology and Clinical Biochemistry
Course Description	It is a course that integrates the advanced concepts of the pathophysiology of disease with clinical biochemistry.
Objectives	<ol> <li>To comprehend Normal Biochemistry, Disease Pathogenesis, Etiology, Clinical Signs &amp; Symptoms, Diagnostic Tests, and Complications of the healthy &amp; diseased conditions.</li> <li>To identify and understand the importance and use of diagnostic tests in the prognosis of disease processes.</li> </ol>
Reference Books	<ol> <li>Baynes, J., and Dominiczak. M. (2002). Medical Biochemistry. London : Mosby</li> <li>Thabrew, I. and Ayling. R.M. (2001). Biochemistry for Clinical Medicine. New Delhi: Replika Press Pvt Ltd.</li> <li>Guyton, A.C., and Hall. J.E. (1996). Textbook of Medical Physiology (9thed.). Bangalore: Prism Books Pvt. Ltd.</li> <li>Cotran, R.S., Kumar, V., Robbins, S.L., and Schoen.F.J. (Ed.). (1994). Robbins Pathologic Basis of Disease (5thed.). Bangalore: Prism Books Pvt Ltd.</li> <li>Devlin, T.M. (2002). (Ed.). Textbook of Biochemistry with Clinical Correlations.(5thed.). New York: Wiley-Liss.</li> </ol>
Prerequisites	Bachelor of Nutrition and Dietetics (Honors) (4-year program)

#### **Course Plan** Hours THEORY **UNIT ONE** 30 Disorders of the Cardiovascular system: Disorders of rhythm --- Brady arrhythmias – Dysfunction of the SA and AV nodes --- Tachyarrhythmias Disorders of the heart --- Congestive heart failure --- Ischemic Heart disease (MI, Angina, Sudden cardiac death).--- Valvular heart disease –Rheumatic Heart Diseases -- Myocardial heart disease, Primary (essential) and secondary hypertension --- pathogenesis and risk factors --- effects of Hypertension on the heart, kidney, and brain. **FESSIONS** Introduction to other heart diseases: cardiomyopathies and congenital HD Atherosclerosis and other forms of Arteriosclerosis --- pathogenesis and risk factors Disorders of lipoprotein metabolism Cardiac Function tests Disorders of the respiratory system: General characteristics of respiratory disorders Classification of respiratory disorders Upper and lower respiratory tract infections: common cold, influenza, pneumonia Obstructive respiratory disorders: Bronchial asthma, bronchitis, emphysema Restrictive respiratory disorders: Pneumothorax, Atelectasis COPD, ARDS Respiratory failure Since-2021 Bronchiectasis --- Cystic Fibrosis --- Disorders of the pleura and the diaphragm Pulmonary Function Tests Neoplasia: Definition --- Tumors --- Benign and Malignant --- Characteristics Molecular basis of Cancers --- Oncogenes --- Activation --- Tumor Suppressor Genes Chemical carcinogenesis – stages

Radiation carcinogenesis       Viral carcinogenesis         Viral carcinogenesis       Clinical features of cancers         Host cell defenses       Grading of tumors         Diagnosis of cancers histologic and molecular methods Tumor markers       30         UNIT TWO       Clinical Manifestations of renal diseases (overview)         Types, pathogenesis and clinical manifestations of       Glomerular diseases: glomerulonephritis, nephrosis, nephritic syndrome         Diseases affecting the tubules and interstitiumPyelonephritis       Diseases affecting the tubules and interstitiumPyelonephritis         Diseases of the blood vessels Nephrosclerosis       Urolithiasis         Acute and chronic renal failure       Voiding dysfunction, Incontinence, fluid-electrolyte balance,         Renal function test       Disorders of the GI tract:         Pathogenesis and clinical manifestations of       GERD and bile reflux - H. hernia         Esophagitis       Gastritis- peptic ulcer         Vascular disease- Ischemic Bowel disease, haemorrhoids       Enterocolitis- diarthoea, dysentery         Constipation       Malabsorption syndromes-celiae sprue, Bacterial overgrowth syndrome and IIBD         Colonic diverticulosis       Gastric Function tests         Liver disorders:       Jaundice- abnormalities of bilirubin metabolism         Morphology and patterns of hepatic Injury- Necrosis, degeneration and Inflammation, <th></th>	
Viral carcinogenesis Clinical features of cancers Host cell defenses Grading of tumors Diagnosis of cancers histologic and molecular methods Tumor markers UNIT TWO Disorders of the Kidney and the urinary tract Clinical Manifestations of renal diseases (overview) Types, pathogenesis and clinical manifestations of Glomerular diseases: glomerulonephritis, nephrosis, nephritic syndrome Diseases affecting the tubules and interstitumPyelonephritis Diseases of the blood vessels Nephrosclerosis Urolithiasis Acute and chronic renal failure Voiding dysfunction, Incontinence, fluid-electrolyte balance, Renal function test Disorders of the GI tract: Pathogenesis and clinical manifestations of GERD and bile reflux - H. hernia Esophagitis Gastritis, peptic ulcer Vascular disease- Ischemic Bowel disease, haemornhoids Enterocolitis - diarnhoea, dysentery Constipation Malabsorption syndromes-celiae sprue, Bacterial overgrowth syndrome and IIBD Colonic diverticulosis Gastric Function tests Liver disorders: Jaundice- abnormalities of bilirubin metabolism Morphology and patterns of hepatic Injury- Necrosis, degeneration and Inflammation,	Radiation carcinogenesis
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Morphology and patterns of hepatic Injury- Necrosis, degeneration and Inflammation,	Jaundice- abnormalities of bilirubin metabolism
	Morphology and patterns of hepatic Injury- Necrosis, degeneration and Inflammation,
regeneration and fibrosis	regeneration and fibrosis

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Inflammatory disease- viral hepatitis

Cirrhosis- etiology, alcohol and organ damage, Portal hypertension, ascites,

splenomegaly, Hepatic failure

Hepatic encephalopathy

pathogenesis and features

Cholelithiasis- pathogenesis and manifestations of cholesterol and pigment stones HEALTHCAR

Cholestasis- Cholecystitis

Pancreatitis- chronic and acute

Liver function tests.

F). Disorders of the Endocrine system:

Diseases of the thyroid ----hypo and hyperthyroidism --diagnostic tests

Diabetes Mellitus- types, pathogenesis- metabolic derangements and metabolic alterations.

Complications of DM- Micro and macroangiopathy, neuropathy, nephropathy, retinopathy, diabetic foot

Diagnostic tests

G). Disorders of Reproductive system:

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Etiology, Pathogenesis, clinical manifestations, diagnosis and treatment of Endometriosis, PCOS and STDs

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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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#### MND 103 Preventive and Therapeutic Dietetics

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Semester	ITAL
Course Name	MND 103 Preventive and Therapeutic Dietetics (Theory and Practical )
Course Description	It is a course that details the application of preventive and therapeutic Dietetics.
Objectives Reference Books	<ol> <li>Relate the physiologic role of specific nutrient &amp; non nutrient components of food in relation to various organ systems.</li> <li>Explain the mechanisms of disease management process and correlate it with the principles of medical nutrition therapy</li> <li>Interpret therapeutic principles in clinical settings to develop dietary interventions.</li> <li>Racz B., Duskova M., Starka L., Hainer V., Kunesova M. Links between the circadian rhythm, obesity and the microbiome. <i>Physiol. Res.</i> 2018;67:S409–S420.</li> <li>Ceschia A, Horton R. Maternal health: time for a radical reappraisal. <i>The Lancet.</i> 2016;388(10056):2064–6.</li> <li>Wei M, Ho E, Hegde P. Wei M, et al, An overview of percutaneous endoscopic gastrostomy tube placement in the intensive care unit. J Thorac Dis. 2021 Aug;13(8):5277-5296.</li> <li>Preventive Nutrition – The Comprehensive Guide for Health Professionals (2005) ;3rd Edition; Edited by Andrianne Bendich, Richard J. Deckelbaum Human Press Inc., New Jersey.</li> </ol>

	5. Nutrition Support for the critically ill patient – A Guide to Practice
	(2005);Edited by GAIL CRESCI Taylor and Francis London, CRC press,
	USA.
	6. Dietary Fiber in Human Nutrition (2001);3rd Edition ; Edited by Gene A.
	Spiller CRC press, USA.
	7. Handbook of Nutrition and Food (2002); Edited by Carolyn D.
	Berdanier, CRC press, USA
Prerequisites	Bachelor of Nutrition and Dietetics (Honors) (4-year program)

Hours

20

Course Plan

#### THEORY

#### UNIT ONE

Role of macronutrients and micronutrients in therapeutic conditions

Carbohydrates: Types, Mode of Action & preventive use and therapeutic use in specific disease, Proteins: Types &Role of specific amino acids- preventive and therapeutic uses in various disease states, Lipids: Types(regular/structured), Mode of action preventive and therapeutic and use in specific disease. Vitamins and Minerals: Its application in various disease conditions. Dietary fiber and Water, Its application in various disease conditions.

The Immune & Inflammatory System, Introduction to the immune system. Nutrients that affect immune function & their assessment. Role of cytokines in therapeutic conditions

Chrono nutrition and chronic diseases: Introduction to Chrono nutrition, Food timings, circadian rhythm and Chrono nutrition

Fundamentals of nutrition therapy : - Feeding techniques, types of therapeutic diets

Guidelines for nutrition therapy- hypometabolic starved patient & hypermetabolic stressed patient.

Critical Care Illness & Conditions requiring intensive care:

Definition- Critical Illness & Conditions requiring intensive care, Goals of Nutrition Support in critically ill.Brief about Enteral Nutrition Support

Burns: Definition: Burns, Types of Burns, Degree of Burns, Assessment of Burn Surface Area, Systemic Response to Burns on different organ system. Diabetes (Type 1, Type 2, Gestational, Nephropathy and other complications.) Obesity in different grades and age groups Inborn Errors Of Metabolism HEALTHCAL Phenylketonuria, glycogen storage disease, Galactosemia.

#### UNIT TWO

Respiratory (Pulmonary) Disorders:

Normal respiration mechanism: a brief overview of different types of ventilation MNT Goals & Principles, Acute Exacerbation MNT, Chronic condition MNT Immunonutrition

Gastrointestinal disorders:Gastritis, GERD, diverticular diseases, gastric surgeries.

Liver disorders: Cirrhosis of the liver, hepatic encephalopathy, Liver transplant, Gall bladder disease, Pancreatitis (acute, chronic). Metabolic liver diseases-NAFLD, hemochromatosis. Disorders of the heart, Primary (essential) and secondary hypertension

Cardiovascular disorders: Disorders of the heart, Primary (essential) and secondary hypertension

Renal Disorders: Acute renal failure, Nephrotic syndrome, Chronic kidney disease, renal replacement therapy, renal transplant

Metabolic: Diabetes (Type 1, Type 2, Gestational, Nephropathy and other complications.) ce-2021

Obesity in different grades and age groups

Diabetes (Type 1, Type 2, Gestational, Nephropathy and other complications.) Obesity in different grades and age groups

Inborn Errors Of Metabolism, Phenylketonuria, glycogen storage disease, Galactosemia.

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NEESSIONS

PRACTICAL	30
A) Estimation of nutrient requirements- Energy, Carbohydrates, Protein etc. ,	
Disease specific dietary planning & interpretation of case studies	
Cardiovascular Disease-	
• Diabetes	
• Obesity	
Inborn Errors Of Metabolism	
B) I. Standardizing general high calorie high protein recipes.	
2. Standardizing general low calorie recipes	
3. Standardizing recipes based on different nutrient needs	$\mathbf{i}$
4. Counseling Techniques and mock sessions	
G	2
C) Estimation of nutrient requirements-	TE
Critical Care	, S
Burns (different Types & Degrees)	00
Cancer (dietary guidelines for different cancers & therapies)	Z
Surgery (associated to different disease states)	S
D) 1. Disease-specific dietary planning & interpretation of case studies and	
presentations in Gastrointestinal diseases-	5
2. Disease-specific dietary planning & interpretation of case studies and	
presentations in Liver disorders	
3. Disease-specific dietary planning & interpretation of case studies and	
presentations in Renal Disorders Since-2021	
4. Disease-specific dietary planning & interpretation of case studies and	
presentations in Pulmonary Disease	
E) 1. Review& Case study presentations for therapeutic conditions	
2. Review of nutrient drug interactions	
3. classes for small sample case study presentations by students	
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#### MND 104 Research Methodology for Dietetics and Public Health

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4	0	60	0

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Semester	UN FOR
Course	MND 104 Research Methodology for Dietetics and Public Health
Name	
Course	This course provides students with a comprehensive understanding of
Description	research methodology in dietetics and public health with hands-on
AL	practical aspects in epidemiology, study design, statistics, body
NC	composition, physical activity assessment and dietary intake
	measurements as well as experience in scientific writing and
A	detailed reviews of peer reviewed scientific papers in dietetics and
Z	public health. This course covers various aspects of research
	methodology, including research design, data collection, data
A	analysis, and interpretation as well as ethical issues in conducting
6	research. This course will enable students to design, conduct, and
52 1	evaluate research studies.
E B	NCAHP
.6	Since-2021
	क अर्भर स्वास्थ्य देखान्द्र

Objectives	1. To understand the principles of research methodology in dietetics and public health
	2. To identify the types of research questions and designs appropriate for studies and to provide an understanding of the term epidemiological studies
	3. To introduce the important scientific concepts in study design, research protocol development and ethical issues in research
While S	4. To introduce different strategies and interpretation of research studies and provide an understanding of key statistical issues including sampling, study size and statistical power.
Reference Books	<ul> <li>McClean S. (2019) Research Methods for Public Health. Sage Publications.</li> <li>Lovegrove JA., Hodson L., Sharma S. and Lanham-New SA. (2015). Nutrition Research Methodologies (The Nutrition Society Textbook). Wiley-Blackwell; 1st edition.</li> <li>Susan B and Deepa H. (2012) Introduction To Epidemiologic Research Methods In Public Health Practice. Jones &amp; Bartlett</li> <li>Nelson M. (2020). Statistics in Nutrition and Dietetics. Wiley-Blackwell</li> <li>Sreelatha k NT. and Sreelatha K. (2021)Research ethics and plagiarism. Ess Ess Pubns.</li> </ul>
Prerequisites	Bachelor of Nutrition and Dietetics (Honors) (4-year program)

Course Plan			
Unit	Practical	Credit Hours	
1.	Introduction to Research Methodology : Definition and		
	importance of research methodology, Research process:	15	
	problem formulation, hypothesis development, data		
	collection, data analysis, and interpretation, Overview of		
	research designs: descriptive, analytical, and experimental		
2. 5	Epidemiological Studies and Research Design: Types of	15	
An'	resear <mark>ch designs: cross-sectional, longitu</mark> dinal, quasi-		
10	experimental, randomized controlled trials, Factors to	2	
C	consider when selecting a research design, Case studies:	70	
	examples of different research designs in dietetics and	TH	
N	public health	N.	
0		S	
<3.	<ul> <li>Data Collection Methods : Surveys: types, advantages, and limitations, Interviews: types, advantages, and limitations</li> <li>Observational studies: types, advantages, and limitations</li> <li>Case studies: examples of different data collection methods</li> </ul>		
Z			
R			
Ro -	in dietetics and public health	K	
4.	Statistical analysis: descriptive statistics, inferential	215	
N. N.	statistics NCAHP		
	Data analysis software: examples of commonly used		
	software (e.g., SPSS), Data visualization techniques: charts,		
	graphs, tables		
5	Ethical considerations in research: informed consent,	15	
	confidentiality, deception, Reporting research results:		
	introduction, methods, results, discussion, conclusions		
	Case studies: examples of ethical dilemmas in dietetics and		
	public health research		

#### **MND 105 Biostatistics**

CL	СР	L	Р
2	2	30	60

MND 105 Biostatistics		
JN. KIHO		
Biostatistics applies statistical methods to biological and health		
research. The course covers data collection, analysis, and		
interpretation, focusing on study design, probability, hypothesis		
testing, regression, and survival analysis. Students learn to use		
statistical software, analyze real-world datasets, and apply		
findings to public health and clinical decision-making.		
• To understand fundamental statistical concepts and biological		
and health research methodologies.		
• To develop skills in designing and conducting epidemiological		
and clinical studies.		
• To master data collection, management, and analysis techniques		
using statistical software.		
• To learn to apply probability and hypothesis testing to real-		
world biological data.		
• To analyze and interpret results from regression models and		
survival analysis.		
• To communicate statistical findings effectively to inform public		
health and clinical decisions.		

D C	0 + 1 = 0 + (1000) + 1 + 1 + (1 + (1 + (1 + (1 + (1 + (1	
Keierence	• Sinith, G. (1998). Introduction to statistical reasoning. (No Title).	
<b>Books</b> • Daniel, W. W. (1978). <i>Biostatistics: a foundation for analysis in</i>		
	the health sciences (Vol. 129). Wiley.	
	• Kothari, C. R. (2004). Research methodology.	
	• Bhatnagar, O. P. (1990). Research Methods and Measurements in	
	Behavioural and Social Sciences. Agricole Publishing Academy.	
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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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#### Instructor in charge

M.Sc. and / Ph.D. in Foods and Nutrition or equivalent

Course Plan				
Unit	Торіс	Hours		
1.	Overview of concepts and definition in biostatistics, Various measurements and types of variables- indicators, Types of data – nominal, ordinal, interval, and ratio, Measures of central tendency and deviation: mean, median, mode, standard deviation, Z-score, Concepts of reliability and validity, Interpretation of research data	6		
2. JANO	Hypothesis and sampling: Types of hypothesis and examples for nutritional research, Sample size calculation- statistical procedures Errors in sampling- type 1 and type 2 errors, Consideration for sampling for statistical tests sample size, sample grouping	PROFESS		
NAFI	Statistical test: Concept of bivariate and multivariate, Comparison of data set –examples for nutritional research, T-test, paired t-test, Karl Pearson, correlation coefficient test, and others, Chi-square test and other various types of test			
4.	Statistical tests for multiple variables; F-test (ANOVA) Concept of regression analysis, line of regression, regression test Conducting statistical analysis and interpretation of data	8		
1.	Use of software in statistical analysis: Excel, SPSS, JASP, JAMOVIR, Any other software	20		
2.	Qualitative data analysis: ATLAS.T1, N-VIVO	20		
3.	Integrating quantitative and quantitative data	5		
4.	Various ways of presenting data: tables, figures graphs, and flow charts	15		

#### Second Semester

#### MND 201 Nutrition Assessment Methods & Applications for Dietitians

CL	СР	L	Р
2	2	30	60

	OR ALLIED AND HE		
Course	The course shall enable the student to learn about the various		
Description	methods of nutritional assessment and the skills to measure and		
MISS	interpret them.		
Objectives	This course will enable the students to		
	1. Understand the nutritional assessment of patients		
	2. Learn the skills to measure and interpret the various indicators		
$\geq$	and indices of nutritional assessment.		
0	3. Learn to design a nutritional assessment plan for subjects.		
AT			
References	1. Mahan, L.K. and Escott-Stump, S. (2021): Krause's Food		
	Nutrition and Nutrition Care Process, 16th Edition, Elsevier Pvt.		
A	Ltd.ISBN 032381025X		
	2. Vir SC. Public Health Nutrition in Developing Countries Pt 1		
र हरे	and 2.(2011) Wood head publishing India PVT LTD, New		
E.	Delhi. Cambridge, Oxford, Philadelphia.		
Ŕ	3. Sehgal S and Raghuvanshi Rita S Textbook of Community		
6	Nutrition. (2007) Indian Council of Agricultural Research,		
	Published by: Directorate of Information and Publication of		
	Agriculture, Indian Council of Agriculture Research, Krishi		
	Anusandhan Bhavan, Pusa, New Delhi-110012		
	4. Bamji MS, Krishnaswamy K, Brahmam GNV (2009). Textbook		
	of Human Nutrition, 3rd edition. Oxford and IBH Publishing		
	Co. Pvt. Ltd. ISBN 9788120417427		

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	5. Jeliffe DS.The Assessment of Nutritional status of the		
	community, (1966) WHO Geneva		
	6. Gopaldas T and Sheshadri S. Nutritional Monitoring and		
	Assessment. (1987) Oxford University Press, New Delhi.		
	7. Gibson R.S. Principles of Nutritional Assessment (2005) - 3rd		
	edition. Oxford University Press		
Webliography	1. Nutrition Screening Tools for Hospitalized Patients, Patricia S.		
	Anthony MS, RD 2008,		
	https://doi.org/10.1177/0884533608321130		
S	2. Holmes CJ, Racette SB. The Utility of Body Composition		
M	Assessment in Nutrition and Clinical Practice: An Overview of		
Z.	Current Methodology. <i>Nutrients</i> . 2021; 13(8):2493.		
20	https://doi.org/10.3390/nu13082493		
Prerequisites	Bachelor of Nutrition and Dietetics (Honors) (4-year program)		
$\sim$			

Therequise	Daeneror of Authon and Dieteries (Honors) (4 year pre	
N.		S.
Course P	lan	
Theory		2
Unit	Торіс	Hours
1.	Nutritional Assessment in Clinical Practice – Introduction, relevance	3 the
2. 9	Body composition and cellular basis of growth, Significance, and methods used for measurement of body composition in nutrition. Common Biomarkers of Nutritional Status and Inflammation	12
3.	,Malnutrition Universal Screening Tool, Nutritional Risk Screening 2002, Mini Nutritional Assessment®, Short Nutritional Assessment Questionnaire©, Malnutrition Screening Tool, and the Subjective Global Assessment.	4

4.	Information Sources: Screening or referral form, Interview	3
	of patient or key social support, Medical or health records,	
	Community- or organization-based surveys and focus	
	groups, Health surveillance data, reports, research studies	
5.	Comparison of Food and Nutrient Intake Assessment	4
	Methods	
6.	Websites and Apps for Tracking Nutritional Intake and	4
	Physical Activity Data	

Practical		
2		· P
Unit	Торіс	Hours
76		TH
1.	Using nutrition assessment tools to measure nutritional	15
0	status in patients in hospital: MUST, MNA. S <mark>GA, W</mark> HO	5
IT	Steps for assessment of NCDs	9
2.	Assessment of Nutritional risk factor of elderly Using Mini	5
	Nutritional Assessment	
	Cumulative Illness Rating Scale for Geriatrics	
3.	Designing a nutritional assessment system for a group of patients in a hospital setting	20
2	• The assessment system used A P P	È
	• Type and number of measure-ments selected	
	• Indices and indicators derived from these measure-ments	
	• Interpretation and application of the indicators	



#### MND 202 Advances in enteral and parenteral nutrition

CL	СР	L	Р
2	2	30	60

#### Instructor in charge

M.Sc. and / Ph.D. in Foods and Nutrition or equivalent
Course Description
The course shall enable the student to learn about the role of enteral and parenteral nutrition in various disease and their complications.

#### Objectives

nutrition in variou	as disease and their complications.
6	PP PP
Objectives	
This course will e	enable the students to understand:
References	1. Ayers P, Bobo ES, Hurt RT, Mays AA, Worthington PH,
AT	eds.(2020) ASPEN Parenteral Nutrition Handbook, Third
Z	Edition. Silver Spring, MD: American Society for Parenteral
	and Enteral Nutrition; .ISBN 1889622419
K	2. Mahan, L.K. and Escott-Stump, S. (2021): Krause's Food
	Nutrition and Nutrition Care Process, 16th Edition, Elsevier
र हरे	C Pvt. Ltd.ISBN 032381025X
R.	3. <u>Subhal Bhalchandra Dixit</u> (Author), <u>Atul Prabhakar Kulkarni</u>
- C.	Kapil Gangadhar Zirpe (Editor) Textbook of Critical Care
	Nutrition (ISPEN) (2023) Jaypee Brothers Medical
	publishers (Pvt) Ltd .ISBN 9356963150
	4. Nambiar VS and Zaveri D (2024). Nutrition Guidance After
	Mini Gastric Bypass Bariatric Surgery. Adhyayan Publishers
	and Distributors. ISBN-10 : 8119681169.
	5. Nambiar VS and Zaveri D (2024).Nutrition Guidelines for
	Roux-en-Y Gastric Bypass Bariatric Surgery. Adhyayan
	Publishers and Distributors. ISBN-10 : 8119681215.

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<u>nutrients-06-05142.pdf</u> Nutrients 2014, 6, 5142-5152;
doi:10.3390/nu6115142
Bachelor of Nutrition and Dietetics (Honors) (4-year
program) and knowledge of medical nutrition therapy and advanced nutrition

Course Pla	n NFOR	HEALT	
Theory	S	· · · · · · · · · · · · · · · · · · ·	
I luit	Tonio		Houng
	Topic		nours
1.	Import <mark>ant Issues</mark> in	Enteral Nutrition	5
A	Effect on Gut muco	sa and gut-associated lymphoid tissue	TT.
N	(GAL <mark>T), Gut m</mark> icro	biota, Infections and Complic <mark>ations</mark>	
110	Refeeding Syndrom	e, Drug- Enteral Nutrition Interaction	
A	Role of Enteral Nut	rition in the following: - Diabetes,	6
Z	Cancer		C
	Gastrointestinal dise	eases – IBD, Dementia, Paediatric	
A	critical care, Pretern	n infants	F
2.	Enteral immunomo	odulatory diet for acute lung injury and	2
+2	acute respiratory di	stress syndrome, omega-3 fatty acid, γ-	
, in the second s	linolenic acid, and a	antioxidant supplementation	<u>k</u>
3.	Home-based entera	l nutrition – Blenderized tube feeding,	2
UNIT II	Issues in Parenter	ral Nutrition: Compounding, Vascular	5
4.	access device-r	related complications, Metabolic	
	Complications, He	pato biliary Complications, Metabolic	
	Bone Disease	. 41/04	
5.	Role of Parenteral	Nutrition in the following: Critical care,	4
	Neonates and prema	ature infants, Bariatric surgery, Cancer	
6.	Examining safety a	nd ethical issues in parenteral nutrition	2
7.	Nutrition support in	a long-term and home care	2

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Practica	1	
Unit	Торіс	Hours
1.	Planning tube-feeding diets for the following	36
	Diabetes	
	Cancer ALLIED AND HIS	
	Gastrointestinal diseases – IBD,	
	Dementia	
	Paediatric critical care	
3	Preterm infants	12
6		'PD
2. 9	Parenteral nutrition support for the following-	24
$\mathbf{i}$	Critical care	T
Ž	Neonates and premature infants	ů,
0	Bariatric surgery	<u>(</u> )
F -	Cancer	
Z		

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#### MND 203 Advances in Public Health Nutrition

CL	СР	L	Р
2	2	30	60

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Semester	Ш
Course Name	MND 203 Advances in Public Health Nutrition
Course Description	The course aims to focus on the advances in Public Health Nutrition at National level and Global level
Objectives	1. To understand and define the advanced concepts in Public Health Nutrition (PHN)
AN NA	2. To understand the global importance of nutrition across the life cycle and its role in achieving Sustainable Development Goals (SDGs).
T CA	3. To assess the impact of public policies on community nutrition and global health targets.
A Rece	4. To explore nutritional surveillance systems, for monitoring and evaluating public health nutrition programs.
	5. To analyze epidemiological data to understand the relationship between diet and community health.
	6. To emphasize the need for Health Promotion in diverse population.

Reference	1. Lal, S. (2018). Textbook Of Community Medicine Preventive
Book	And Social Medicine With Recent Update. CBS Publishers &
	Distributors Private I imited
	Distributors i fivate Limited.
	2. Public Health Nutrition in Developing Countries. (2011) Edited
	by Sheila Vir. Woodhead Publishing India PVT. LTD.
	ALLIED AND
Webliography	1. UNICEF. <u>https://www.unicef.org/</u>
	2. WHO. <u>http://www.who.int/</u>
	3. World Food Programme. <u>http://www.wfp.org/content/about-</u>
. 5	wip-
	4. WHO. United Nations Decade of Action on Nutrition.
2	5 Mother Infant and Young Child Nutrition and Malnutrition
0	http://motherchildnutrition.org/india/overview-india.html
0	6. Double burden of malnutrition.
7	http://www.who.int/nutrition/double-burden-malnutrition/en/
	7. United Nations Development Programme. Sustainable
0	Development Goals.
	http://www.undp.org/content/undp/en/home/sustainable-
$\checkmark$	development-goals.html
Z	8. Global targets 2025 <u>http://www.who.int/nutrition/global-target-</u>
	$\frac{2025}{1}$
	9. Improving breastreeding, complementary foods and feeding
4	10 National Guidelines on Infant and Young Child Feeding
	www.wcd.nic.in
रिश्र स	11. WHO Health Statistics and Information Systems. Global Health
E I	Estimates.
Ŕ	http://www.who.int/healthinfo/global_burden_disease/en/
	12. WHO Non-communicable diseases and risk factors.
	http://www.who.int/ncds/en/
	13. Overview of Non-Communicable Diseases and Related Risk
	Factors.
	https://www.cdc.gov/giobaineaitn/neaitnprotection/ietp/

UnitTopicHoursIThe Lancet Global Health Overview6Global Nutrition Report and its relation with positive health, universal health coverage, malnutrition (under-nutrition, overweight, obesity, micronutrient malnutrition), Hidden Hunger, nutritional status, nutrition intervention, food and nutrient supplements, food substitute, nutrition education Food and nutrition security -overview, challenges and solutions (local, national, state) Poverty, hunger, HDI -components and indicators, comparison of global HDI with national and state HDI, calculations for GHI and HDI82Food Systems Approach to Sustainable Healthy Diets Knowledge, Leadership, Capacity, Coordination & Governance Steps taken by GoI such as Green Revolution, White Revolution, GMOs and bio-fortified crops Food Corporation of India - Buffer stock Public Distribution System – Strength and Weaknesses Role of World Food Programme in ensuring Food and Nutrition Security8
IThe Lancet Global Health Overview Global Nutrition Report and its relation with positive health, universal health coverage, malnutrition (under-nutrition, overweight, obesity, micronutrient malnutrition), Hidden Hunger, nutritional status, nutrition intervention, food and nutrient supplements, food substitute, nutrition education Food and nutrition security –overview, challenges and solutions (local, national, state) Poverty, hunger, HDI -components and indicators, comparison of global HDI with national and state HDI, calculations for GHI and HDI82Food Systems Approach to Sustainable Healthy Diets Knowledge, Leadership, Capacity, Coordination & Governance Steps taken by GoI such as Green Revolution, White Revolution, GMOs and bio-fortified crops Food Corporation of India - Buffer stock Public Distribution System – Strength and Weaknesses Role of World Food Programme in ensuring Food and Nutrition Security8
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3	Concept of nutrition in all child survival programs and national	8
	health and development programs	
	Maternal health in the perinatal period and beyond	
	A global analysis of the determinants of maternal health and	
	transitions in maternal mortality	
	Vulnerabilities and reparative strategies during pregnancy, childbirth, and the postpartum period: moving from rhetoric to action	
	Best Practices – Recent National and International Examples and	
	Case Studies from NHM and Poshan 2.0	
	Need for revision in nutrition programs and policies: Critique on	
	gaps & need for regular upgrading	0
G	gups te need for regular appracing	P
4	Mainstreaming and Nutrition at National and International Level	8
X	Concepts of nutrition advocacy	¹
0	Concepts and practices in nutrition advocacy- steps for success;	S
E	some examples from successful nutrition advocacy programs	0
A	Eat right India Movement	$\leq$
	Other New Initiatives for Nutrition Advocacy	
	Role of FAO, WHO, NGO's & United Nations in Global /National	
4	advocacy & program implementation support to Government	F
X I	Operationalizing national/state policies and targets – steps for	P
+	advocacy and mainstreaming of nutrition at field levels in various	3
	programs NCAHP	
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	PRACTICAL	60	
. 1	To compare nutritional surveillance data sets: nutritional profile, determinants of nutritional status and gender differences, health data of MCH and other populations (at regional national and global level) and calculate trend lines of past 5 years and write a critique for way forward		
3 NATIONAL Con	<ul> <li>Nutrition and Health Program Planning at Sub-National Level</li> <li>Understanding the sub-national level: local, district or regional level situation through the use of available data sets; understanding the local nutrition health delivery systems for Essential Nutrition Actions (ENA), decentralization &amp; governance</li> <li>Survey to understand the health systems of India – at primordial, primary, secondary and tertiary care- issues, concerns and best practices and way forward.</li> <li>Engage in understanding field level Bottom-up, inter-sectoral, multi-stakeholder collaboration at the sub-national level for any program or policy (Management, Leadership &amp; Partnership for District Health) issues, concerns and best practices and way forward.</li> </ul>	25 F PROFESSIONS	
3	<ul> <li>To conduct a coverage evaluation survey</li> <li>Using quantitative &amp; qualitative methods) for delivery of key nutrition health interventions in a community,</li> <li>collect data</li> <li>analyse,</li> <li>interpret,</li> <li>report &amp;</li> <li>suggest recommendations for improving coverage &amp; delivery of services</li> </ul>	25	

#### MND 204 NUTRITION AND IMMUNITY

CL	СР	L	Р
2	0	30	0

Semester	FOR ALLIEU AND HEAL			
Course Name	MND 204 NUTRITION AND IMMUNITY			
Course	Introduction to basics of immunology, the role of various nutrients in			
Description	modulating immune responses, and the impact on immune health.			
Objectives	To gain knowledge on the immunological aspects			
AL	To gain importance of nutrition immunity interactions.			
Text Books	Nutrition, Immunity, and Infection by Philip C. Calder, Anil D.			
Ĩ	Kulkarni, Anil Digambar Kulkarni, CRC Press, Taylor & Francis			
M	Group, 2018			
Nutrition and Immune Function by P. C. Calder, C. J. Field,				
	Gill			
Reference	Devereux,G., 9780851995830.0001, CABI,			
Books	doi:10.1079/9780851995830.0001, (1-20), CABI Publishing, The			
	immune system: an overview., (2002)			
Proroquisitos	Bachalor of Nutrition and Dietatics (Honors) (A year program)			
Trerequisites	Bachelor of Nutrition and Dieterics (Honors) (4-year program)			
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Course	Plan	
Unit	Торіс	Hours
Unit 1.	Topic         Role of Nutrition in Immunity         Concept of immunity, Role of nutrition in infection, Effect of nutritional status on immunity.         Immunity - Types of immunity, cells of the immune system, structure of immunoglobulins- – IgG, IgM, IgA, IgD, IgE, Immune response - humoral immunity, cell mediated immunity, immune changes in malnutrition, Immunologic effect and mechanism of different micronutrients, Clinical relevance of micronutrients., autoimmunity and hypersensitivity.         Interactions of Nutrition, Immunity and Infection         Defense mechanisms in the host cell and nutrients essential in the development of the immune system, Effect of infections on the nutritional status of an individual, Nutrient deficiencies and excesses affecting the immuno-competence and to infections.	Hours 8
3.	<ul> <li>development of the immune system, Effect of infections on the nutritional status of an individual, Nutrient deficiencies and excesses affecting the immuno-competence and to infections.</li> <li>Nutrients with immuno-modulati properties - Arginine, Glutamine, Omega 3 fatty acids, sulphur containing amino acids, nucleotides, ornithine, alpha ketoglutarate and taurine; Supplementation, beneficiary effects-Prebiotics, Probiotics and symbiotics</li> <li>Nutritional Immunology in Disease Prevention and Gene Expression</li> <li>Role of nutrition in managing diseases, Auto Immune disorders, Designing foods for immune related disorders</li> <li>Fundamentals of gene structure- Principles of gene expressions, Transcription mechanism and regulation, Translation mechanism and regulation, Effects of nutrients on gene expression, Thrifty genotype – phenotype hypothesis</li> </ul>	SIONS - HALAS

4.	Programmes on Immunization	6
	National and International, New Initiatives in Vaccines, Milestones	
	in the Immunization program, Immunization and Child Health.	
	Review of Research papers on Nutrition and Immunity	
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#### MND 205 Innovation in Food Product & Development

CL	СР	L	Р
1	3	15	45

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Semester	II TEALTH		
Course Name	MND 205 Innovation in Food Product &		
10 Mm	Development		
Course Description	It is a first basic course giving an insight into		
X	various aspects of Innovation, Food		
10	Ingredients and Food Formulation.		
Objectives	1. To make a student understand concepts of		
Z	Product Development – converting an Idea		
	into a product and a plan to commercialize it		
A	2. To make a student understand concepts of		
	Product Development, Quality control and		
न्द्रे स्वास्थ्यम्	Marketing the new product		
Reference Books	1. Altschul A., M. (1993). Low calorie foods.		
Sin	Marcel Dekker.		
	2. Goldberg, I. (1994). Functional foods:		
म अरि स्व	Designer foods, Pharma Foods, Neutraceuticals. Springer.		
	3. Matz, S.A. (2004). Formulating and		
	processing of dietetic foods. CHIPS Publ.		
	4. Kalia, M. and Sood, S. (2010). Food		
	preservation and processing. Revised edition,		
	Kalyani Publishers, New Delhi.		

280

		5. Srilakshn	ni, B. (2010). Food	science (Fifth
		ed.) New Age International Pvt. Limited,		
		Pub., New Delhi.		
		6. Gordon,	W.F. (2011). New	food product
		developmen	it: From concept to	market place
		(third editio	n). CPR, Press	
Prerequisites	COR ALL	Bachelor of	Nutrition and Diet	etics (Honors)
10,		(4-year prog	gram)	
Course Plan				YP_
Unit	Topic		Hours	. PP
1.	A) Basic princip	ples of food	5	0
47	product de	evelopment:		T
Z	Sensory proper	ties of food		`ب ب
0	and their role	in product		0,
	development.	Evaluation		
N	of food: Obj	ective and		S
	subjective	methods,		
	selection and	training of		
9	judges, Devel	opment of		F
So To	score cards and	analysis of		
177 6-C	data.	स्रवार	साधनम	
	B) Concept of	New Food		
	Product Deve	lopment –		
	General classe	s of New		2
	Food Products,	Reasons for	Tel-Zeer	
	new food prod	luct, Stages	<u>que</u>	
	of new	product		
	development	and New		
	Food product lif	fe cycle		
	-		-	
2.	A) Consumer Surveys, Idea	5		
---------	-----------------------------------------------	-----------		
	Generation, Sources,			
	Screening, Translation of			
	idea to product prototype,			
	Product testing, Consumer			
	research evaluation:			
	development of schedule and data analysis.	DHEA		
	B) Market testing, Pre	ILALT,		
SIU	Commercialization, and	HO		
15	Product launch	70		
R.				
3. 8	A) Packaging materials and	5		
3	labeling Food safety and	6		
7	quality control issues in	T		
Z	product development, food	S,		
0	quality regulations and	S S		
	standards, quality control	9		
ZV	and HACCP			
	B) Product formulation and			
	development for general			
R	and therapeutic use,	F		
	functional foods and			
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A A	NCAHF			
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	छिरानम प्रहि	देखान्स्ट		

#### Innovation in Food Product & Development (Practical-45; 90hr)

1. Sensory evaluation: Selection and Training of judges- Determination of Sensitivity Thresholds

2. Methods: Difference Test- Paired comparison- Duo-trio, Triangle test – preparation of score card and conduction of test

3. Numerical scoring, Composite scoring and Dilution tests- preparation of score card and conduction of test

4. Hedonic rating and Flavor Profile test - preparation of score card and conduction of test

5. Methods of Quantitative Descriptive Analysis - preparation of score card and conduction of test

6-10. Objective evaluation of Food – Physical, chemical and microbiological parameter analysis

10-15. Selection of Product categories, Idea generation and selection of Ingredients, Preparation of flow chart and ingredient preparation.

16-17. Innovative Product formulation and standardization – High Protein products

18-19. Innovative Product formulation and standardization – Low calorie Products

20-22. Innovative Product formulation and standardization – Bakery products with high fibre and low glycemic index

23-26. Innovative Product formulation and standardization – Food products with hypocholesterolemic property

27-30. Innovative Product formulation and standardization – Food products with antioxidant property

31-34. Innovative Product formulation and standardization – Food Product with HDL for Heart health

35-37. Innovative Product formulation and standardization – Food products with immunity boosting ingredients

38-40. Innovative Product formulation and standardization – Food products with low sodium

41-43. Innovative Product formulation and standardization – Food products with nutraceuticals- Food products for diabetics and obese

44-45. Packaging and sale of products, presentation of developed food products, Video shooting of product preparation

# MDN 206 Scientific Writing Skills

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Semester	IN FUR
Course	MDN 206 Scientific Writing Skills
Name	The second se
Course	This course aims to develop students' ability to write scientific papers,
Description	reports, and other professional documents. The focus will be on the
AL	principles of clear and concise scientific writing, understanding the
N	structure of scientific papers, and developing skills for effective
) TT	communication in the field of food and nutrition.
Objectives	1 To understand the structure and elements of scientific papers.
	2 To develop skills for writing clear and concise scientific texts.
A A	3 To learn effective methods for presenting data and research findings.
F.3	4 To understand ethical considerations in scientific writing.
E E	5 To practice writing different types of scientific documents
Reference	1. Hofmann, A. H. (2019) Scientific writing and communication:
Books	Papers, proposals, and presentations (4th ed.). Oxford University
	Press. Fortest Gen
	2. Silyn-Roberts, H. (2012) Writing for science and engineering:
	Papers, presentations and reports(2nd ed.) Butterworth-Heinemann.
	3. Alley, M. (2018). The craft of scientific writing* (4th ed.). Springer.
	4. Peat, J., Elliott, E., Baur, L., & Keena, V. (2013). Scientific writing:
	Easy when you know how (2nd ed.). BMJ Books.

	5. Day, R. A., & Gastel, B. (2016)How to write and publish a scientific
	paper (8th ed.). Cambridge University Press.
	6. Gopen, G. D., & Swan, J. A. (1990)The science of scientific writing.
	American Scientist, 78(6), 550-558.
	7. Katz, M. J. (2009). From research to manuscript: A guide to scientific
	writing (2nd ed.). Springer.
	8. <u>https://nutrition.org/writing-publishing-nutrition-research/</u>
	9. https://www.researcheracademy.elsevier.com/
C	10. https://www.nih.gov/grants-funding/introduction-grant-writing
5	11. <u>https://www.nature.com/scitable/ebooks/scientific-writing-and-</u>
R.	publishing-14053993/
S.	12. <u>https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_for</u>
5	matting and style guide/general_format.html
47	13. <u>https://guides.lib.berkeley.edu/evaluating-resources</u>
$\geq$	14. <u>https://writingcenter.unc.edu/tips-and-tools/scientific-writing/</u>
Prorequisites	1. Basic understanding of food and nutrition science
	2. Proficiency in written and spoken English
Z	3 Basic research skills including familiarity with conducting literature
	reviews using academic databases and understanding primary vs
A	secondary sources
	4 Basic computer skills including proficiency in word processing
+2	software (e.g. Microsoft Word Google Docs) and familiarity with
E.	referencing software (e.g., EndNote, Mendeley, Zotero), are essential for
R R R R R R R R R R R R R R R R R R R	preparing assignments and papers.
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Course Plan		
Unit	Торіс	Credit Hours
1.	Scientific Writing : Importance of Scientific Writing in Food and Nutrition; Role of scientific writing in research, industry, and public health communication, different types of scientific documents (research papers, review articles, reports, etc.); The Writing Process - Planning and organizing scientific papers Understanding the target audience and the purpose of scientific communication	6
2. OS JENOITEN	Structure and components of scientific papers :Overview of research paper structure - key components: title, abstract, introduction, methods, results, discussion, and references; writing the introduction and literature review - crafting a compelling introduction; conducting a literature review: finding, summarizing, and synthesizing relevant research.	ROFESSIONS
3.	Methods, results, discussion and conclusion: Describing research methods - writing clear and detailed methodology sections importance of reproducibility and transparency; presenting results - effective use of tables, figures, and graphs; describing statistical analyses and interpreting data; crafting the discussion section - interpreting and discussing research findings; Discussing the significance, limitations, and future directions of the study; writing the conclusion and abstract - summarizing the main findings and contributions of the study crafting an abstract that succinctly summarizes the study's purpose, methods, results, and conclusions.	6

4.	Ethics and integrity in scientific writing: Ethical	6
	considerations - understanding plagiarism, authorship, and	
	conflicts of interest; ethical data handling and reporting;	
	peer review and publication process - the role of peer review	
	in scientific publishing - how to respond to reviewer	
	comments and revise manuscripts	
	ALLEU AND	
5.	Specialized writing and communication : Writing research	6
	proposals and grant applications - key elements of research	
	proposals and grants; strategies for successful grant writing;	
A.	writing for lay audiences and media - adapting scientific	
Z'	information for non-expert audiences communicating	
S	science through media and public platforms.	R
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#### **Third Semester**

### MND 301 INTELLECTUAL PROPERTY RIGHTS

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2	0	30	0
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**INSTRUCTOR IN CHARGE:** Lawyer or Faculty with experience in medical law or practice

**COURSE DESCRIPTION:** The course is designed to introduce fundamental aspects of Intellectual Property Rights to learners who are going to play a major role in development and management of innovative process. The course is designed for increasing among a multidisciplinary audience.

# **OBJECTIVES:**

At the end of the semester, the student should be able to:

- 1. Analyse various aspects of copyrights and geographical indications
- 2. Analyse various aspects of patents and Infer aspects of industrial designs
- 3. Examine various aspects of trademark, and apply the knowledge about the enforcement of intellectual property rights

म सर्वार्थसाधन

#### **Text Books and References**

- 1. T. M. Murray, M. J. Mehlman. Encyclopedia of Ethical, Legal and Policy Issues in Biotechnology, Vol 2, John Wiley & Sons, 2010.
- P. N. Cheremisinoff, R. P. Ouellette, R. M. Bartholomew, Biotechnology Applications and Research, Technomic Publishing Co., Inc. 1985.
- 3. D. Balasubramaniam, C. F. A. Bryce, K. Dharmalingam, J. Green, K. Jayaraman, Concepts in Biotechnology, 3/e University Press. 2004.
- 4. B. David, T. R. Jewell, R. G. Buiser, Biotechnology: Demystifying the Concepts1/e., Wesley Longman, USA, 2000.
- Parulekar, S. D'Souza, Indian Patents Law Legal & Business Implications, Macmillan India ltd. 2006.

- 6. L. Wadehra. Law Relating to Patents, Trademarks, Copyright, Designs & Geographical Indications, Universal law Publishing Pvt. Ltd., 2000.
- P. Narayanan, Law of Copyright and Industrial Designs, 4/e., Eastern law House, Delhi. 2010.

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COURSE	PLAN	
UNIT	TOPIC	HOURS
1	Copyright: Definition, meaning of copyright, duration of	10
	copyright copyright protection, Related Rights : meaning,	Pp)
2	distinction between related rights and copyright, Rights	
0	covered by copyright	PP
0	Geographical Indications: geographical indication,	0
AL	geographical indication protection and its reasons.	Ē
2	Patents: Patents and kinds of inventions protected by a patent,	10
	patent document, and how to protect your inventions.	
Ā	Granting of patent, Rights of a patent, How extensive is	Z
Z	patent protection? Drafting and Filing of a patent.	C)
	Industrial Designs: Industrial design, industrial designs	
A	protection W protection provided by industrial design,	F
T	duration of protection last, why to protect industrial designs	To
3	Trademarks: meaning, rights of trademark, of signs can be	10
, j	used as trademarks, trademark protection, trademark	
	registration, length of trademark protection, Trade secrets,	E
	and know-how agreements. Enforcement Of Intellectual	
	Property Rights: Infringement of intellectual property rights,	
	Enforcement Measures	

PREREQUISITES: Medical law and Ethics.

# **MND 302 Precision Nutrition**

CL	СР	L	Р
4	0	60	0

Semester	
Course	MND 302 Precision Nutrition
Name	CION
Course	It is a course whi <mark>ch covers the advance</mark> d concepts of application of principles
Description	of precision nutrition in health and disease.
Objectives	1. Integrate the concept of DNA, microbiome & metabolic responses to
JAU	specific foods or dietary patterns, to determine personalized eating plan for wellness and illness.
0	2. Describe the principles of precision nutrition & medicine, focusing on the
	interaction between nutrients and human/microbial genes.
NZ	3. Identify genetic backgrounds contributing to individual differences in
	macro- and micronutrient metabolism
A	4. Comprehend the biochemical, physiological and molecular aspects of
	energy metabolism and inflammatory pathways that play a crucial role in
A.	the pathogenesis of metabolic diseases, including roles of diet and dietary components
	5. Apply the concept of nutrigenetics for designing clinical nutrition therapies
	and diet plans for disease management.
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Reference	1. Arshad, Z., Bains, V.K., Jhingran, R., Madan, R., & Srivastava, R. (2017).
Books	Nutrigenomics: An Overview. Asian Journal of Oral Health & Allied
	Sciences, 7(2), 52.
	2. Ayesha Nasir, Mir. M. Hassan Bullo, Zaheer Ahmed, Aysha Imtiaz, Eesha
	Yaqoob, Mahpara Safdar, Hajra Ahmed, Asma Afreen &Sanabil Yaqoob.
	(2020). Nutrigenomics: Epigenetics and cancer prevention: A
	comprehensive review. Critical Reviews in Food Science and Nutrition,
	60(8), 1375-1387. doi:10.1080/10408398.2019.1571480
	3. Berná G, Oliveras-López MJ, Jurado-Ruíz E, Tejedo J, Bedoya F, Soria B,
	Martín F. (2014).Nutrigenetics and nutrigenomics insights into diabetes
	etiopa <mark>thogenesis. Nutrients, 6(11), 5338-5369.</mark> doi:10.3390/nu6115338
6	4. Fenech M, El-Sohemy A, Cahill L, Ferguson LR, French TA, Tai ES,
S	Milner J, Koh WP, Xie L, Zucker M, Buckley M, Cosgrove L, Lockett T,
4	Fung KY, Head R. (2011). Nutrigenetics and nutrigenomics: viewpoints
Ž	on the current status and applications in nutrition research and practice. J
0	Nutrigenet Nutrigenomics, 4(2), 69-89. doi:10.1159/000327772
ATA	5. Ganesh S.B. & Sugumar, K. (2020). Nutrigenomics: A new direction in
Z	periodontics.
	International Journal of Applied Dental Sciences, 6(1), 146-149.
K	6. Harvard T.H. Chan School of Public Health. (2022). Precision Nutrition.
	The Nutrition Source.Retrieved from
+2	https://www.hsph.harvard.edu/nutritionsource/precision-nutrition/
E	7. Helland MH, Nordbotten GL. (2021). Dietary Changes, Motivators, and
Į į	Barriers Affecting Diet and Physical Activity among Overweight and
	Obese: A Mixed Methods Approach. Int J Environ Res Public Health,
	18(20), 10582. doi:10.3390/ijerph182010582
	8. Himanshu D, Ali W, Wamique M. (2020). Type 2 diabetes mellitus:
	pathogenesis and genetic diagnosis. J Diabetes MetabDisord, 19(2), 1959-
	1966. doi:10.1007/s40200-020-00641-x
	9. Manoharan, S., & Kareem, N. (2020). Nutrigenomics In Periodontics - A
	Review. International Journal of Pharmaceutical Research, 12(1), 1983-
	1986.

10. M	Ieiliana, A., & Wijaya, A. (2020). Nutrigenetics, Nutrigenomics, and
Pr	recision Nutrition. Indones Biomed J, 12(3), 189-200.
11. Su	ushrut Jangi, Katie Hsia, Naisi Zhao, Carol A Kumamoto, Sonia
Fr	riedman, Siddharth Singh, Dominique S Michaud.Dynamics of the Gut
М	lycobiome in Patients With Ulcerative Colitis Clin Gastroenterol
Н	lepatol, 2023 Oct 5:S1542-3565(23)00762-0. doi:
10	0.1016/j.cgh.2023.09.023 AND
12. G	uojun Wu, Naisi Zhao, Liping Zhao.Microbial-host isozyme: A novel
ta	rget in "drug the bug" strategies for diabetes. Cell Metab, 2023 Oct
3;	;35(10):1677 <mark>-1679. do</mark> i: 10.1016/j.cmet.2023.09.008.
13. H	aslb <mark>erger, Alexander G. (ed.) : Advances in precision nutrition,</mark>
pe	ersonalization, and healthy aging [] Cham. Springer, 2022. 978-3-031-
	0152-6
Prerequisites BSc N	Nutrition and Dietetics - 4 years Program
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# **Course Plan**

UNIT ONE	Hours
Introduction to Precision Nutrition and Nutritional Genomics :	
The Human Genome, Introduction, Study, SNP, Definition of various terms-	30
Precision Nutrition, Personalized Nutrition, Nutrigenomics, Nutrigenetics, Exposome,	
Epigenetics, Gene variations, mutations, Epigenetics vs Epigenomics, Genotype &	
Phenotype, Differences between SNPs, Mutations and CNVs, The Genome of Rare and	
Complex Diseases, Genotype and Phenotype	
Precision Medicine : Influence of Genetics and Environmental Factors in Complex Diseases,	
Gene- Nutrient Interaction, Need for Precision: The problem of Missing Heritability	
Concept of Interaction	
Precision Nutrition vs. Community Nutrition, Current Basis of Nutritional Research	
Experimental Designs in Precision Nutrition, Omics Technologies and their Biomarkers,	
Epigenomics, Proteomics, Metabolomics, Metagenomics, Functional Genomics,	
Nutrigenetics, SNPs Associated with Nutrition-Related Diseases (Diet-Dependent), Vascular	5
health, Cardiovascular diseases, Oxidative stress (eNOS SOD)	5
ApoE Metabolic Health, Obesity (Snacking), Diabetes Type 2, Methylation	
Detoxification : Liver health	,
Circadian Rhythm and gene : Chronobiology, Appetite and Satiety, Central Clock	
Peripheral Clocks, Circadian Rhythm Hormones, Intake Control (Leptin and Ghrelin)	
Exercise Genotype: Adrenergic genotype, Food Specific Genotype : Caffeine, Lactose	
Gluten	
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# **UNIT TWO** SNPs Predisposing to Complex Nutrition-Related Diseases - Genetic Risk Scores (GRS). 30 Diet-gene interaction: polygenic risk score: Type II Diabetes, Hypertension Arteriosclerosis, Hyperlipidemia, Cancer SNP vs. Allergies vs. Intolerances Role of Bioactive Components of Diet on Gene Expression The Effect of Micro and Macro Nutrients on Gene Expression Human Microbiota Composition Enterotypes and Diet, Microbiota and Metabolic Syndrome, Microbiota and Cardiovascular Diseases Effect of the Oral and Intestinal Microbiota, Gut-brain Axis, Microbiota and Neurodegenerative Diseases Microbiota and Neuropsychiatric Diseases, Schizophrenia, Anxiety, Depression, Autism, Microbiota and Obesity Gut microbiome and disease diagnosis and prognosis **Diet-Modulated MicroRNAs** Nutrition Systems Biology: Integrated approach toward personalized nutrition Role of AI in Nutrition System and Precision Health 5 a cc 31/2 ince-20 देखान्रखी

#### MND 304 Advanced Communication Skills for Nutrition Practice

CL	СР	L	Р
1	3	15	45

Instructor in charge M.Sc. and / Ph.D. in Foods and Nutrition or equivalent

Course	The course shall enable the student to have good communication
Description	skills
Objectives	1. Learn about the various types of communication
0	2. Learn effective communication skills
References	1. Philipose Pamela. Media's Shifting Terrain: Five Years that
AL	Transformed the Way India Communicates,(2019) Orient
$\geq$	Blackswan, New Delhi.ISBN 9352875346
0	2. Narula Uma, Mass Communication-Theory and Practice
AT	(2019) Har-Anand Publications, New Delhi ISBN 9388409361
Z	3. Narula Uma. Communication Models (2023); Atlantic
	Publishers and Distributors (P) Ltd ISBN 8126906766
R	E.
Prerequisites	First and Second Semester of M. Sc. Nutrition and Dietetics
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Unit	Торіс	Hours
1.	Relevance of communication skills for nutrition practice Five Cs of communication	2
2.	Types of Communication	8
SMM SIC	Written communication, Creative writing, content creation Oral communication. Non-verbal and visual communication, Design and visual communication Contextual communication. Active Listening	E PI
2.	Effective Communication Skills	50
47	active listening	FE
N	observation skills	S
01	Body language	50
AT	Focus and attention	NG
N N	Empathy	S

Practical		
Unit	Торіс	Hours
1.	Role play and simulation for effective patient counseling.	3
2.	Critical analysis of nutrition and health related messages on print, visual and social media	2
3.	Create an interactive digital media project such as an interactive quiz or mini-game.	3
4.	Designing a logo, business card and pamphlets for clients	2
5.0 7KM	Content creation for topical days like obesity day, osteoporosis day etc.	40FES
6.	Content calendar planner for activities	4 0
Y.	Audio creation for public service announcement, podcasts	4
8.	Content creation for digital media, print media and social media platforms for disseminating content. Analysis of algorithms of views, likes and followers.	8 1 A A
9.	Create short videos with specific nutrition education message in a story format.	8
10.	Communication skills for Marketing	8
11.	Use of Instagram account for engagement, LinkedIn for business	

Name of the program	Masters in Nutrition and Dietetics
Course Title	Internship
Academic year	Second Year
Semester	03
Number of Practical Credits	10 = 20 hours x $15 = 300$ hours
Duration	3 months
Course Prerequisite	Students should develop critical skills
Y N	meal plans, interaction with other health
	professionals and evaluating
Z	information received.
Course Synopsis	This module provides students with an
NC	opportunity to integrate and apply acquired knowledge and technical skills
Sinc	in actual clinical settings.
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# MND 305 Internship - MSc Nutrition and Dietetics

#### **Course Outcomes**

- Select the right practice from the acquired skills as a clinical nutritionist and Dietitian Demonstrate an attitude of professionalism when working with colleagues and other health professional staff of the hospitalUtilize skills in record keeping, organizing material, presentation of case studies and effective communication.
- Analyse and develop the ability to work independently and as a team member to perform critical thinking and problem-solving skills in different domains.
- Design, evaluate and implement new methods or protocols in different cases.
- Evaluate the relationship between nutrition data and pathologic processes, and how nutrition data relates to health and disease
- Develop the ability to work independently and as a team member to perform critical thinking and problem-solving skills in different domains.

Content	Competencies
Food Service Area	Define the role of dietitian in hospitals Outline the functioning of the Dietetics Services in a hospital and learn about its working schedules and plans. List and summarize the knowledge about the maintenance of the patient's case file and how the details are entered/registered in it. Interpret the therapeutic and normal diet settings in the kitchen Interpret acquiring skills in food procurement quality maintenance and patient food service. Acquire skills in Menu system, Personnel Management, Food supply, procurement and control, Food production,

Madiaina	Illustrate the assessment of nutritional status among patients.
Wieuleine	Interpret and apply dietary interventions to patients with
(2 cases)	disease conditions.
	Explain and develop the dietary counselling given to the
	patients.
	Illustrate and relate the condition in which enteral and
	parenteral nutrition is provided and its administration and
	formulation.
-10	A A A A A A A A A A A A A A A A A A A
S	Illustrate the assessment of nutritional status among patients.
Nephrology and	Interpret and apply dietary interventions to patients with
Urology	disease conditions
(1 case)	Explain and develop the dietary counselling given to the
	patients. Illustrate and relate the condition in which enteral and
X	parenteral nutrition is provided and its administration and
0	formulation.
Ę	
Z	Illustrate the assessment of nutritional status among patients.
Cardiology	Interpret and apply dietary interventions in disease condition
(1 case)	of the patients.
	Explain and develop the dietary counselling given to the
रे रदे	patients.म सर्वार्थसाधनम
E.	Illustrate and relate the condition in which Enteral and
I B	Parenteral nutrition is provided, its administration and
6	formulation ince-2021
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	Illustrate the assessment of nutritional status among
Gastroenterology	patients.Interpret and apply dietary interventions to patients
	with disease conditions
(1 case)	Explain and develop the dietary counselling given to the
	patients.
	Illustrate and relate the condition in which Enteral and
	Parenteral nutrition is provided, its administration and
	Tormulation.
	Why starts the assessment of mytritional status emong actions
Oncology	inustrate the assessment of nutritional status among patients.
a glu	Interpret and apply dietary interventions in the disease
(1 case)	condition of the patients.
	Explain and develop the dietary counselling given to the
0	patients.
3	Illustrate and relate the condition in which Enteral and
747	Parenteral nutrition is provided, its administration and
N	formulation.
0	<u>q</u>
	Illustrate the assessment of nutritional status among patients.
Obstetrics	Interpret and apply dietary interventions to patients with
Gynaecology	disease conditions.
(1 case)	Explain and develop the dietary counseling given to the
	patients.
So Je	Illustrate and relate the condition in which Enteral and
	Parenteral nutrition is provided, its administration, and
R	formulation. CAHP
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	Illustrate the assessment of nutritional status among patients.
Pediatrics	Interpret and apply dietary interventions in the disease
(2 cases)	condition of the patients. Explain and develop the dietary
	counseling given to the patients.
	Illustrate and relate the condition in which Enteral and
	Parenteral nutrition is provided, its administration, and
	formulation.

	Illustrate the assessment of nutritional status among patients.
Surgery	Interpret and apply dietary interventions to patients with
(1 Case)	disease conditions.
(I Case)	Explain and develop the dietary counselling given to the
	patients.
	Illustrate and relate the condition in which Enteral and
	Parenteral nutrition is provided, its administration, and
	formulation.
10,	
	Illustrate the assessment of nutritional status among patients.
Intensive care	Interpret and apply dietary interventions to patients with
unit	disease conditions.
(2 Cases)	Explain and develop the dietary counseling given to the
	patients.
X	Illustrate and relate the condition in which enteral and
0	parenteral nutrition is provided, as well as its administration
Ē	and formulation.
AN	
	Illustrate the assessment of nutritional status among patients.
Psychiatry/	Interpret and apply dietary interventions to patients with
Rehabilitation	disease conditions.
A IT	Explain and develop the dietary counseling given to the
(1 Case)	patients. Illustrate and relate the condition in which enteral and
A A A A A A A A A A A A A A A A A A A	parenteral nutrition is provided, as well as its administration
	and formulation.
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	Provide interns with practical experience in their field of study
Mini Project	or interest, allowing them to apply the knowledge and skills
	they have gained in a real-world setting
Standardization	Enforce a level of consistency or uniformity while giving

Learning Strategies: Small group discussion (SGD), Problem-Based Learning (PBL), Case Based Learning (CBL), Clinics, Seminars.

Formative Assessment: Quiz, Viva, Clinical assessment (OSCE, OSPE, WBPA), .sued .nt exams a. . of the departme. Clinical Log BookThe internship completion certificate will be issued from the Dean's office, only after · Successfully clearing all four assessment exams and Obtaining a satisfactory completion certificate from the head/ In-charge of the department at the end of the internship.

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"Curriculum of Nutrition and Dietetics (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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#### MND 401 Dissertation (3 months)

**Course Objectives** The Dissertation aims to develop skills in conducting a research study/ working in a project and learn the process of writing a dissertation/ project report

#### Course Learning Outcomes: Students will be able to

1. Know the practical aspects of, collecting data/ project work

2. Evaluate, select, and use appropriate strategies for the reduction, analysis, and presentation of data collected during the research process/ project work

3. Suitably illustrate data/ insights using various graphical and other methods.

# 4. Prepare a dissertation

The research will be an original work with plagiarism check and ethical clearance. document/ project report based on research process/ project work done. The student will be guided and supervised by a member of the teaching faculty of the Institute. However, the dissertation in which the research culminates should reflect the student's own work. The students will undertake an independent piece of research work on an issue of contemporary concern that contributes to the advancement of knowledge in the field of Dietetics of Clinical Nutrition.

#### Assessment:

Distribution of marks for Internal and External assessments will be based on the credit distribution of the theory and practical for the courses. For eg. If a course has 3 credits for Lectures and 0.5 credits for Practicals, 25 marks for theory and 5 marks for practicals will be considered for internal assessments out of the 30 marks. Similar ratios will be followed for External assessments. For Practical examinations, an internal and external examiner will assess the candidates.

#### **Research Project:**

An internal and external examiner will assess the candidates for the final evaluation. Clinical Dieticians with PhD (Preferably in the relevant disciplines of Nutrition and Dietetics ) should be the examiner for the assessment of research projects.

#### 4.3. PhD Guidelines

#### Minimum Standards and Procedure for Award of Ph.D. Degree:

Every University established or incorporated by or under a Central Act, a Provincial Act, or a State Act, and every Institution Deemed to be a University under Section 3 of the UGC Act, 1956, and every degree-granting autonomous College and every affiliated college allowed offering Ph.D. programs. Candidates for admission to the Ph.D. program shall have completed:

A 2-year/4-semester Master's degree program, (after 4 years of undergraduate degree) with at least 55% marks in aggregate or its equivalent grade 'B' (or an equivalent grade in a point scale wherever grading system is followed) or an equivalent degree from a foreign an educational institution accredited by an Assessment and accreditation Agency which is approved, recognized, or authorized by an authority, established or incorporated under a law in its home country or any other statutory authority in that country to assess, accredit or assure the quality and standards of educational institutions. A candidate seeking admission after a 5-year/10-semester Bachelor's degree in Research should have a minimum CGPA of 7.0/10.

A relaxation of 5% of marks, from 55% to 50%, or an equivalent relaxation of grade, may be allowed for those belonging to SC/ST/OBC (non-creamy layer)/Differently-abled, Economically Weaker Section (EWS) and other categories of candidates as per the Commission's Decision from time to time.

Note: The eligibility marks of 55% (or an equivalent grade on a point scale wherever The grading system is followed) and the relaxation of 5% to the categories mentioned above are permissible based only on the qualifying marks without including the grace mark procedures, if any. A relaxation of 0.5 score in CGPA or an equivalent relaxation of grade may be allowed for those belonging to SC/ST/OBC (non-creamy layer)/Differently-abled, Economically Weaker Section (EWS) and other categories of candidates as per the decision of the Commission from time to time.

Ph.D. program shall be for a minimum duration of two years excluding course work or a minimum of 3 years including course work, and a maximum of six years.

Extension beyond the above limits will be governed by the relevant clauses as stipulated in the Statute/Ordinance of the individual Institution concerned, but not beyond more than two years or 3 years as mentioned above.

All Universities shall admit Ph.D. Scholars through a National Eligibility Test (NET) or National Entrance Test or an Entrance test/exit exam conducted by NCAHP.

Eligibility criteria to be a Research Supervisor, Co-Supervisor, Number of Ph.D. scholars permissible per Supervisor, etc.

Any regular Professor/Associate Professor of the University/ College, with at least five research publications in peer-reviewed or refereed journals after obtaining PhD and any regular Assistant Professor of the university/ college with a minimum of five years of teaching/research experience with a Ph.D. degree and at least three research publications in peer-reviewed or refereed journals may be recognized as Research

Supervisor. Provided that in areas/disciplines where there is no or only a limited number of peer-reviewed or refereed journals, the Institution may relax the above condition for recognition of a person as Research Supervisor with reasons recorded in writing. Only a full-time regular teacher of the University/ College concerned can act as a Research Supervisor. Adjunct faculties are not permitted to be Research Supervisors except being Co-supervisor. However, Co-Supervisors from within the same department or other departments of the same institution or sister institutions may be permitted with the approval of the Research Advisory Committee. In specific cases of a formal institutional collaboration based on the MoUs, the Universities/Colleges concerned may approve a faculty member as Research Supervisor/Co-Supervisor for a Ph.D. candidate from the collaborating institution. In the case of topics which are inter-disciplinary and where the Department concerned feels that the expertise in the Department has to be supplemented from outside, the Department may appoint a Research Supervisor from the Department itself, who shall be known as the Research Supervisor, and a Co-Supervisor from outside the Department/Faculty/College/University on such terms and conditions as may be specified and agreed upon by the consenting Institutions.

The allocation of a Research Supervisor for a selected research scholar shall be decided by the Department concerned depending on the number of scholars per Research Supervisor, the available specialization among the Supervisors, and the research interests of the scholars as indicated by them at the time of interview/viva voce.

A Research Supervisor/Co-Supervisor who is a Professor cannot guide more than eight (8) Ph.D. scholars at any given point of time. An Associate Professor as Research Supervisor can guide up to a maximum of six (6) Ph.D. scholars (including co-supervision) and an Assistant Professor as Research Supervisor can guide up to a maximum of four (4) Ph.D. scholars. One additional research scholar can be allotted to each supervisor over and above the allotted number provided the Research Supervisor is implementing a major sponsored research project. Further, each Research Supervisor/Co-Supervisor can guide two international students on a supernumerary basis. At any point of time the total number of candidates under a research supervisor shall not exceed the number as prescribed above including the candidates under co-supervision.

Note: The Research Supervisor should declare the number of Ph.D. scholars registered With him/her periodically to the University/College. He/she cannot increase the number by using recognition from multiple universities/colleges. University teachers after superannuation, if they are re-appointed in the parent University As contract or honorary or distinguished or emeritus professors, may continue as Research Supervisors till the age of 70. The university/college, after considering the research track record and fitness of such superannuated teachers to supervise scholars, may decide on his/her continuation as a Research Supervisor with or without financial commitment. The minimum number of credit requirement for the Ph.D. programme should be at least 12 credits and a maximum of 16 credits.

The coursework shall be treated as a prerequisite for Ph.D. preparation. A minimum of four credits shall be assigned to one or more courses on Research Methodology which could cover areas such as quantitative methods, qualitative methods, computer applications, research ethics, and review of published research in the relevant field,fieldwork, etc. Students who register for a Ph.D. directly from four-year undergraduate with research will have to undertake 6-8 credit courses (at Ph.D. level) about relevant skills/research techniques/domain-specific subjects offered by the University.

All Ph.D., entrants irrespective of discipline, shall be required to take credit-based courses in teaching/education/pedagogy/writing related to their chosen Ph.D. subject during their doctoral training period. Other courses shall be advanced-level courses preparing the students for the Ph.D. degree. Lifelong learners/ accomplished researchers as evinced from their original contributions in terms of patents granted or new relevant knowledge or/and artistic practices desirous to get a research degree the Research Advisory Committee may provide choices in selecting the courses/ credits that facilitate the entrepreneur in the monetization of IP thus generated. Credits earned for completed coursework are transferable from one institution to another institution through the Academic Bank of Credits. All fresh Ph.D. entrants, irrespective of discipline, will be required to take credit-based courses in teaching/education/pedagogy/writing related to their chosen Ph.D subject during their doctoral training period. Ph.D. scholars may also have 3-4 hours per week of actual teaching experience gathered through teaching assistantships or other forms of knowledge dissemination that are not repetitive. All dissemination activities including External presentations and posters, popular articles conveying scientific information (or scientific articles) to the general public, production of books, commissioned research and Internal presentations must be approved by the departmental level Research Committee. Teaching for the Department, supervision of fellow students/technical staff, and dissemination tasks can also be credited as knowledge dissemination and as a work commitment. The Department where the scholar pursues his/her research shall prescribe the course(s) to him/her based on the recommendations of the Research Advisory Committee (RAC) of the research scholar. All candidates admitted to the Ph.D. programs shall be required to complete the coursework prescribed by the Department during the initial one or two semesters.

Grades in the course work, including research methodology courses shall be finalized after a combined assessment by the Research Advisory Committee and the Department and the final grades shall be communicated to the Institution/College. A Ph.D. scholar has to obtain a minimum of 55% of marks or its equivalent grade in the UGC10-point scale (or an equivalent grade/CGPA in a point scale wherever the grading system is followed) in the course work in order to be eligible to continue in the programme and submit the thesis.

There shall be a Research Advisory Committee, or an equivalent body for a similar purpose as defined in the Statutes/Ordinances of the Institution concerned, for each Ph.D. scholar. The Research Supervisor of the scholar shall be the Convener of this Committee. This Committee shall have the following responsibilities:

- To review the research proposal and finalize the topic of research;
- To guide the research scholar to develop the study design and methodology of research and identify the course(s) that he/she may have to do.
- To periodically review and assist in the progress of the research work of the research scholar.

A research scholar shall appear before the Research Advisory Committee once in six months to make a presentation of the progress of his/her work for evaluation and further guidance. The six-monthly progress reports shall be submitted by the Research Advisory Committee to the Institution with a copy to the research scholar. In case the progress of the research scholar is unsatisfactory, the Research Advisory Committee shall record the reasons for the same and suggest corrective measures. If the research scholar fails (even after 3 failures or 3 attempts) to implement these corrective measures, the Research Advisory Committee may recommend the cancellation of registration from the program. Upon satisfactory completion of course work and obtaining the marks/grade, the Ph.D. scholar shall be required to undertake research work and produce a draft dissertation/thesis within a reasonable time, as stipulated by the Institution concerned based on these Regulations. Before the submission of the thesis, the scholar shall make a presentation in the Department before the Research Advisory Committee of the Institution concerned which shall also be open to all faculty members and other research scholars. The feedback and comments obtained from them may be suitably incorporated into the draft thesis in consultation with the Research Advisory Committee.

• It is desirable that the research work of Ph.D. scholars is published in peer-reviewed or refereed journals and presented in conferences/seminars. At least 2 publications in peer reviewed Scopus/Science Index journals are mandatory (It can be 1 publication and 1 conference presentation also). The quality assessment of Ph.D. degrees should be the responsibility of the Institutions. The institutions are free to evolve guidelines in this regard, if needed.

• The thesis shall be submitted together with an originality report produced by an antiplagiarism software application. The supervisor (and co-supervisor, if there is any) shall receive an originality report on the whole text of the thesis and shall take this report into account in the evaluation of the submission.

Note: An originality report is not to be considered as sufficient proof that the submitted thesis does not contain plagiarized text. Avoiding plagiarism and other forms of academic misconduct in the authorship of the thesis remains the sole responsibility of the researcher. If the Research Supervisor (or Co-Supervisor) suspects plagiarism, he or she may ask for an investigation.

The Ph.D. thesis submitted by a research scholar shall be evaluated by his/her Research Supervisor and at least two external examiners, who are experts in the field and not in employment of the Institution. Examiner(s) should be academics with a good record of scholarly publications in the field. Out of the two external examiners, one must be from out of the state in which the institution is located. Where possible, one of the external examiners may preferably be chosen as a distinguished academician, not below the rank of Professor or equivalent, from outside India. The viva-voce examination based, among other things, on the critiques given in the evaluation report, shall be conducted by the Research Supervisor and at least one of the two external examiners and shall be open attended by Members of the Research Advisory Committee, all faculty members of the Department, other research scholars and other interested experts/researchers.

o If the research results of the thesis constitute new possible things for the protection of intellectual property rights (IPRs), the Ph.D. candidate and Supervisor shall inform the University or the Research Advisory Committee about the matter. In this case, the Ph.D. candidate, with the consent of the Supervisor, may request that the submitted dissertation be treated discreetly before the thesis is submitted for assessment, until the defense/viva voce. The IPR Cell or the competent body of the university designated for the purpose shall conduct the procedure for legal and commercial protection of research results, by the relevant regulations. In this case, the public defense can be extended, in agreement with the Ph.D. candidate, at the latest for a year, starting on the day of the procedure of evaluation of the dissertation. Request for extension of defense/viva voce must accompany the Certificate of the Technology Transfer from the competent authority. The viva voce of the research scholar to defend the thesis shall be conducted only if the evaluation report(s) of the examiner(s) on the thesis recommends acceptance.

If one of the evaluation reports of the examiner in case of a Ph.D. thesis, recommends rejection, the Institution shall send the thesis to an alternate examiner out of the approved panel of examiners and the viva-voce examination shall be held only if the report of the alternate examiner is satisfactory. If the report of the alternate examiner is also unsatisfactory, the thesis shall be rejected, and the research scholar shall be declared ineligible for the award of the degree.

The Institutions shall develop appropriate methods so as to complete the entire process of evaluation of the Ph.D. thesis within three months from the date of submission of the thesis.

Academic, research, administrative, and infrastructure requirements to be fulfilled by Post-Graduate Colleges for getting recognition for offering Ph.D. programs:

Post Graduate Departments of Universities/Colleges may be considered eligible to offer Ph.D. programs only if they satisfy the availability of eligible Research Supervisors, required

infrastructure, and supporting administrative and research promotion facilities as per these Regulations. Post Graduate Departments of such Colleges, Research laboratories of the Government of India/State Government with at least two Ph.D. qualified teachers/scientists/other academic staff in the Department concerned along with required infrastructure, supporting administrative and research promotion facilities as per these Regulations, stipulated below, shall be considered eligible to offer Ph.D. programs. Post Graduate College should additionally have the necessary recognition by the Institution under which they operate to offer a Ph.D. program. Colleges with adequate facilities for research as mentioned below alone shall offer Ph.D. programs:

Exclusive research laboratories with sophisticated equipment as specified by the Institution concerned with the provision for adequate space per research scholar along with computer facilities and essential software, and uninterrupted power and water supply; Earmarked library resources including the latest books, Indian and International journals, e-journals,

extended working hours for all disciplines, adequate space for research scholars in the Department/ library for reading, writing, and storing the study and research materials; Colleges may also access the required facilities of the neighbouring Institutions/Colleges, or of those Institutions/Colleges/R&D laboratories/Organizations which have the required facilities. All requirements for the Ph.D. degree of such candidates must be duly fulfilled. It is the joint responsibility of the affiliated Colleges, University departments/ Universities.

Notwithstanding anything contained in these Regulations or any other Rule or Regulation, for the time being in force, no University/College shall conduct Ph.D. programs through distance education

mode/online mode. Candidates in service shall be allowed to do a Ph.D., provided all the eligibility conditions mentioned in the extant Ph.D. Regulations are met.

Following the successful completion of the evaluation process and before the announcement of the award of the Ph.D. degree(s), the Institution concerned shall submit an electronic copy of the Ph.D. thesis to the INFLIBNET/Institutional Electronic Archive, for hosting the same to make it accessible to all Institutions. Shodhganga theses repository/registration is also mandatory. The guidelines on matters such as full-time and part-time enrolment, roles and responsibilities within departmental research committees, admissions procedures, supervision arrangements including co-supervisors, regulations concerning leave and vacation entitlements, funding protocols, fee structures, registration procedures, criteria for publication, guidelines for the submission of final theses, and appointment of external examiners, etc., are subject to alignment or modification under the regulations stipulated by the National Commission for Academic and Health Professions (NCAHP) as amended periodically.

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"Curriculum of **Nutrition and Dietetics** (Intellectual Property of the National Commission for Allied and Healthcare Professions, Ministry of Health and Family Welfare)."

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# Chapter 5

### Competency Standards for Entry Level into the Profession of Dietician in India

Newly qualified dietitian-nutritionists should have the necessary knowledge, skills, and attitudes to perform their role when they begin to practice.

Competency-based education uses both educational (classroom/theory) and clinical outcomes (practice); work-based assessments rely heavily on the observations and judgments of suitably trained supervisors or preceptors with frequent, effective direct observations, coaching, and feedback.

Structured Clinical Examinations (OSCE), especially if the direct observations of students with real patients or clients are difficult. The very nature of the competency standards suggests that multiple pieces of assessment evidence would be required to make a judgment on a trainee's achievement of competence.

The minimum level of education of a dietitian-nutritionist is:

A bachelor's degree in nutrition and dietetics and

A period of supervised professional practice of at least 500 hours and Meets the international competency standards. The Standards should be used as a key reference for a variety of interested people/groups or organizations (stakeholders) and purposes.

• For higher education institutions when designing and developing new programs of dietitian-nutritionist education, or when revising existing programs.

• For internal and external evaluation, providing a plan to support control of quality and improvements, such as academic review, as well as for making judgments about minimum standards being met.

• For employers to understand the competencies, qualities, and capabilities that should be demonstrated by the dietitian-nutritionist.

• For students to understand the competencies, qualities, and capabilities being developed during their education and training.

• For patients, clients, other health professionals, the government, and other stakeholders to understand the roles of the dietetics profession,

• For the dietetics workforce to improve the profile and image of the dietetics workforce.

• For the dietetics workforce to help assist with the exchange of professionals between countries.

#### **Definitions used in this document**

In any learning process there are two key players - the learner and the 'supervisor' or teacher. There is some confusion in the use of terms to define competence. The definitions provided here are to help distinguish the different roles of the most relevant players in the learning dynamic

Term	<b>Definition</b>	
Competence (-s)	Professional competence is the regular and skillful use of	
CION .	"communication, knowledge, technical skills, clinical	
.5	reasoning, emotions, values, and reflection" and "the	
	bringing together of different components to perform, do	
8	something successfully or manage complex situations"	
S	Competence defines WHAT a person can do well,	
7	effectively, and following professional standards.	
Ž	Competence refers to a person's ability or the skills and	
0	knowledge that the person possesses. Competence can only	
	be demonstrated.	
Z	Competence is an outcome: it describes what someone can	
	do. It does not describe the learning process that the	
	individual has taken Competence represents the whole	
	combination of knowledge, understanding, skills, and	
रेश रन्ता	abilities and the capacity for applying them.	
E.	In order to reliably measure someone's ability to do	
Ŕ	something, there must be clearly defined and widely	
. 6	accessible standards through which performance is	
A CL	measured and accredited; Competence is a measure of what	
	someone can do at a particular point in time.	
	. Idlfed -	

Competency(-ies)	Competency is a skill whereas competence is the sign of a
	person's practice in the workplace context. Competency is
	defined as "an observable ability integrating
	knowledge, skills, values and attitudes".
	The focus of competency is concentrated on the learners
	and their actions rather than upon already agreed-upon
	products, or it can mean active participation through
	learning.
NOIS	Learning programs (in Higher Education or elsewhere) are
Sie	therefore competency-based programs.
Learning Outcomes	Learning outcomes are statements of what a learner is
N'	expected to know, understand and/or be able to demonstrate
3	or do after the completion of learning. They can refer to a
7	single subject, course, unit, or module or they can refer to a
X	time period of study, for example, a first or a second cycle
0	program (Europe) or a program year. Learning outcomes
E	specify the requirements for award of academic credit.
2 N	Learning outcomes are developed by academic staff, who
	have professional knowledge of actual practice requirements
	and expectations.
Behavioural	A behavioural objective has three parts:
Objective	a) a defined behavioural verb,
+X +dl	b) described conditions that allow the behaviour described by
	the verb,
	c) a description of the minimum level of acceptable
10 P	performance (criteria).
	An example of a behavioural objective is: by the end of the
	period of training (the condition), the student will be able to
	perform a physical nutrition assessment (the behaviour) with
	90% accuracy (the minimum level of performance) in this
	document, nigner order benavourial descriptors5 such as
	synthesizes", evaluates", "creates", "characterizes" and
	similar are not included as these standards are designed as
	minimum to enter the profession. This does not preclude the

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use of higher order objectives in practice as these are examples only. The actual level or quality of performance needed to meet the behavioural objectives is not outlined in this document, as it is expected that local contexts and expectations will lead to a variety of performance measures.

The term "client" is used to include; individual patients – whether in the hospital or the community, a group such as a community group seeking nutrition services, stakeholders or organisations who may be purchasing or funding programs or services, or any other people who are receiving nutrition services.

Learning outcomes specify the requirements for award of academic credit. Learning outcomes are developed by academic staff, who have professional knowledge of actual practice requirements and expectations

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Client

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|      | 1.0 Dietetic Process and Professional Reasoning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |                             |  |  |  |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------|--|--|--|
|      | Competency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Behavioural       | Examples of Behaviour       |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | objectives or     |                             |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | learning          |                             |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | outcomes          |                             |  |  |  |
| 1.1  | Applies the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | a) Can identify,  | Clinical Practice           |  |  |  |
|      | nutrition care                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | assess, and       | Writes nutrition care plan  |  |  |  |
|      | process based on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | develop goals for | sheets for simulated and/or |  |  |  |
|      | the expectations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | nutrition related | real cases                  |  |  |  |
|      | and priorities of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | problems with     | Makes reasoned case         |  |  |  |
| K    | individuals,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | individuals,      | reports or provides case    |  |  |  |
| 3    | group,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | groups,           | portfolio 8                 |  |  |  |
| 7    | communities or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | communities,      | Gives case presentations    |  |  |  |
| N    | population                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | populations and   | Public Health/Community     |  |  |  |
| 0    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | regulator         | Nutrition                   |  |  |  |
| E    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | Writes report for group     |  |  |  |
| NZ   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | education / community       |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | projects demonstrating      |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | needs assessment, plans     |  |  |  |
| 4    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | b) Develops and   | and implementation          |  |  |  |
| Sec. | J-clj9)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | implements        | Foodservice Management      |  |  |  |
|      | ( YII CY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | intervention      | Assesses the accurate       |  |  |  |
|      | NA N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | plans, and        | delivery of appropriate     |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | monitors and      | meals consistent with the   |  |  |  |
|      | and the second s | evaluates the     | nutrition plan              |  |  |  |
|      | 4 37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | outcomes, and     | Jelage                      |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | reports on it     | Any Practice Setting        |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | • Writes report on          |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | implementation of plan      |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | and outcomes                |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |                             |  |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |                             |  |  |  |

-			
	SSION FOR A	LLIED AND	• Presents evidence of interaction with individuals/groups/populat ions demonstrating improvement of planned nutrition interventions (simulated cases or real 'cases')
1.2	Engages in	a) Establishes	Any Practice Setting
8	collaborative	collaborative	• Documents evidence of
S	(shared) practice	(shared)	inter professional
Y	in prov <mark>iding hi</mark> gh-	partnerships,	involvement in partnership
N	quality, cost	consults with	activities to improve care
0	efficie <mark>nt serv</mark> ices	and advises	o <mark>r service</mark>
F	to achieve	clients,	• Finds evidence for (and
NZ	positive health	caregivers,	of) quality assurance of
	outcomes	team members	dietetic services
		and other	• Reports on the effective
9		stakeholders	and timely completion of
So	J-clij-9 Ji	to improve	independent work
	( YI CY	care	Clinical Practice
	R.	NCAHP	• Provides a case portfolio
	1 CT A CT	Since-2021	or case(s) connecting activity and impact
	9 3/h.	b) Undertakes	resulting in improved care
	, ik	basic cost-benefit	
		analysis of	Any Practice Setting
		intervention	• Find ways to use time
			and resources more cost-
			effectively Foodservice
			Management

			• Writes a non-out of food
			• writes a report of food
			service management
			project(s) with cost-benefit
			evidence
1.3	Reflects and	a) Utilizes the	Any Practice Setting
	reviews own	process of	• Writes and presents
	dietetic practice	reflection7 to	critical incident reflection
	FOR	take action on	HEAL
	'AO,	critical	The second se
	SI	incidents8 (either	Any Practice Setting
2		positive or	• Shows how systematic
2		negative) that	evaluation of practice
Ő.		reflects	provides opportunities for
		reneets	Lifelong learning and an
Y			Lifelong learning and on-
$\geq$		benefit	going assessment of
0		b) Develops	competence
A		plans for own	• Uses feed-back from
Z		dietetic practice	peers, supervisors and
		improvement	colleagues to write on the
			value of supervised
			interaction with colleagues
So.	J-CIJ-92T	म सतर्गि	and clients
1.4	Works	Accepts	Any Practice Setting
	independently and	personal – P	• Describes the ethics of
	integrate nutrition	responsibility	communication, including
	and dietetics into	and is	social media
	professional	answerable to	• Shows agreement with
	care/service	others for	and acts on policies,
		actions and	procedures, and
		decisions	professional ethics through
			nutrition care notes or
			other documentation



1.5	Respects the	a) Recognises	Any Practice Setting
	unique emotional.	social, cultural,	Takes into account
	social, cultural,	regional and	diverse sociocultural
	religious,	religious	situations, ability and
	ecological needs	influences on	resources of clients when
	of individuals,	food selection	planning nutrition care or
	groups,	and the provision	services Public
	communities or	of nutrition	Health/Community
	populations	interventions.	Nutrition or Foodservice
	S		Management
2			Demonstrates cultural
N		b) Uses client-	competency and how
S		centred	diverse socio-cultural
		intervention and	groups and diversity within
N.		community	socioeconomic status
6		development	guides community
Ĭ		approaches	projects.
A		off	
~			Any Practice Setting
			• Works according to the
4			principles of a non-
8			discriminatory client
+2	र्वा स्थ्य	म् सवाश्व	centred practice
9		NCAHD	• Reports on assessment
	12		approaches that utilise
	6.9	Since-2021	principles of community
	4.8.3		development
	y/re	स्वास्थ्य द	Clinical Practice
			• Presents a case
			portfolio(s) showing client
			centred intervention(s)

	2.0 Evidence Based Practice and Application of Research					
	Competency	I	Behavioural	Examples of Behaviour		
		0	objectives or			
		1	earning			
		0	outcomes			
2.1	Systematically	a)	Can	Any Practice Setting		
	search, judge,	L	demonstrate	• Writes an evidence		
	interpret and apply		skills in	based report to justify a		
	findings from		independent	nutritional intervention		
	food, nutrition,		searching of	C.A.		
	dietetic, social,		scientific	2		
8	behavioural and		literature and	· P		
G	education sciences		other relevant	20		
$\geq$	into practice		information			
$\geq$		b)	Interprets,	Any Practice Setting		
0			analyses,	• Works showing a		
H			synthesises and	logical, reasoned		
Z			critically	approach to dietetic		
			appraises	practice Clinical Practice		
			research	• Presents case studies		
9			findings and	showing an evidenced		
So.			their	based approach with		
T	ryited	I,	applicability to	reasoned conclusions		
		N	practice – P			
			2021	• Shows through care		
		ווכ	1CE-2021	plans that problem		
	9 375			solving skills have been		
		K	वार्ख्य ५	used to provide a justified		
				approach to practice		

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2.2 Identify, design a) Participates Any Practice Setting in and participate in research • Reports on how dietetic or research and audit evaluation practice was audited or enhance the audit projects against standards and to within the field practice of proposes future actions dietetics of nutrition and • Writes a research, or dietetics audit project report in the SIONFO b) Uses principles field of dietetics and of research nutrition Any Practice Setting design, data • Develops and uses management, systems to manage data analyses and interpretation in and information which is NATIONA / shown to enhance dietetic dietetic practice c) Shows how practice results from Any Practice Setting audit/research • Keeps a reflective activities can be portfolio to show how used to enhance systematic monitoring own practice and use of evidence have informed and changed own practice Uses reports from supervisors and peers to show how own practice 9 87 31 has changed due to audit outcome 323



2.4	Adopts	an	a)	Indoes	the	Any Practice Setting
<i>2</i> ,7	evidence	hased	u)	evidence	to	• A case portfolio shows
	evidence	Daseu		evidence	10	• A case portiono snows
	approach	to		answer		justified evidence-based
	dietetics pra	ctice.		practical		practice • Demonstrates
	Adopts	an		dietetic		professional judgement in
	evidence	based		questions		the use of evidence
	approach	to	b)	Uses conte	xtual	Clinical Practice
	dietetics pra	ctice		factors	and	• Case notes and care
	, ON '			stakeholder	r	plans clearly show how
	S			perspective	e <mark>s t</mark> o	evidence has been used to
				justify		guide decisions
Z				decisions		Ì D
20						P
2.5	Shares	vidence	a)	Summarize	S	T
M	based dietet	ics and		and		Any Practice Setting
0	nutrition	with		communica	ates	Writes a summary of
ITA	colleagues a	nd key		research		evidence based dietetics
NA	stakeholders			informatior	ı	or nutrition in response to
				appropriate	to	questions
				the 'audien	ce'.	
9			b)	Shares	own	Any Practice Setting
A.	रना	હ્રિ	Ŧ	knowledge, skills	and	Makes an oral or poster presentation of thesis,
4		- I	N	experiences	^s P	dissertation, research
	S. S. S. S.		Si	with others	)21	projects or case studies
	4	अभि	7	वास्थर	ा दे	Elect

	3.0 Quality Assurance of Dietetics Practice						
	Competency	Behavioural objectives or learning outcomes	Examples of Behaviour				
3.1 NATIONAL	Improve practice through continuous and systematic evaluation maintaining clear and concise records of all activities	<ul> <li>a) Uses dietetics and other standards to systematically evaluate practice and participate in audit procedures</li> <li>b) Collects data and revises plans to achieve continuous quality improvement across the dietetics service in partnership with others</li> <li>c) Uses current technology in practice to provide evidence for quality assurance purpose</li> </ul>	Any Practice Setting <ul> <li>Locates and summarises dietetic and other standards which are applied for quality assurance Foodservice Management</li> <li>Produces an audit cycle</li> </ul> <li>Any Practice Setting <ul> <li>Produces</li> <li>Produces</li> <li>documentation which can be audited successfully Clinical Practice</li> <li>Always uses a standardised system for collecting patient records Foodservice Management</li> <li>Develops a plan for quality improvement involving stakeholders</li> <li>Discusses the ways a service can be evaluated</li> </ul> </li>				

3.2 Maintain a) Demonstrates regular Any Practice Setting competence review of Routinely to own • seeks feedback practice through practice and on lifelong performance learning competence as a (LL) dietitian nutritionist from peers, colleagues, b) Implements a plan clients and others professional Identifies for own development. competences and compares to published professional competences • Produces a Lifelong Learning (LLL) plan Any Practice Setting NATIO/ Sets themselves continuous improvement tasks • Discusses choice of activities to show how they meet LLL plan • Actively shows how professional development activities HE 9 88 31/2 meet the LLL plan ince-2021 327





3.5 Accepts a) Complies with current Any Practice Setting responsibility legislation that applies • Adopts an approach to for ensuring practice professional their to the legislative which work and role which meets context in requirements dietitians-nutritionists shows work concern for human b)Establishes safe rights SSIONFO environments for Foodservice practice which Management • Takes appropriate and minimises risks including human correct action to hazard rights, and infection control when working infection control with people, food or in other areas • Shows awareness of what how and a safe environment can be established RE 9 8 31/2 ince-202 201-20





	SSION FOR	ALLIED AND	<ul> <li>Seeks views of supervisors/teachers on the establishment of trust and rapport during interviews</li> <li>Writes a reflective log about an encounter where professional</li> </ul>
N VINY	रनारथ सिंह कहने अंग	b) aise the profile of the professionalization and networking. NCAHP Since-2021	expertise of dietitian nutritionists Any Practice Setting • Works and behaves as a professional dietitiannutritionist using the professional code of conduct

			• Writes an article for a
			professional dietetics
			newsletter or other
			media source
			induiu source
			• Serves on a committee
			and promotes the role of
	FOR	ALLILDAND	the distition putritionist
1 1	Soak support and	a) Identifies and uses	Any Practice Setting
4.4	seek, support and	a) Identifies and uses	
	promote	learning episodes to	• Encourages others to
	opportunities for	support team members,	recognise learning
5	learning among	peers and others	opportunities in daily
9	peers, and others		life to
47		b) Engages in the	advance practice
$\geq$		development and use	• Writes a reflective log
0		of appropriate	about a learning
		learning materials to	opportunity in which
Z		support professional	team members advanced
		development	their understanding of
		c) ) Seeks, responds to,	dietetics
3		and provides,	Any Practice Setting
4	र स्वास्थ	effective feedback	• Sets-up or actively
	No.	NCALD	literature review and
	1 Alexandre	NGAIIF	discussion or a
	Ca	Since-2021	Iournal Club
	·		• Develops a learning
		रे एउरावर १	anisada and avaluatas its
			episode and evaluates its
			Any Dractica Softing
			Any Practice Setting •
			Monitors and reports on
			learning undertaken by a
			peer

			• Pro-actively takes a
			critical approach to own
			learning and sets goals
			and targets for lifelong
			learning
4.5	Advocate for the	Identifies opportunities	Any Practice Setting
	contribution that	to change factors	• Undertakes a project to
	nutrition and	affecting health	show
	dietetics can make		how dietetics and
	to improve health	Advocates on behalf of	dietitian nutritionists can
	M	stakeholders to	improve nutritional
	N.	improve health	health for an individual
$\sim$			or a population (e.g.
~			malnutrition ).
Z			Any Practice Setting
0			• Write a report on how
			advocacy has changed
A			policies or other
			situations
			situations

स्वास्थ्यम् सर्वार्थसाधनम् NCAHP Since-2021 और स्वास्थ्य देखान्यस

	5.0 Evidence-Based Practice and Application of Research					
	Competency	Behavioural objectives	Examples of Behaviour			
		or learning outcomes				
5.1	Integrates		Clinical Practice			
	knowledge of food	Uses knowledge of food,	• Writes nutrition care			
	and food systems,	nutrition and dietetics in	plan /			
	human nutrition	the prevention and	case reports / meal plans			
	and dietetics in the	treatment of disease and	for			
	provision of	promotion of health	simulated and/or real			
	services		cases			
ć	N N		which shows the use of			
		Explains why new and	a B			
		revised information	knowledge of food and			
$\geq$		about food, human	nutrition			
0		nutrition and dietetics	• Uses food composition			
F		is necessary for	data 9			
X		provision of a safe	appropriately when			
		service	considering a care plan			
			Public			
3			Health/Community			
4	े ग्ताग्र्	गम सतर्विस	Nutrition			
	e l'une		• Makes plans for group			
	R	NCAHP	education / community			
		Since-2021	projects demonstrating			
	a con	01106-2021	needs			
	Y ST	IS TOTTE Y	assessment and giving			
		, त्वार्ख्य य	rationales / evidence for			
			plans			
			and implementation			
			Foodservice			
			Management			



5.2	Integrates	a) Uses knowledge of	Clinical Practice
	knowledge of	biomedical sciences	• Presents case reports
	biomedical	(e.g. nutrition.	which show how a
	sciences in the	anatomy, physiology,	knowledge of
	provision of	immunology.	biomedical sciences has
	services	hiochemistry	informed the care of
	services	enidemiology	natients • Uses
	EOR	genetics.	biochemical parameters.
	. An	pharmacology) to	physical and
	SIV	support safe practice	anthropometric data.
	M ²		laboratory tests
			(compared to reference
			values and standards)
			when formulating care
Z			plans
5.3	Integrates	a) Can develop a basic	Clinical Practice
	knowledge of	business plan for	• Shows how theories of
<b>A</b>	behavioural and	dietetics and nutrition	behaviour change are
~	social sciences in	services	used in
	the provision of	b) Shows how	practice to improve
4	dietetic services	leadership,	eating behaviours
2		management skills	Foodservice
7.	X relies	and resources	Management
	S A	(financial, human,	• Provides evidence of
	1 Section of the sect	physical and/or	how
	"Sar	material resources)	management of
	9 37	affects service	individual
		provision	cases or food service has
			used behavioural and
			social sciences, for
			example, where health
			inequalities are present

5.4	Integrates business	a) Can develop a basic Any Practice Setting
	and management	business plan for • Writes a basic business
	principles and	dietetics and nutrition plan
	skills in the	service for nutrition and dietetic
	provision of	services using business,
	service	b) Shows how financial and
		leadership, Ann management
	FOR	management skills principles and skills
	, NOL	and resources Any Practice Setting
	Sit	(financial, human, • Writes a reflective log
	Al.	physical and/or entry on teamwork and
ć	N.	material resources) group work tasks or
$\langle \rangle$		affects service activities at university
		provision or in real world settings,
Ž		considering integration
0		of business, financial
F		and management
N		principles and skills
5.5	Integrates a	c) Recognises how a Foodservice
	knowledge of	systematic Management
3	organisational,	understanding of the • Reports on how
4	professional and	relevant rganisational organisational and
	legislative	and legislative legislative
	requirements in the	requirements relates requirements (e.g.
	provision of	to a safe professional Health & Safety
	dietetic services	dietetics service Regulations, Food &
	Y ST	b) Explains how a Drug Regulations,
		systematic Nutrition Labelling
		understanding of Regulations) were
		relevant professional recognised during the
		requirements can practical placement
		affect a safe and Any Practice Setting
		professional service

• Documents evidence of compliance with relevant professional codes, guidelines and standards of practice and ethics

 Shows how a critical incident reflection related to professional or legal issue affected subsequent practice

Competency Standards for Dietitian-Nutritionists Minimum requirements for entrance into the profession at the point of qualification

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# **Chapter 6**

# Minimum Standard Requirements: Bachelor in Nutrition and Dietetics program

All existing Nutrition and Dietetics Colleges or A new College will impart Nutrition and Dietetics education is suggested the following conditions are fulfilled :

1) Infrastructural, Functional & Equipment, and Human Resource Requirements The establishment of a Nutrition and Dietetics college – No person shall establish a college/institute except after obtaining prior permission from the National Commission (NCAHP). Nutritional Sciences education prepares a person for independent practice and involves extensive clinical training in almost every specialty & super specialty of nutritional care. The following organizations shall be eligible to apply for permission to set up a Nutrition and Dietetics College, namely: -

1. A State Government/Union territory;

2. A University and Deemed to be a University

3. An autonomous body promoted by Central and State Government by or under a Statute for medical education;

4. A society registered under the Societies Registration Act, 1860 (21 of 1860) or corresponding Acts in States; or

5. A public religious or charitable trust registered under the Trust Act, of 1882 (2 of 1882) or the WAKFS Act, 1954 (29 of 1954).

#### Hospital / Hospital Attachment

- If the college is on the premises of MCI/NMC permitted/recognized Medical College as constituent college, then, there is no requirement for attachment to any other hospital.
- In all other cases Proof of availability of own/attached hospital (Government/Private) for clinical training of 30 students shall be furnished (student: OPD ratio of 1:5). The hospital must be within a 20 km radius of the College. The college must provide mandatory bus service to the students if the hospital is located more than 1 km away from the College. Within 5 years of application of these Rules, the colleges must have their Own Prescribed Hospital in the college Premises.

- College can be affiliated to a maximum five (05) hospitals having indoor and outdoor facility in the above-mentioned specialty clinics.
- Tie-up hospitals cannot get attached to more than two colleges. If the affiliated hospital is attached with two colleges, the OPD strength must be adequately divided among the colleges as per the prescribed student: OPD ratio.
- .The affiliated hospital shall provide information regarding any MOU with other colleges, if any & MOU should be for at least five years.
- The MOU should mention the available clinical specialties, patient loads, and availability of required equipment for clinical training with names and designations of the faculties responsible for the training in the hospital.
- Faculty: The college/institute must arrange for Nutrition and Dietetics faculty members for supervision and clinical teaching of students inside the hospital.
- Hospitals may recruit its Registered Clinical Dieticians for supervision and training
   of Nutrition and Dietetics students and supervision of interns

## Land And Building

- If the college is on the premises of a permitted/ recognized medical college, no separate land is required. Existing norms of land for medical college will suffice. Besides that, the constructed area/Building norms for Nutrition and Dietetics College must be fulfilled as per the requirement mentioned below. In all other cases, the applicant must provide the land details on which the institution will be established for providing Nutrition and education education. It should be in the name of the society/ Trust/company applying for the same (sale deed/lease/gift deed etc.). That the applicant Institution / Trust should have an independent building for
- Nutrition And Dietetics College and facilities for clinical training as per the curriculum as prescribed by the commission from time to time.
- Such a building should be constructed in such a way that there is adequate parking space and recreational area or open space for students as prescribed by the commission.
- Such a building should have adequate space and should have an outpatient Dietetics department, various laboratories as needed, office space, classrooms, a hostel, and other ancillary facilities. Dietetics OPD and the college can be placed in different buildings within 50 KM (or as per the NCAHP regulations) distance in the same state of India.

- Minimum exclusive built-up area for such a college should be 38400 sq.ft for the intake of 60 students per batch.
- Building should be universally accessible to persons with disability and as per NBCI guidelines (National Building Code of India).
- Building must be recorded on the appellate institute name or if the land is under lease agreement, it must be for at least 10 years
- Building must have requisite clearances from the respective civic and administrative authorities like Fire NOC, structural stability certificates, land use certificates, etc.
- The building must have CCTV cameras for CCTV surveillance in every area of common use as can be prescribed.
- Biometric facility for students and staff, faculty attendance record/documentation.

3) Nutrition and Dietetics Departments

Faculty requirement for UG: Full time (FT); Part-time (PT)

It is recommended that a core faculty and student ratio for UG 1:10 be followed.

Ideally, all the faculties should be full-time. In case of non-availability of full-time

faculty, 40% may be part-time/visiting/Ad hoc faculties (non-core subjects only)

Faculties appointed for academics for teaching purposes are considered full-time (Maximum of 8 hours per day or Minimum of 40 hours per week).

Qualified Dieticians may be taken as part-time Visiting faculties

#### **Guidelines of Building and Laboratories**

## **Teaching Block**

For a college with an annual admission capacity of 60 students, the constructed area of the college should be a minimum of 38400 sq.ft.

वर्थिसाधन

The details of the constructed area are given below for an admission capacity of 60 students.

S. No.	Teaching Block	Minimum Area (in sq. feet)
1.	Lecture Hall	8 @ 900=7200
2.	Skill labs for 30 students	
	1. Nutrition Lab (Food Analysis)	1500
	2. Nutritional Biochemistry	1500
	3. Institutional Food Service Management	1500
	4. Food Microbiology Lab	1500
	5. Anatomy & Physiology Lab	1500
	6. Nutritional Assessment Lab	1500
3.	Computer lab	2000
	(1:5 compute <mark>r student ratio as per stude</mark> nt	2
6	intake)	D
4. 0	A.V.Aids Room	1000
5.	Multipurp <mark>ose Hall</mark>	3000
6.	Common Room for Boys	1000 S
7.	Common Room for Girls	1000
8.	Principal Room with toilet	<mark>5</mark> 00
9.	Vice Principal Room	300
10.	Library	3000
11.	One Room for each Head of Departments	5@200=1000
12.	Faculty Room with Ladies and Gents Toilet	2400
13.	Provisions for Toilet for Boys	600
14.	Provisions for Toilet for Girls	600
15.	Admin Room	800
16.	Waiting/Lounge area with Ladies' and Gent's	1000
	Toilet	TATCH
17.	Store Room VR Fartes C	5 @ 500=2500
18.	Canteen with Pantry	1500
	Total Area	38400 sq.ft.

#### **Clinical Infrastructure**

The minimum Equipment (for 30 students) for the Bachelor in Nutrition and Dietetics in Honors Program for various labs is as follows:

- 1. Nutrition Lab (Food Analysis)
- 2. Nutritional Biochemistry
- 3. Food Production and Service Lab Management
- 4. Meal Management/Dietetics Lab
- 5. Food Microbiology
- 6. Anatomy & Physiology Lab

### 1. Nutrition Lab

HEALTHCAR Undergraduate students will learn how to measure Body mass, body composition, and the assessment of nutritional status: anthropometric, biochemical lab., clinical and dietary intake.

#### **Equipment/Instrument**

- Weighing Machine Digital platform scale 200Kg/BMI electronic scale 2 no
- Heightometer -medical height measuring weight scale, Stadiometer -2no
- Tape for circumference- Non-stretchable tape 2 no
- MUAC tape Coded tape -2
- Skinfold measurements Harpenden Skinfold Calipers -1no.
- Infantometer -1
- STEP for fitness test -1
- Stadiometer
- Calibration weights -1
- BP Instrument = Digital/Manual -1 no
- Digital food weighing Balance-1no.
- Body Composition Analyzer-1 no.

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#### 2.Nutritional Biochemistry Lab

- Weighing balance Regular with Beam balance 4 D AND HEALTHCARE PROFESSION,
- Digital weighing balance 2
- pH meter
- Water Bath
- Colorimeter- 2
- Spectrophotometer-1
- Distillation apparatus •
- Soxhlet glass apparatus •
- Nitrogen analyzer glass unit
- RM number glass unit
- Hot air oven
- Muffle furnace
- centrifuge
- Refrigerator
- Test tube stand

## Glassware

- Beakers
- Test tubes & Test Tube Holder
- Burette + Burette stand
- Standard flask
- pipettes
- Conical flask

## 3. Institutional Food Service Management

### Cleaning and Washing 🔰

- Stainless steel commercial kitchen sinks
- Dishwasher
- Washing machine (Clothes)

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#### Storage

- Refrigerator Commercial
- Deep freezer
- Water storage unit
- Non perishable food storage containers
- Perishable Food storage containers
- Hot food storage racks (cooked food)

### Food preparation

- Stainless steel LPG burner
- Gas stock pot stove
- Commercial Mixer
- Heavy duty mixer and grinder
- Induction bulk cooking stove
- Wet grinder
- Roti maker
- steaming equipment
- frying pans
- Cooking pots
- Microwave
- Oven
- Exhaust fans
- Coffee and Tea machines
- Utensils
- Cooking vessels (assorted sizes)
- Kettles
- Steaming equipment
- Idly steamer
- Dosa pans
- Colanders
- Cutting boards
- Double boilers
- funnels

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- graters
- Kitchen knives (assorted)
- Measuring spoons and cups (assorted)
- Weighing scales
- spatulas
- Ladles
- Peelers
- Mashers
- Cutlery
- Crockery
- AND HEALTHCARE PROFESSION. Assorted serving spoons, cups, plates and bowls

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- Choppers
- Food processor
- Motor and Pestle
- Can openers
- Slicers
- Pressure cookers
- Frying pans and pots
- Deep frying pan
- Hot and cold food displays
- Thalis with compartments

# Safety Equipment

- Fire extinguisher
- Hot food holding gloves

## 4. Meal Management/Dietetics Laboratory

#### **Equipment/Instrument** -

- Gas stoves /Induction stove 15-20 no.
- Refrigerator -1
- Oven -1
- Microwave-1
- Mixer/Grinder/Chopper-1

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#### Utensils for Preparation and Cooking - 15-20 sets

- Types of kadai
- Pressure Cooker
- Steamers for idli, dhokla, dumplings etc.
- Tawa
- Frying Pan, saucepan
- Sandwich maker/ Griller
- Knives, peelers, graters
- Spatula, spoons, Slotted Turner, Slotted Spoon, Solid Spoon, Soup Ladle, Whisk, Tong, , PROFES.

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- Set of 5 Measuring Cups,
- Set of 5 Measuring Spoons
- Measuring jar
- Chopping board
- Mixing bowls

### Utensils for Serving- 15-20 sets

- Plates- full, quarter
- Bowls- Large, medium and small
- Soup bowl and spoons
- Teacups/ Mugs
- Casserole
- Microwave-proof serving bowls
- Trays
- Spoons
- Glasses
- Serving Spoons

#### **Utensils for Storage -**

- Large, Medium and small boxes for provisions
- Storage cupboards
- Vegetable Bags
- Baskets for vegetables and fruit

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#### Serving Linen -

- Table mats etc.
- Cloth napkins
- Table Covers
- Kitchen towels

# 5. Food Microbiology Laboratory

- Weighing balance
- pH meter
- Autoclave
- Hot air oven
- Laminar flow (Vertical /Horizontal)
- Colony counter
- Light Microscope
- Fume chamber
- Incubator
- Refrigerator
- Centrifuge
- Bunsen Burner
- Gas Cylinder
- Glassware -
- Test tubes
- Petri dishes
- Wire loop
- Pipettes
- Burettes
- Beakers
- Standard flask
- Test tube holder and Test tube stand
- Conical flask

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#### 6. Anatomy and Physiology Laboratory Models -

- Human torso
- Human Respiratory system
- Organ system

#### Individual organs -

- Kidney and Bladder FOR ALL
- Brain
- liver and pancreas
- Sahli's pipette
- Microscope (Light/ Digital)
- Hot air Oven
- Colorimeter
- Haemoglobin meter
- Centrifuge
- Blood pressure monitor
- Sphygmomanometer
- Stethoscope
- Haemocytometer
- Bunsen Burner
- Refrigerator
- Tripod stand
- Steamers
- Water bath
- Electric kettle
- Balances
- Thermometer
- Wash bottles
- Body fat Analyser (Desirable)
- **Brushes**
- Tongs
- Cotton

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- Spirit
- Syringes
- Hb Pipettes
- Stop watch
- Mounted slides
- Cover slip
- Test tube holder

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- Test tubes
- Capillary tubes
- Crucible C
- Lancets
- Pipettes
- Beakers
- Graduated Spatula
- Watch glass
- Tissues -
- Epithelial
- Connective
- Muscular
- Nervous
- Bone
- Charts Different Concepts/ aspects
- A school of Nutrition and Dietetics should have an attached clinic/hospital to cater to clinical learning.

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## Guidelines for standalone institutes:

A clear legally vetted (Notarised stamp paper) Memorandum of understanding (MoU) needs to be provided for any institute/hospital to share the infrastructure and it should follow the NCAHP guidelines

#### Desirable Batch size for Bachelor of Nutrition and Dietetics in Honors :

It should be proportional to the OPD (Outpatient Department) of the clinic/hospital. Each student should be able to examine a minimum of 5 patients per day. For example: For an OPD of 150, one can have an intake of 30 students per batch. A clinic/hospital having an OPD of 500 can have an intake of 100 students per batch. If the intake is more than 30, infrastructure should also be increased proportionally. Student and faculty ratio is 10:1. The maximum batch size should be proportional to infrastructure, number of faculties, and OPD.

#### Desirable Batch size for Masters in Bachelor of Nutrition and Dietetics:

A maximum of 25% of the Bachelor's program shall be the batch size of a post-graduate program. Teachers at the level of Assistant Professor II or Scientist D and above shall guide the students. The teacher-student ratio for dissertation guidance shall be 1:4.

#### **Faculty requirement for PG:**

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Principal/Vice Principal/HOD is the same for both UG and PG programs.

It is recommended that a core faculty and student ratio of 1:3 for PG to be followed. Student-faculty ratio needs to be 3:1 at least Associate Professor Level for PG teaching. In case of non-availability of full-time faculty, 30% may be part-time/visiting/Ad hoc faculties.

Separate facilities need to be provided for PG students/Fellowship programs/PhD programs.

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### Library Details:

Item	Requirements			
Text Books As per the syllabus; one	Approximately 450 books for 30 intake			
copy of the Book per 10 students.	and 900 books for 60 intake for UG.			
Reference Books	100 Advanced Books As per			
	requirement			
Journals	At least 2 international and 2 national			
FORME	journals <i>HEA</i>			
subscription to electronic databases/e-	Required			
journals	i CAD			
Mandatory Internet facility Access to e-	Minimum 15 computer terminals for 60			
library Equipment	students/8 for 30 students			

# Suggested faculty strength for UG

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Suggested faculty strength for UG				
30 seats	40 seats	50 seats	60 seats	100 Seats
(5*30=150	(5*40=200	(5*50= 250	(5*6 <mark>0=</mark> 300	(5*100= 500
students)	students)	students)	students)	students)
Professor-1	Professor-1	Professor-1	Professor-2	Professor-4
A				F
Associate	Associate	Associate	Associate	Associate
Professor-2	Professor-3	Professor-4	Professor-4	Professor-8
			11191	1 3
Assistant	Assistant	Assistant	Assistant	Assistant
Professor-12	Professor-16	Professor-20	Professor-24	Professor38
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Note: All members of the Nutritional Sciences task force have deliberated upon and provided counsel regarding the aforementioned curriculum, drawing from their extensive years of experience in the field of Nutrition and Dietetics. It is noted that all aspects delineated within the curriculum are subject to modification by the regulations set forth by the National Commission for Allied & Healthcare Professions (NCAHP)

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