



Ohio Administrative Code

Rule 4759-6-01 Standards of practice in nutrition care.

Effective: [October 31, 2025](#)

The standards of practice in nutrition care provide a common understanding about the profession's minimum expectations for practice, and form a basis for self-evaluation and improvement and an expectation about nutritional care and service delivery. The standards of practice in nutrition care are comprised of four standards representing the four steps of the nutrition care process.

The "nutrition care process" is a systematic problem-solving method that dietitians may use to critically think and make decisions when providing medical nutrition therapy or to address nutrition related problems and provide safe, effective, high quality nutrition care within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.

The nutrition care process shall consist of four distinct, but interrelated steps including nutrition assessment, nutrition diagnosis, nutrition intervention and nutrition monitoring and evaluation.

(A) The licensee uses accurate and relevant data and information to perform nutrition assessment and identify nutrition-related problems, as the foundation for nutrition diagnosis, the second step of the nutrition care process.

(1) "Nutrition assessment" means the same as "nutritional assessment" defined in paragraph (A) of rule 4759-2-01 of the Administrative Code.

(2) A nutrition assessment is initiated by referral and / or screening of individuals or groups for nutrition risk factors.

(3) The licensee systematically obtains, verifies and interprets data in order to make decisions about the nature and cause of nutrition-related problems.

(4) Nutrition assessment is an ongoing, dynamic process that involves not only initial data collection, but also reassessment and analysis of client or community needs.



(5) Problems that require consultation with or referral to another provider are recognized.

(6) Documentation and communication of nutritional assessment shall be complete, relevant, accurate and timely.

(B) The licensee determines a nutrition diagnosis to identify and label specific nutrition problem(s) that the dietitian is responsible for treating.

(1) "Nutrition diagnosis" is the identification and labeling that describes an actual occurrence, risk of, or potential for developing, a nutritional problem that dietetics practitioners are responsible for treating independently within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code.

(2) The nutrition diagnosis is not a medical diagnosis. It results following nutrition assessment and the clustering, analysis, and synthesis of data and demonstrates a link to determining goals for outcomes, selecting appropriate interventions and tracking progress in attaining expected outcomes.

(3) Documentation of nutrition diagnosis(es) shall be relevant, accurate and timely and shall be revised and updated as additional assessment data become available.

(C) Within the scope of practice of dietetics as defined in section 4759.01 of the Revised Code, the licensee utilizes nutrition intervention as the third step in the nutrition care process to identify and implement appropriate, purposefully planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition or aspect of health status for an individual, target group, or the community at large.

(1) "Nutrition Intervention" is a specific set of activities and associated materials used to address the problem; purposely planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition, or aspect of health status for an individual, target group, or the community at large. It involves selection, planning, and implementing appropriate actions to meet patient / client / group's nutrition needs.



(2) "Intervention planning" involves prioritizing the nutrition diagnoses, conferring with the patient / client / and / or others, reviewing practice guides and policies, and setting goals and defining the specific nutrition intervention strategy.

(3) "Implementation of the nutrition intervention" is the action phase that includes carrying out and communicating the plan of care, continuing data collection, and revising the nutrition intervention strategy, as warranted, based on the patient / client response.

(4) The licensee performs the interventions or assigns, recommends or refers the nutrition care that other competent practitioners may provide in accordance with federal, state and local laws and regulations.

(D) The licensee monitors and evaluates indicators and outcomes data directly related to the nutrition diagnosis, goals and intervention strategies to determine the progress made in achieving desired outcomes of nutrition care and whether planned interventions should be continued or revised.

(1) "Nutrition monitoring and evaluation" is the fourth step of the nutrition care process. Nutrition monitoring specifically refers to the review and measurement of the patient / client / group's status at a scheduled (preplanned) follow-up point with regard to the nutrition diagnosis, intervention plans / goals and outcomes. Evaluation is the systematic comparison of current findings with previous status, intervention goals, or a reference standard. Monitoring and evaluation use selected outcome indicators (markers) that are relevant to the patient / client / group's defined needs, nutrition diagnosis, nutrition goals, and disease state.

(2) The licensee uses standard nutrition care outcome indicator(s) to measure outcomes.

(3) Monitoring data should be compared with the nutrition prescription / goals / or reference standards to evaluate impact of the sum of all interventions on overall patient / client health outcomes.

(4) Documentation of nutrition monitoring and evaluation shall be comprehensive, specific, accurate, relevant and timely and reflect the indicators measured, results and method for obtaining measurement. The criteria to which the indicator is compared and factors facilitating or hampering



progress should be referenced in support of positive or negative outcomes. Plans for nutrition care, monitoring and follow-up or discharge should be included.

(5) Ensures communication of nutrition plan of care and transfer of nutrition-related data between care settings as needed.