

Clinical Practice Residency - The Cancer Institute of New Jersey (CINY) University of Medicine and Denistry of New Jersey (UMDNJ) (March – Mai 2009)

Project: 400

Caroline Kiss, St.- Alban-Vorstadt 55, 4052 Basel

The clinical residency is part of the Doctorate in Clinical Nutrition (DCN), a graduate program for registered dietitians (RDs). The clinical practice residency was a 350-hours full-time (10 weeks based on a 35 hr/wk) schedule in-depth supervised advanced practice experience. The goal was to develop the student's competence within specified practice areas to achieve advanced practice skills. My focus areas were oncology nutrition and nutrition support in critically ill patients. My current experience in oncology was limited to head and neck cancer, and with critically ill patients limited to a few years, to limited time resources, and in one center only.

The Cancer Institute of New Jersey (CINY)

The CINJ is one of the United States's 40 National Cancer Institute-designated Comprehensive Cancer Centers and the only one in New Jersey. Patients of all cancer types in different stages (pre-treatment, post-operative, curative treatment, palliative treatment /phase I trials, post-treatment) with all the available therapies such as radiotherapy, chemotherapy incl. cytotoxic therapies, hormonal therapies, and biotherapies were seen by the dietitian as required.

I got the opportunity to visit the patients with my supervisor each day to advice patients on their nutritional problems, while they were receiving chemotherapy or in their follow-up visit after the treatment. I learned how to use the Patient Generated-Subjective Global Assessment (PG-SGA) tool, and how to perform the nutrition focused assessment in oncology patients. The specific nutritional problems or problems that required nutritional interventions were: Neutrophenia (food safety), anorexia (small meals/high energy/oral supplements), nausea (medication adjustments), constipation (medication adjustments), diarrhea (lactose, pancreas enzymes, medication adjustment), edema (low sodium), low income (patient assistance program, referral to social worker), dietary supplements (recommend or advice against), or healthy eating (secondary prevention).

University of Medicine and Denistry of New Jersey (UMDNJ)

The UMDNJ is designed as a center of excellence for level I trauma, and a liver transplant center. The number of beds was 300; of which 59 were in the intensive care unit (medical, surgical/trauma, cardiac, cardio-thoractic, neurosurgery, pediatric, neonatal). Twenty registered dietitians from different cultural backgrounds worked at the nutrition department.

Every patient in the hospital was assessed by the dietitian within 48 hours of admission and followed-up every two to three days. A nutrition-focused assessment was performed, the nutritional risk level was determined and a nutrition care plan was developed, implemented and monitored. I followed the RDs covering the intensive care unit, and assessed the patients under the supervision of the responsible dietitian.

Conclusions

- Residency placement abroad was a great way of experiencing and understanding the US way of life, the health care system, and its problems.
- The exposure was invaluable for adapting to another environments and work situations.
- I was able to expanded nutrition subject-specific knowledge.
- Getting outside the comfort zone and daily routine is inspiring and eye-opening.
- An experience and friends I will always remember.
- A step into global dietetics network.