

CDR Dietetic Technician, Registered (DTR) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

SAMPLE

- 1. What is the main purpose of conducting a nutrition assessment?**
 - A. To evaluate physical fitness**
 - B. To determine food safety practices**
 - C. To identify nutrition-related problems and formulate a plan**
 - D. To assess cooking skills**
- 2. What can result from effective portion control in eating habits?**
 - A. Increased food cravings**
 - B. Reduced caloric intake**
 - C. Improved weight gain**
 - D. Heightened appetite**
- 3. What is the main function of carbohydrates in the body?**
 - A. To promote muscle growth**
 - B. To provide energy**
 - C. To aid in digestion**
 - D. To protect cells from damage**
- 4. What is the percent weight change for a female who weighs 160 lb with a usual body weight of 180 lb?**
 - A. 11%**
 - B. 78%**
 - C. 86%**
 - D. 89%**
- 5. Which of the following is a critical control point at all stages of food processing and service in a cook-chill system?**
 - A. Use of clean pans and dishes**
 - B. Rapid cooling from 140°F to 40°F**
 - C. Rapid reheating of foods to 140°F for service**
 - D. Good personal hygiene for food handlers throughout the process**

- 6. Which of the following menus would be appropriate for a patient who is on a low potassium diet?**
- A. Roast beef, boiled potatoes, and canned apricots**
 - B. Meat loaf, sweet potatoes, creamed peas, and applesauce**
 - C. Pork chops, seasoned rice, acorn squash, and canned pears**
 - D. Baked chicken, buttered noodles, green beans, and canned peaches**
- 7. How many grams of protein did a patient consume based on a calorie count?**
- A. 19**
 - B. 21**
 - C. 22**
 - D. 36**
- 8. Which of the following is a feature of portion control?**
- A. Encouraging large servings**
 - B. Recommended meal planning**
 - C. Focus on variety over quantity**
 - D. Serving unlimited quantities**
- 9. What is the most practical method for monitoring food intake of an underweight patient to determine the necessity of tube feeding?**
- A. Observe the patient's eating behavior during mealtimes.**
 - B. Institute a calorie count with the assistance of the nursing service.**
 - C. Obtain a 24-hour recall of food intake from the patient each morning.**
 - D. Observe plate waste after the patient's tray is removed from the room.**
- 10. Using the Mifflin-St. Jeor equation, what is the basal energy requirement for a 65-year-old woman who is 170 cm tall and weighs 62 kg?**
- A. 1,200 kcal/day**
 - B. 1,500 kcal/day**
 - C. 1,250 kcal/day**
 - D. 1,550 kcal/day**

Answers

SAMPLE

1. C
2. B
3. B
4. A
5. B
6. D
7. B
8. C
9. B
10. A

SAMPLE

Explanations

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1. What is the main purpose of conducting a nutrition assessment?

- A. To evaluate physical fitness**
- B. To determine food safety practices**
- C. To identify nutrition-related problems and formulate a plan**
- D. To assess cooking skills**

The primary purpose of conducting a nutrition assessment is to identify nutrition-related problems and to formulate a plan to address those issues. This process involves evaluating an individual's dietary habits, nutritional status, and any existing medical conditions that may affect their nutrition. By assessing these factors, nutrition professionals can develop personalized recommendations that promote better health outcomes, manage chronic diseases, or enhance performance in various populations, such as athletes or those undergoing medical treatments. In addition to identifying potential nutritional deficiencies or excesses, the assessment informs the development of tailored food plans, nutritional education, and interventions that can improve an individual's overall well-being. This comprehensive approach is essential for ensuring that nutritional interventions are effective and appropriate for the individual's unique circumstances and goals.

2. What can result from effective portion control in eating habits?

- A. Increased food cravings**
- B. Reduced caloric intake**
- C. Improved weight gain**
- D. Heightened appetite**

Effective portion control in eating habits leads to reduced caloric intake. By managing the size of portions consumed, individuals can monitor the number of calories they ingest at each meal, making it easier to maintain or achieve a healthy weight. This practice helps prevent overeating and allows for a more balanced diet, as it encourages the consumption of appropriate amounts of various food groups without excess. When portions are controlled, it is also easier to focus on the nutritional quality of the food rather than simply the quantity, promoting healthier choices and improving overall dietary quality. This strategy is beneficial for those looking to manage their weight effectively and can support various health goals, such as improving metabolic health and reducing the risk of chronic diseases.

3. What is the main function of carbohydrates in the body?

- A. To promote muscle growth
- B. To provide energy**
- C. To aid in digestion
- D. To protect cells from damage

The primary function of carbohydrates in the body is to provide energy. Carbohydrates are one of the three macronutrients, alongside proteins and fats, and are the body's preferred source of fuel, particularly for the brain and during physical activity. When consumed, carbohydrates are broken down into glucose, which is then utilized by cells for energy. This process is essential for maintaining normal bodily functions and supporting various activities, from simple daily tasks to intense exercise. While carbohydrates play a role in digestion through dietary fiber, which helps regulate bowel movements, their main function is energy provision. Understanding the significance of carbohydrates in energy metabolism helps highlight the importance of including them as part of a balanced diet to support overall health and well-being.

4. What is the percent weight change for a female who weighs 160 lb with a usual body weight of 180 lb?

- A. 11%**
- B. 78%
- C. 86%
- D. 89%

To find the percent weight change for the individual, you can use the formula:
$$\text{Percent Weight Change} = \frac{\text{Usual Weight} - \text{Current Weight}}{\text{Usual Weight}} \times 100$$
 In this case, the usual body weight is 180 lbs, and the current weight is 160 lbs. Plugging the values into the formula gives:
$$\text{Percent Weight Change} = \frac{180 - 160}{180} \times 100$$

$$= \frac{20}{180} \times 100 \approx 11.11\%$$
 Rounding gives a percent weight change of approximately 11%. This calculation shows that the individual has experienced a weight loss from their usual body weight, indicating that the change is both significant and clinically relevant. Understanding this calculation is important for health professionals, as percent weight change can be a key indicator of a patient's nutritional status and potential health risks. Monitoring weight changes is essential in dietetics to provide appropriate interventions for underweight or overweight individuals.

5. Which of the following is a critical control point at all stages of food processing and service in a cook-chill system?

A. Use of clean pans and dishes

B. Rapid cooling from 140°F to 40°F

C. Rapid reheating of foods to 140°F for service

D. Good personal hygiene for food handlers throughout the process

In a cook-chill system, the rapid cooling from 140°F to 40°F is crucial for controlling bacterial growth, ensuring food safety throughout the processing and service stages. This temperature range is particularly important because it falls within the "danger zone" (typically 40°F to 140°F) where bacteria can proliferate quickly. By cooling food rapidly from the cooking temperature to a safe storage temperature, the risk of foodborne illness is significantly reduced. Effective cooling methods, such as using ice baths or blast chillers, help ensure that food passes through this temperature zone quickly, thereby minimizing the time it spends within the danger zone. This control point is particularly critical in a cook-chill system, where food is prepared, cooled, and then reheated before serving. While good personal hygiene for food handlers and the use of clean pans and dishes are important for overall food safety, they do not directly address temperature control in the same way that cooling does. Similarly, rapid reheating of foods is essential to ensure food reaches a safe serving temperature, but it is not a control point across all stages of the cook-chill process. Thus, rapid cooling is the decisive critical control point that helps ensure food safety from cooking through to service.

6. Which of the following menus would be appropriate for a patient who is on a low potassium diet?

A. Roast beef, boiled potatoes, and canned apricots

B. Meat loaf, sweet potatoes, creamed peas, and applesauce

C. Pork chops, seasoned rice, acorn squash, and canned pears

D. Baked chicken, buttered noodles, green beans, and canned peaches

The most appropriate menu for a patient on a low potassium diet is the one featuring baked chicken, buttered noodles, green beans, and canned peaches. This option is suitable because it includes foods that are generally lower in potassium compared to other choices. When managing a low potassium diet, it's essential to select foods that minimize the risk of potassium overload. Poultry, such as chicken, provides a good protein source without significantly increasing potassium levels. Additionally, buttered noodles do not contain potassium-rich ingredients, making them a safe carbohydrate choice. Green beans are relatively low in potassium compared to other vegetables, and canned peaches, particularly in light syrup, can be a lower potassium fruit option if drained properly. Focusing on the other menu options reveals that they include items that are typically higher in potassium. For example, roasted potatoes, sweet potatoes, and acorn squash are all known to have elevated potassium levels, which could compromise the patient's dietary restrictions. Canned apricots and creamed peas also contribute to a higher potassium intake, thereby making them less appropriate for someone requiring a low potassium diet. Therefore, the selected menu aligns better with the dietary needs of the patient by offering more potassium-friendly foods while still providing a balanced meal.

7. How many grams of protein did a patient consume based on a calorie count?

- A. 19
- B. 21**
- C. 22
- D. 36

To determine the grams of protein a patient consumed based on a calorie count, it's essential to understand the relationship between calories and protein. Each gram of protein provides approximately 4 calories. Therefore, to calculate the grams of protein consumed, one would take the total calories from protein and divide that figure by 4. If a patient consumed a total of 84 calories from protein (as an example calculation), the calculation to find the protein in grams would be: $84 \text{ calories} \div 4 \text{ calories/gram} = 21$ grams of protein. This calculation aligns with the correct answer, reflecting the patient's protein intake accurately. By following this procedure, you can assess the patient's protein consumption based on calorie intake accurately.

8. Which of the following is a feature of portion control?

- A. Encouraging large servings
- B. Recommended meal planning
- C. Focus on variety over quantity**
- D. Serving unlimited quantities

The feature of portion control that stands out is the focus on variety over quantity. This principle emphasizes the importance of balancing different food groups and nutrients instead of just concentrating on the amount of food served. By promoting variety, individuals can enjoy a range of flavors and textures while still maintaining mindful eating practices that help manage their overall caloric intake. This approach supports nutritional adequacy while also fostering a healthier relationship with food, encouraging individuals to explore different foods rather than simply consuming large portions of a few items. In contrast, the other options do not align with effective portion control strategies. Encouraging large servings contradicts the very idea of portion control, which aims to regulate intake sizes. Recommended meal planning is a beneficial practice, but it does not inherently speak to portion control unless specifically addressing serving sizes or balancing nutrients. Serving unlimited quantities is the antithesis of portion control, as it would lead to overeating rather than mindfulness about consumption.

9. What is the most practical method for monitoring food intake of an underweight patient to determine the necessity of tube feeding?

A. Observe the patient's eating behavior during mealtimes.

B. Institute a calorie count with the assistance of the nursing service.

C. Obtain a 24-hour recall of food intake from the patient each morning.

D. Observe plate waste after the patient's tray is removed from the room.

Instituting a calorie count with the assistance of the nursing service is the most practical method for monitoring the food intake of an underweight patient when assessing the necessity of tube feeding. This method provides a detailed and quantifiable assessment of the patient's actual caloric intake over a period of time, which can be crucial in determining their nutritional needs. Caloric counts involve systematically documenting the amount of food and beverages consumed during mealtime, and this process can be accurately carried out with the support of nursing staff. The compiled data from calorie counts can reveal whether the patient is meeting their caloric needs or if there is a significant deficit that may warrant intervention, such as tube feeding. This approach is more objective than simply observing eating behaviors or plate waste, as it provides hard data that can help health professionals make informed decisions regarding the patient's nutritional support. It also allows for ongoing assessment, which is necessary in managing the care of underweight patients effectively.

10. Using the Mifflin-St. Jeor equation, what is the basal energy requirement for a 65-year-old woman who is 170 cm tall and weighs 62 kg?

A. 1,200 kcal/day

B. 1,500 kcal/day

C. 1,250 kcal/day

D. 1,550 kcal/day

To calculate the basal energy requirement (BEE) using the Mifflin-St. Jeor equation for a woman, the formula is: $BEE = (10 \times \text{weight in kg}) + (6.25 \times \text{height in cm}) - (5 \times \text{age in years}) - 161$. Substituting the woman's details into the equation: - Weight: 62 kg - Height: 170 cm - Age: 65 years. The calculation would proceed as follows: 1. Calculate the weight component: $10 \times 62 = 620$ 2. Calculate the height component: $6.25 \times 170 = 1062.5$ 3. Calculate the age component: $5 \times 65 = 325$ 4. Putting it all together: $620 + 1062.5 - 325 - 161 = 1196.5$ kcal/day. When rounding the result, it is typical to arrive at approximately 1,200 kcal/day. Therefore, this value reflects the basal energy expenditure accurately for the individual based on her identified characteristics. This understanding of the equation and the components confirms the answer to be consistent with the data from the question, aligning with option A as the basal energy requirement.