

Medical Nutrition Therapy (MNT) 2.3 Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

Copyright © 2025 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain from reliable sources accurate, complete, and timely information about this product.

SAMPLE

Questions

SAMPLE

- 1. What is the main purpose of using a tube in enteral feeding?**
 - A. To ensure oral intake**
 - B. To provide nutrients directly to the stomach or intestines**
 - C. To avoid the need for parental nutrition**
 - D. To enhance taste preference in feeding**
- 2. As symptoms progress in severity for individuals with progressive neurological disorders, what nutritional issue is likely to emerge?**
 - A. An increased ability to meet nutritional needs orally**
 - B. A potential decrease in food and fluid intake**
 - C. An improvement in chewing and swallowing ability**
 - D. Increased interest in food preparation**
- 3. Why are liquids thickened for individuals with dysphagia?**
 - A. To enhance flavor and aroma**
 - B. To prevent liquids from entering the lungs**
 - C. To increase calorie intake**
 - D. To make swallowing easier without causing choking**
- 4. What is one important aspect of nutrition intervention for patients with Alzheimer's Disease?**
 - A. Limiting fluid intake**
 - B. Maximizing intake through texture modification**
 - C. Providing three large meals a day**
 - D. Ensuring no external cues during mealtimes**
- 5. What method can be used to diagnose dysphagia?**
 - A. Videofluoroscopic swallowing study (VFSS)**
 - B. Cardiovascular assessment**
 - C. Psychological evaluation**
 - D. Electrocardiogram**

- 6. What protocol is often followed for the classic Keto diet initiation?**
- A. Immediate start without fasting**
 - B. 5-day initiation with initial fasting**
 - C. Gradual increase of carbohydrates**
 - D. Only liquid meals for the first week**
- 7. In a person with Guillain-Barre Syndrome, what nutrition-related concern might arise?**
- A. Increased energy needs**
 - B. Decreased protein absorption**
 - C. Severe vitamin deficiency**
 - D. Excessive thirst**
- 8. What is a common nutrition-related issue faced by patients with Parkinson's Disease during meals?**
- A. Increased appetite**
 - B. Self-feeding problems**
 - C. High fiber intake**
 - D. Allergy to gluten**
- 9. What is a basic dietary strategy for individuals taking insulin?**
- A. To eat fewer carbohydrates**
 - B. To learn how to count carbohydrates**
 - C. To avoid starchy foods entirely**
 - D. To consume protein-rich foods only**
- 10. What is the primary medical treatment for Parkinson's Disease?**
- A. Insulin therapy**
 - B. Levodopa (L-dopa)**
 - C. Surgery**
 - D. Radiation therapy**

Answers

SAMPLE

- 1. B**
- 2. B**
- 3. B**
- 4. B**
- 5. A**
- 6. B**
- 7. A**
- 8. B**
- 9. B**
- 10. B**

SAMPLE

Explanations

SAMPLE

1. What is the main purpose of using a tube in enteral feeding?

- A. To ensure oral intake**
- B. To provide nutrients directly to the stomach or intestines**
- C. To avoid the need for parental nutrition**
- D. To enhance taste preference in feeding**

The primary purpose of using a tube in enteral feeding is to provide nutrients directly to the stomach or intestines. This method of feeding is essential for individuals who cannot consume food orally due to various medical conditions, such as swallowing difficulties, unconsciousness, or certain gastrointestinal disorders. By utilizing a tube, healthcare providers can deliver a precise and controlled amount of nutrition that bypasses the normal eating process, ensuring that the patient receives the necessary calories, protein, vitamins, and minerals needed for recovery or maintenance of health. This direct delivery system also allows for specific formulations to be tailored to meet individual nutritional needs, increasing the efficiency of nutrient absorption and supporting better health outcomes.

2. As symptoms progress in severity for individuals with progressive neurological disorders, what nutritional issue is likely to emerge?

- A. An increased ability to meet nutritional needs orally**
- B. A potential decrease in food and fluid intake**
- C. An improvement in chewing and swallowing ability**
- D. Increased interest in food preparation**

In progressive neurological disorders, individuals often experience a decline in motor function and cognitive abilities, which can significantly impact their ability to consume food and fluids. As symptoms worsen, it becomes increasingly challenging for these individuals to maintain their normal activities of daily living, including eating and drinking. One of the main nutritional issues that emerge as these disorders progress is a potential decrease in food and fluid intake. Factors such as difficulty swallowing (dysphagia), impaired chewing, or even lack of appetite contribute to this decline. Additionally, neurological complications can lead to a decreased ability to coordinate the necessary movements for eating, ultimately resulting in unintended weight loss and dehydration. This makes closely monitoring and addressing nutritional needs critical in managing the health of individuals with these conditions. The other options suggest improvements or changes that are less likely to be associated with the progression of neurological disorders. For example, as the disorder advances, individuals typically do not have an increased ability to meet nutritional needs orally, nor do they show improvement in chewing and swallowing abilities. Interest in food preparation also tends to diminish due to the challenges faced in performing such tasks. Overall, option B correctly identifies the significant nutritional issue that arises as symptoms of progressive neurological disorders worsen.

3. Why are liquids thickened for individuals with dysphagia?

- A. To enhance flavor and aroma
- B. To prevent liquids from entering the lungs**
- C. To increase calorie intake
- D. To make swallowing easier without causing choking

Thickening liquids for individuals with dysphagia is primarily done to make swallowing easier and safer, which directly connects to preventing aspiration. When liquids are thickened, they flow more slowly and can be controlled better during swallowing, reducing the risk of the liquid entering the lungs. This is particularly important for individuals who have difficulty coordinating their swallowing reflexes or who might not be able to protect their airway adequately. While thickened liquids can also impact the overall experience of eating and drinking, such as improving flavor or making them more palatable, the critical medical purpose is to ensure safety and prevent complications related to aspiration pneumonia, which can arise from poorly managed swallowing issues. The primary goal of thickening liquids is thus to support the swallowing process effectively, aiming to provide a safer eating environment for individuals with dysphagia.

4. What is one important aspect of nutrition intervention for patients with Alzheimer's Disease?

- A. Limiting fluid intake
- B. Maximizing intake through texture modification**
- C. Providing three large meals a day
- D. Ensuring no external cues during mealtimes

Maximizing intake through texture modification is crucial for patients with Alzheimer's Disease because cognitive impairments can affect an individual's ability to chew and swallow safely, leading to difficulties in eating and potentially resulting in malnutrition. As the disease progresses, some patients may exhibit decreased appetite or may forget how to eat, making the presentation and texture of food critically important. Adapting the texture of food can help enhance palatability and ease of consumption, encouraging patients to consume adequate nutrition. For instance, providing softer foods or pureed options can help those who struggle with chewing or swallowing. This intervention not only supports nutritional status but also helps to provide a sense of normalcy at mealtimes, promoting dignity and comfort during eating. Therefore, focusing on texture modification can significantly improve the overall dietary intake and quality of life for individuals with Alzheimer's Disease.

5. What method can be used to diagnose dysphagia?

A. Videofluoroscopic swallowing study (VFSS)

B. Cardiovascular assessment

C. Psychological evaluation

D. Electrocardiogram

The videofluoroscopic swallowing study (VFSS) is a specialized imaging technique used to assess swallowing function and can directly visualize the process of swallowing in real time. During the VFSS, a patient swallows food or liquid mixed with a contrast agent while X-ray images are taken. This allows healthcare professionals to evaluate the anatomy and mechanics involved in swallowing, identify any abnormalities or difficulties, and assess the effectiveness and safety of swallowing. The information gathered from this study helps in accurately diagnosing dysphagia, guiding treatment, and making dietary recommendations. Other methods listed do not pertain to swallowing evaluation. Cardiovascular assessment focuses on heart conditions, psychological evaluation assesses mental health, and an electrocardiogram measures heart rhythm and electrical activity, none of which directly diagnose swallowing disorders. Therefore, the VFSS is the most appropriate and specific method for diagnosing dysphagia.

6. What protocol is often followed for the classic Keto diet initiation?

A. Immediate start without fasting

B. 5-day initiation with initial fasting

C. Gradual increase of carbohydrates

D. Only liquid meals for the first week

The classic ketogenic diet (Keto diet) is often initiated with a structured protocol that typically involves an initial fasting period followed by a carefully planned reintroduction of food. This approach helps carbohydrates to be significantly restricted while promoting ketosis, where the body shifts from using glucose as its primary fuel source to using fat. The 5-day initiation period with initial fasting allows for a metabolic shift to occur, helping to deplete glycogen stores and switch the body's main energy source to fats. This can enhance the effectiveness of the ketogenic diet from the outset, accelerating the onset of ketosis and its associated benefits. By the end of this period, individuals can begin to consume a diet that is high in fats and low in carbohydrates, maintaining ketosis effectively. In contrast, other choices do not align with the traditional approach to initiating a ketogenic diet. Starting immediately without fasting could lead to an inadequate transition into ketosis. Gradually increasing carbohydrates is contrary to the ketogenic principle, which requires strict carbohydrate reduction. Relying solely on liquid meals for the first week also does not incorporate solid foods, which can provide essential nutrients and satiety that are important for long-term adherence to the diet.

7. In a person with Guillain-Barre Syndrome, what nutrition-related concern might arise?

- A. Increased energy needs**
- B. Decreased protein absorption**
- C. Severe vitamin deficiency**
- D. Excessive thirst**

In the context of Guillain-Barre Syndrome (GBS), increased energy needs is a notable concern due to several factors associated with the condition. GBS is an autoimmune disorder characterized by the acute onset of muscle weakness and paralysis, which can lead to increased energy expenditure. This increased need can stem from the body's efforts to repair nerve damage and the physiological stress associated with acute illness. As patients may experience muscle wasting due to immobilization and decreased mobility, proper nutritional support becomes critical to prevent further complications and promote recovery. The need for adequate caloric intake not only addresses energy requirements but also supports muscle maintenance and overall recovery. Therefore, when managing a patient with GBS, healthcare professionals must assess and potentially adjust dietary plans to meet these increased energy needs appropriately.

8. What is a common nutrition-related issue faced by patients with Parkinson's Disease during meals?

- A. Increased appetite**
- B. Self-feeding problems**
- C. High fiber intake**
- D. Allergy to gluten**

In patients with Parkinson's Disease, self-feeding problems are a common nutrition-related issue due to the motor symptoms associated with the condition. Parkinson's can lead to tremors, stiffness, and bradykinesia (slowness of movement), which can significantly impact a person's ability to manipulate utensils effectively. These motor difficulties can make it challenging for patients to eat independently, often leading to frustration or the need for assistance during meals. Additionally, as the disease progresses, coordination and fine motor skills may further decline, exacerbating self-feeding challenges. This can affect not only their nutritional intake but also their overall quality of life and independence. Adequate support and strategies to assist these patients can help them overcome these obstacles during meal times. The other options, such as increased appetite, high fiber intake, or allergy to gluten, are not typically associated with Parkinson's Disease in the same way. While some patients may experience changes in appetite, it is not as universally prevalent as self-feeding difficulties. High fiber intake is usually encouraged for general health and is not specifically problematic for patients with Parkinson's. Furthermore, gluten allergies are not directly linked to Parkinson's Disease, making them less relevant to the context of nutrition-related issues in these patients.

9. What is a basic dietary strategy for individuals taking insulin?

- A. To eat fewer carbohydrates**
- B. To learn how to count carbohydrates**
- C. To avoid starchy foods entirely**
- D. To consume protein-rich foods only**

Learning how to count carbohydrates is a fundamental dietary strategy for individuals taking insulin because it directly correlates with the management of blood glucose levels. Carbohydrates are known to have the most significant effect on blood sugar after they are consumed. By counting carbohydrates, individuals can better anticipate and match their insulin doses to the amount of carbohydrates they consume, facilitating more stable blood glucose control. Counting carbohydrates allows for flexibility in food choices and portion sizes, enabling individuals to maintain a varied and balanced diet while managing their diabetes. This approach helps them to understand how different foods will impact their blood glucose levels and how to adjust their insulin accordingly. In contrast, simply eating fewer carbohydrates or avoiding starchy foods entirely does not allow for an understanding of how to balance food intake with insulin needs. While protein-rich foods are an important part of a balanced diet, relying solely on them does not address the necessity of carbohydrate management. Therefore, carbohydrate counting is a more effective and comprehensive method for insulin management.

10. What is the primary medical treatment for Parkinson's Disease?

- A. Insulin therapy**
- B. Levodopa (L-dopa)**
- C. Surgery**
- D. Radiation therapy**

Levodopa (L-dopa) is the primary medical treatment for Parkinson's Disease as it effectively addresses the core symptoms of the condition. Parkinson's Disease is characterized by a deficiency of dopamine, a neurotransmitter crucial for regulating movement. Levodopa serves as a precursor to dopamine, meaning that it is converted into dopamine in the brain, thereby helping to alleviate symptoms such as tremors, stiffness, and bradykinesia (slowness of movement). This treatment has been a cornerstone of Parkinson's management since its introduction and has shown significant efficacy in improving the quality of life for patients. While other therapies may support treatment or be utilized in specific cases, Levodopa remains the most comprehensive approach for symptom control in Parkinson's Disease. The other options provided do not align with established treatment protocols for Parkinson's. Insulin therapy is primarily used for diabetes management, surgery might be considered in advanced or specific scenarios but is not a first-line treatment, and radiation therapy is used for cancer treatment rather than neurodegenerative diseases like Parkinson's. Thus, Levodopa stands out as the mainstay of therapy for this condition.