



Handbook for Candidates

1170 Emerald Sound Blvd

Oak Point, TX 75068

www.cbcn.us

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DEFINITION OF A DCBCN

A Diplomate of the Chiropractic Board of Clinical Nutrition (DCBCN) is a licensed chiropractic physician who has successfully completed a 300 hour post doctoral program in clinical nutrition or equivalent. Clinical Nutrition is defined as the prevention and treatment of disease using nutritional therapeutics. The program must be approved by the CBCN and cover the items that will be tested in the certifying examination.

The Diplomate devotes a significant portion of their career work to nutrition in a patient, research and/or teaching setting and can coordinate nutrition services with other health care professionals. The Diplomate has satisfied the requirements of and is certified by the Chiropractic Board of Clinical Nutrition.

ROLE DELINEATION

Role Description for a Diplomate of the Chiropractic Board of Clinical Nutrition (DCBCN)

The Doctor of Chiropractic, who is a Diplomate of the Chiropractic Board of Clinical Nutrition (DCBCN), possesses the knowledge and skills necessary to practice clinical nutrition.

The DCBCN is a portal of entry, primary health care, practitioner who has received additional education and training in nutritional assessment, diagnosis, treatment, and case management, for the promotion of individual and public health well-being.

The responsibilities of a DCBCN may include, but are not limited to:

- Obtaining a relevant case history and review of systems.
- Performing appropriate physical, neuromusculoskeletal, nutritional, and chiropractic evaluations.
- Ordering, performing, and/or reviewing diagnostic imaging and interpreting results.
- Ordering, performing, and/or reviewing clinical laboratory tests and special studies and interpreting results.
- Correlating clinical findings to arrive at a clinical impression and/or diagnosis.
- Applying therapeutic nutritional recommendations including but not limited to: diets and dietary interventions, and micro and/or macro levels of vitamins, minerals, trace elements, enzymes, amino acids, fatty acids, herbs, glandulars, natural hormones, homeopathics, phytochemicals, nutraceuticals, and medical foods.
- Maintaining appropriate documentation for the practice of clinical nutrition.
- Promoting healthy lifestyles, public health and wellness, and the prevention of disease.
- Managing patient care safely and effectively.

WHAT IS CERTIFICATION

Board certification in clinical nutrition provides formal recognition of nutrition knowledge by Chiropractic Diplomates. It is a voluntary certification, by examination, focusing on individual competence in this specialized practice area. States vary as to whether and how a Diplomate may hold themselves out as a specialist so the CBCN recommends each Diplomate check with their licensing board on this issue.

WHAT CERTIFICATION MEANS

CERTIFICATION IS A MEANS TO PROTECT THE PUBLIC AND PROMOTE DELIVERY OF SAFE, EFFECTIVE CLINICAL NUTRITION SERVICES FROM QUALIFIED DIPLOMATES BY:

- A. Formally recognizing those doctors who have met the eligibility requirements and successfully passed the examination.
- B. Establishing and measuring the level of competency required for Diplomate certification.
- C. Providing a standard of knowledge for Diplomate certification thus helping the public, 3rd party payors, organizations and other health care professionals in assessing the DCBCN.
- D. Encouraging continued professional growth in the practice of clinical nutrition through annual recertification.

ELIGIBILITY REQUIREMENTS

1. The applicant must hold the degree of Doctor of Chiropractic from a CCE accredited college (USA) or its equivalent.
2. The applicant must show evidence of having successfully completed a post doctoral program in nutrition of at least three hundred (300) credit hours, part of which may be a Master's Degree in nutrition, from a chiropractic college or university, institution, foundation or agency whose program is approved by an accrediting agency recognized by the U.S. Department of Education, or an agency having a reciprocal agreement with the recognized agency. The topics of study required are delineated in the by-laws of the CBCN. The entity from which the applicant has completed his/her course of study must certify to the Board that the applicant has satisfactorily completed three hundred (300) credit hours of post doctoral instruction in nutrition.
3. The applicant must possess and show a license or registration to practice chiropractic for a minimum of 2 years and be in good standing with the respective licensing/registration agency.

4. The candidate must submit an application, on a form specified by the Board, on or before the Board designated deadline.
5. The candidate must submit:
 - A. Official transcript directly from the institution where the post doctoral nutrition education was completed. If education is other than a 300 hour nutrition diplomate program, a detailed course syllabus should accompany the transcript.
 - B. 2 written case histories from actual patient files in the format provided by the CBCN along with the required case history attestation.
6. The candidate must submit non-refundable fees set by the Board.

ADMINISTRATION OF EXAMINATION

This certification program is sponsored by the Chiropractic Board of Clinical Nutrition (CBCN). The 200 question written examination for the CBCN is developed jointly with the National Board of Chiropractic Examiners (NBCE) and administered electronically by American College Testing (ACT) at ACT testing centers.

Questions concerning the content of the examination should be directed to CBCN at:

1170 Emerald Sound Blvd.

Oak Point, TX 75068

Website: www.cbcn.us

Obtaining authorization to take the CBCN Diplomate written examination at a test site will be through the CBCN. Candidates authorized by CBCN will receive an email from ACT. The email will include the web address to create their exam reservation, all contact information, and their log-in ID and PIN numbers. Exam dates and times may be rescheduled within the testing period based on availability. Dates outside of the testing period are not available.

NOTE: In the event of an emergency or administrative irregularity that may affect score reporting, the CBCN reserves the right to make adjustments in examination administration procedures, to withhold the reporting of a score, and to order the re-administration of an examination. An emergency or administrative irregularity may include, but is not limited, any natural disaster (flood, tornado, hurricane, earthquake, fire), power failure, facility equipment breakdown or other emergency that in the opinion of the CBCN and/or testing agency may affect the validity of the examination score. The final decision on examination cancellations is by the CBCN.

TESTING SITES

The CBCN Diplomate written examination will be available at local testing sites by American College Testing. Questions pertaining to administration of the examination should be directed to American College Testing at:

Website: www.act.org

Telephone: 319-337-1000

EXAMINATION DISQUALIFICATION

An examinee can be disqualified from taking or continuing to take an examination or from receiving scores from an examination taken if the CBCN, the NBCE or testing center personnel concludes that:

1. The examinee has provided false or misleading information or failed to provide material information on his or her application;
2. The examinee has taken an examination for another person or another person takes an examination in the examinee's place;
3. The examinee has cheated, based either upon observation or statistical analyses of answers;
4. The examinee has engaged in any act or conduct that has jeopardized or could jeopardize the security or integrity of CBCN examinations, including (but not limited to) the copying, removal or reproduction of any portion of the examination, including the memorization of questions and answers for possible disclosure to any other person at any time;
5. The examinee has failed to adhere to instructions given at the examination administration;
6. The examinee has engaged in any form of communication during an examination in which examination information has been given to or obtained from another person or signaling device, including papers, phones, texts or other reference materials;
7. The examinee has engaged in any unethical action which gave him/her or any other examinee an advantage he or she would otherwise not have had.

NOTE: The CBCN may annotate transcripts of examinees who engage in any of the aforementioned behaviors.

APPLICATION PROCEDURE

The CBCN test application is available on the CBCN web site at www.cbcn.us. Applicants are cautioned to read and follow instructions carefully when completing the application forms. Any of the following will result in rejection of the application:

1. An illegible, improperly completed, or incomplete application (including all required authorizations, attestation forms, transcripts, and case histories)
2. An application received by the CBCN after the published deadline
3. An application submitted without correct fees
4. An application lacking the proper notary seal or stamp
5. A missing or unofficial transcript
6. No syllabus for courses other than the 300 hour nutrition diplomate program

Applicants are encouraged to keep a photocopy of the application for their records and send applications via certified mail, return receipt requested. The CBCN will make no accommodations due to misdirected mail unless evidence of mailing (such as a certified receipt or other postal documentation) is provided. After verification and processing of the application is complete, the CBCN will notify the NBCE the applicant should receive an authorization-to-test letter.

Application, required forms, official transcripts and examination fees must be sent to:

CBCN – Application
1170 Emerald Sound Blvd
Oak Point, TX 75068

FEES

Fees must accompany the fully completed application (including all required authorization forms). All fees must be made payable to the CBCN in the form of U.S. guaranteed funds (bank drafts, certified checks, or money orders). Personal or business checks will not be accepted unless certified. The CBCN charges a \$35 fee if the issuing bank does not honor funds for any reason.

Improperly completed applications, or those without correct or guaranteed funds, will be returned unprocessed. To avoid rejection of the application, it must then be resubmitted and received by the CBCN before the published deadline.

The CBCN Board has the right to set and change any of the fees and will notify candidates within 60 days of any changes.

APPLICATION FEE..... \$875.00

ADMINISTRATIVE FEES -- Related to Application

Case History Grading Fee..... **\$ 50.00**

Test Site Fee..... **\$100.00**

POSSIBLE ADDITIONAL FEES

Returned Application Fee (for any reason)..... \$ 50.00

Returned Bank Funds..... \$35.00

NOTE: Do not send CASH. Credit card payment is not available.

WITHDRAWAL

The CBCN will accept a written request to withdraw from the examination and issue a partial examination fee refund in the amount of \$250.00 if the request is received at least 45 days prior to the examination period. Refunds will be issued approximately three weeks after receipt of written notice to withdraw. There is NO refund for administrative fees.

Written requests to withdraw must be sent certified mail to:

CBCN
1170 Emerald Sound Blvd
Oak Point, TX 75068

REFUNDS

There will be **NO REFUND** of fees including to applicants who:

1. apply but fail to take the examination.
2. apply, but take only a portion of the examination.
3. withdraw or become ineligible to take the examination after the cancellation deadline.
4. fail to comply with the testing center's policy and are therefore unable to take or complete the examination.

Fees will **NOT** carry over nor transfer from one examination administration period to another. Applicants must submit a completely new application with all the correct fees when applying for examination on a later date.

SUBJECTS OF EXAMINATION

Based on accepted Diplomate education, Delphi Study and Job Analysis, examination for the purpose of qualifying a candidate to be certified as a diplomate may cover any of the following subjects as they relate to the understanding and use of diet, vitamins, minerals, trace elements, herbs, enzymes, homeopathic medicines or other substances associated with the practice of clinical nutrition to upgrade the diet or the function of the body in relation to any of the following:

- The Biochemistry and Physiology of Nutrition.
- The Nutrients and Their Characteristics, Functions and Metabolism.
- The Consultation and Examination in Clinical Nutrition.
- Laboratory Testing of blood, saliva, stool, hair or other tissues
- Diets in Health and Disease
- Drug-Nutrient, Nutrient-Nutrient and Herb-Nutrient Interactions & Reactions
- Dietary and Nutritional Aspects in General Management of Disease, Syndromes and Symptoms:
 - A. Oral Cavity and Gastrointestinal Tract
 - B. Endocrine System
 - C. Cardiovascular System
 - D. Pulmonary System
 - E. Urogenital System
 - F. Neuromusculoskeletal System
 - G. Fever, Infections and Inflammation
 - H. Blood Disorders
 - I. Hyperimmunity and Hypoimmunity
 - J. Sports and Athletics including Trauma and Injury
 - K. Bariatrics including Weight Management and Eating Disorders
- Nutrition for Infancy and Adolescence
- Nutrition for the Female including Pregnancy and Lactation
- Nutrition for the Male
- Nutrition for Geriatrics, Aging and Longevity
- Nutrition for Physiological Stress
- Dietary and Nutritional Aspects in Management of Neurological and Psychiatric Disorders.
- Cultural, Religious and Ethnic Issues related to Nutrition
- Public Health Issues
- Radiographic and Advanced Imaging Diagnosis of Common Metabolic Disorders.
- Use of Herbs and Botanicals
- Use of Homeopathic Medicines

REPORT OF RESULTS

Candidates will be notified in writing within three (3) months of the close of the testing period of their having passed or failed the examination. Additionally, failing candidates will be given a score analysis.

Successful candidates will receive a numbered certificate, suitable for framing, from the Chiropractic Board of Clinical Nutrition. The certificate is the property of the CBCN and is to be returned to the CBCN should certification be revoked, for reason, in the future.

REEXAMINATION

Failed written or case history portions of the examination must be rewritten within three (3) years or the candidate must rewrite the entire examination. The fees for rewriting failed parts of the examination will be set annually by the Board.

CONFIDENTIALITY

The CBCN will follow procedures to ensure that each applicant's examination results are held confidential. However, the Board will update the Diplomate listing within three months after each examination so that the consumer may make informed choices about providers according to certification status as follows:

1. Diplomate
2. Date Certified
3. Date Recertified
4. Active or Inactive Status

DISCRIMINATION NOTICE

The CBCN does not discriminate for the purposes of application, examination, continuing education, recertification or any other activity of the Board on the basis of age, sex, religion, marital status, national origin, race, language, or disability. All candidates and members are considered on the basis of their skill and knowledge as practitioners based solely on their ability to treat the consumer safely and effectively. The CBCN complies with all applicable federal and state laws including the Americans with Disabilities Act (ADA) with respect to certification and recertification responsibilities. If you have any special accommodation needs, please indicate specifically what those needs are. If these needs are highly specialized, you may be required to pay the cost for obtaining personnel or equipment to meet those needs. (Examples: interpreters or adaptive electronic equipment)

OFFICIAL CLASSIFICATION

A Doctor of Chiropractic who has satisfied the educational criteria, passed all parts of the board examination and paid all fees will be certified as a Diplomate of the Chiropractic Board of Clinical Nutrition by the CBCN and may, subject to state law, be referred to as a Board Certified Clinical Nutritionist and may use the trademarked Board acronym DCBCN providing any one or all are allowed under the law or rules of the state in which the Diplomate practices. The CBCN advises all Diplomates to check with the appropriate state agency as to what is allowed and how it can be used in advertising or any other manner.

A Diplomate of the Chiropractic Board of Clinical Nutrition must be recertified on a yearly basis to maintain the certification and use of the classification.

RECERTIFICATION

Yearly recertification is required of all Diplomates in order to enhance continued competence by:

1. completing a minimum of 16 classroom credit hours of continuing education in nutrition in a program of study approved by the Board or by fulfilling one of the several other methods listed in the Bylaws, Article X.

AND 2. certifying to the Board they have reviewed a minimum of 12 articles in the field of nutrition, published in indexed peer reviewed journals. The diplomate is responsible for keeping a list with the names of the articles, author(s) and journal citations for audit by the Board.

AND 3. payment of the recertification fee.

Failure to recertify will result in suspension from the Diplomate roster and additional requirements will have to be fulfilled within a specified time in order to be reinstated. Failure to rectify the suspension will result in loss of certification and the doctor will be required to demonstrate continued competency by taking and passing the full Board Certification examination of the CBCN to again hold Diplomate status.

CONTACT INFORMATION CHANGE

Candidates and Diplomates are responsible to notify the CBCN promptly in writing when there is a change in contact information to avoid delays in receiving information about the examination or maintaining Diplomate status. This includes, address, phone numbers and e-mail addresses. Failure to do so may cause revocation of your Diplomate status requiring reexamination. In case of a name change, individuals must send to the CBCN a copy of the certificate of marriage or a court order of name change before their records will be entered under a new name. Applicants should include their original name on the correspondence if their name change is not yet official with the CBCN.

EDUCATION PROGRAMS

This is a list of known programs for the requisite education hours in clinical nutrition which may or may not be current as programs start and complete with a period of time common between offerings. Doctors interested in taking course work are advised to contact the various colleges and universities to determine if a program is currently available.

DIPLOMATE 300 HOUR PROGRAMS:

Northwestern Health Sciences University
Texas Chiropractic College

MASTERS DEGREE (MS) PROGRAMS:

There are many MS degree programs in clinical nutrition. To determine the total classroom hours that will apply toward the necessary 300, a candidate should have the institution attended forward an official transcript along with a detailed syllabus and course outline for each course, as well as the handbook information at the time of matriculation. The CBCN will review the information to determine the number of hours that will apply within 45 days. The candidate agrees the decision of the CBCN is final.

EXAMINATION REFERENCES

The following references are the primary sources currently in use for test questions. Inclusion of specific textbooks or diplomate program course notes and test questions does not constitute an endorsement by the CBCN of their entire content or imply a guarantee that candidates will be successful in passing the certification examination. The Board may add or delete texts, at its sole discretion, from time to time.

TEXTS:

Hershoff, **HOMEOPATHIC REMEDIES**, 2000

Lord & Bralley, **LABORATORY EVALUATIONS FOR INTEGRATIVE AND FUNCTIONAL MEDICINE**, 2ND Ed 2009

Krinsky, et al **NATURAL THERAPEUTICS POCKET GUIDE**, 2nd Ed. Lexi-Comp, Inc, 2003

Mahan & Escott-Stump, **KRAUSE'S FOOD & NUTRITION THERAPY**, 12th Ed, 2007

Mills & Bone, **PRINCIPLES AND PRACTICE OF PHYTOTHERAPY**, 1st Ed, 2000

Murray & Pizzorno, **TEXTBOOK OF NATURAL MEDICINE**, 3rd Ed, 2006

Shils, Olson & Shike, **MODERN NUTRITION IN HEALTH AND DISEASE**, 10th Ed, 2005

Yokum & Rowe, **ESSENTIALS OF RADIOLOGY**, 3rd Ed, 2004

Wallach, **INTERPRETATION OF DIAGNOSTIC TESTS**, 8th Ed, 2007

TEST PLAN

The Test Plan shows the percentage of questions on the 200 question written examination covering the topics listed below. The topics and percentages are based on the Delphi Study and statistically valid Job Analysis of Chiropractic physicians who are Diplomates of the CBCN.

1. 15% - Case History
2. 10% - Nutrition-Related Physical and Orthopedic/Neurologic Examinations, including Anthropometrics
3. 15% - Laboratory and Nutrition-Specific Tests; Nutrition-Related Physiology
4. 5% - Imaging and Special Studies
5. 20% - Diagnosis
6. 15% - Treatment: Nutritional Interventions
7. 20% - Case Management: Indications, Interactions, Counseling, Documentation, Prognosis, Outcome Measures

SAMPLE EXAMINATION QUESTIONS

Choose the one best answer for each of the following 25 sample questions. The answers with references from the published examination texts are listed at the end.

1. Physical examination of a patient reveals yellow skin discoloration of the forehead, axillae, palms, and soles of the feet. The patient denies alcohol consumption and laboratory values for liver enzymes are within normal limits. What is the most likely etiology for the discoloration?
 - A. hypercarotenosis
 - B. hypercholesterolemia
 - C. hypertriglyceridemia
 - D. hypervitaminosis C
2. A BMI of 27 for an adult indicates which of these?
 - A. underweight
 - B. normal weight
 - C. overweight
 - D. class II obese
3. The RDA of protein for a 150 pound patient with normal kidney function, who walks two days a week for exercise, is _____ ounces.
 - A. 5.4
 - B. 7.8
 - C. 9.6
 - D. 12.2

4. Which of these additional findings is most likely present in an elderly female who complains of fatigue, weight gain, and difficulty swallowing?
- A. thyroid enlargement
 - B. liver enlargement
 - C. white patches on the tonsils
 - D. hyperreflexia
5. To prevent sensory neuropathy, including ataxia and loss of lower limb vibratory sense, the dose of pyridoxine should not exceed _____ mg.
- A. 100
 - B. 200
 - C. 300
 - D. 400
6. Colon cancer, IBD, and ulcerative colitis are most likely to lower stool levels of _____.
- A. dietary polysaccharides
 - B. pathological bacteria
 - C. SCFA n-butyrate
 - D. candidia
7. Which hormone is most likely elevated in a patient with hypertension, central obesity, insulin resistance, and sleep disturbances?
- A. relaxin
 - B. testosterone
 - C. cortisol
 - D. insulin
8. What is the most likely diagnosis for a patient with elevated salivary sIgA, a positive gluten sensitivity test, pale frothy foul-smelling stools, and weight loss?
- A. celiac disease
 - B. GERD
 - C. gallstones
 - D. pancreatitis
9. Treatment of cystitis is most likely to include supplements of _____ and _____.
- A. vitamin B₂; hawthorne
 - B. d-mannose; uva ursi
 - C. vitamin K; peppermint
 - D. vitamin A; bilberry
10. Starvation, sepsis, and protein catabolic states result in reduced muscle and plasma _____ levels.
- A. alanine
 - B. vitamin A
 - C. vitamin D
 - D. glutamine
11. Which of these is the most appropriate laboratory test to monitor the treatment of a patient with diabetes mellitus?
- A. Hb A1c
 - B. D-dimer
 - C. Alkaline phosphate
 - D. C-reactive protein

12. Which of these is most beneficial in the treatment of varicose veins?
- A. engaging in minimal exercise
 - B. maintaining a high fiber diet
 - C. standing for long periods
 - D. wearing a girdle
13. Which of these diets is most appropriate for hypertensive patients?
- A. Atkin
 - B. DASH
 - C. Zone
 - D. Step
14. Which of these is associated with a finding of rough *goose bumps* skin texture over the triceps area?
- A. Hyperkeratosis
 - B. hypervitaminosis D
 - C. candidiasis
 - D. measles
15. Which of these findings is most likely to be associated with cardiovascular disease?
- A. earlobe crease
 - B. coarse hair
 - C. loss of eyebrows
 - D. thick white toenails
16. Due to its progestrogenic activity, which herb is indicated in the treatment of premenstrual stress syndrome?
- A. berberine
 - B. chaste tree
 - C. pau d'arco
 - D. peppermint
17. Which of these diets is most likely to benefit patients with fibromyalgia?
- A. high protein
 - B. low carbohydrate
 - C. vegan
 - D. low fiber
18. Which of these herbs is indicated for the treatment of morning sickness in the second trimester?
- A. don quai
 - B. raspberry
 - C. blue cohosh
 - D. wormwood
19. Children between 1 and 3 years of age are at high risk for _____ deficiency anemia.
- A. vitamin B₁₂
 - B. vitamin C
 - C. folate
 - D. iron

20. Which of these is the most characteristic disease associated with metabolic arthritis?

- A. gout
- B. erosive osteoarthritis
- C. osteoporosis
- D. degenerative joint disease

A 35-year-old female complains of increasing early morning joint stiffness, with intermittent pain and swelling of multiple joints in the hands and feet over the past several months. The patient reports difficulty walking and using her hands to open jars or do needle work. She has lost 9 pounds without dieting over the past 6 months, and her diet is SAD with 2-3 diet Pepsi drinks per day.

Answer questions 21 thru 25 based on the above case history.

21. Which of these is the most likely diagnosis?

- A. ankylosing spondylitis
- B. gout
- C. osteoarthritis
- D. rheumatoid arthritis

22. Which of these laboratory findings is most likely present?

- A. positive IgM RF
- B. elevated urate level
- C. decreased ESR
- D. positive HLA-B27

23. What is the most likely etiology of this patient's weight loss?

- A. intake of over 2700 kCal /day
- B. increased metabolic rate
- C. high protein diet
- D. neoplasm

24. Evidence of pathophysiologic oxidative stress in this disease would support the addition of _____ and _____ supplements.

- A. copper; iron
- B. magnesium; vitamin A
- C. vitamin B₁₂; calcium
- D. vitamin C; vitamin E

25. Treatment of this disease with methyotrexate is known to produce a functional deficiency of which nutrient?

- A. vitamin B₁
- B. niacin
- C. folate
- D. vitamin D

SAMPLE EXAMINATION ANSWERS

ANSWERS, with references, to the preceding 25 questions are listed below.

1. **ANS:A** Modern Nutrition in Health and Disease 10th Ed, pgs 596 & 597
2. **ANS :C** Modern Nutrition in Health and Disease 10th Ed, pg 765
3. **ANS: B** Modern Nutrition in Health and Disease 10th Ed, pg, 845
4. **ANS: A** Modern Nutrition in Health and Disease 10th Ed, pg 303
5. **ANS: A** Modern Nutrition in Health and Disease 10th Ed, pg 601
6. **ANS: C** Laboratory Evaluations for Integrative and Functional Medicine, 2nd Ed, pg 451
7. **ANS: C** Laboratory Evaluations for Integrative and Functional Medicine, 2nd Ed, pg 560
8. **ANS: A** Laboratory Evaluations for Integrative and Functional Medicine, 2nd Ed, pgs 562 & 563; Textbook of Natural Medicine, 3rd Ed, pg 1563
9. **ANS: B** Textbook of Natural Medicine, 3rd Ed, pgs 1601 & 1602
10. **ANS: D** Laboratory Evaluations for Integrative and Functional Medicine, 2nd Ed, pg 194
11. **ANS: A** Interpretation of Diagnostic Tests, 8th Ed, pg 705 & 706
12. **ANS: B** Textbook of Natural Medicine, 3rd Ed, pgs 2167 and 2168
13. **ANS: B** Textbook of Natural Medicine, 3rd Ed. Pgs 1761 and 1762; Modern Nutrition in Health and Disease, 10th Ed, pgs 1102 and 1103
14. **ANS: A** Textbook of Natural Medicine, 3rd Ed. Pgs 1386
15. **ANS: A** Textbook of Natural Medicine 3rd Ed, pg 1520
16. **ANS: B** Principles and Practice of Phytotherapy, pg 328
17. **ANS: C** Krause's Food & Nutrition Therapy, 12th Ed, p. 1060, J Rheumatol. 2000;29(5):308-13.
18. **ANS: B** Principles and Practice of Phytotherapy, pg 246
19. **ANS: D** Krause's Food & Nutrition Therapy, 12 Ed, pg 225-226
20. **ANS: A** Essentials of Radiology, 3rd Ed, pg 955
21. **ANS:D** Krause's Food & Nutrition Therapy, 12th Ed, pg 1050
22. **ANS: A** Interpretation of Diagnostic Tests, 8th Ed, pg 355
23. **ANS: B** Krause's Food & Nutrition Therapy, 12th Ed, pg 1053
24. **ANS: D** Modern Nutrition in Health and Disease 10ed, pg 1335
25. **ANS: C** Modern Nutrition in Health and Disease 10ed, pg 1335-1336



CASE HISTORY GRADING FORM

Dr. Name _____

Date _____

Case History # _____ Patient Initials _____

Grade _____ / 100
Minimum passing grade is 75

Rating Score Key:

- 0 = Unsatisfactory ----- Missing completely or totally inaccurate or unacceptable information
- 1-3 = Partially unsatisfactory ----- Incomplete and/or some inaccurate or unacceptable information
- 4-6 = Partially satisfactory ----- Mostly complete, some relevant information missing
- 7-9 = Satisfactory ----- Complete with all relevant and no inaccurate information
- 10 = Outstanding ----- Complete with all relevant information concisely written (publishable)

1. **Chief Complaint:** _____/10
 - a) Duration
 - b) Severity
 - c) Aggravating factors
 - d) Alleviating factors
2. **Other Complaint(s) and Nutrient-drug/nutrient Interactions:** _____/10
 - a) Duration
 - b) Severity
 - c) Aggravating factors
 - d) Alleviating factors
 - e) Nutrient-drug interactions; nutrient-nutrient interactions
3. **Family and Social History** _____/10
 - a) Family history including health problems and cause of death
 - b) Personal history including vital statistics, education, job
 - b) Personal history including surgery, drugs, medications and supplements
 - c) Personal lifestyle including smoking, exercise, and alcohol use
 - e) Personal history including stressors, recreation activities, psychological
4. **Diet Diary and History:** _____/10
 - a) Diet diary ____ 7 day ____ 1 to 3 day ____ 24 hour recall ____ Other _____
 - b) Food preferences
 - c) Food avoided and allergies
 - d) Number of meals eaten daily and weekends
 - e) Liquid consumption including alcohol
 - f) Special diets and dietary programs
 - g) Food Preparation

5. Consultation and Physical Examination Findings: _____/10
- Significant consultation information
 - Physical signs of nutrient insufficiency or excess
6. Anthropometric and Exercise Assessment: _____/10
- Adult height and weight including ____present ____maximum ____preferred
 - Anthropometric measurement
____bioimpedance ____BMI ____skin folds ____arm circumference ____other
 - Exercise_____ x per week _____ minutes per day
 - Exercise _____ type(s) _____ like/dislike
7. Appropriate Radiologic Studies, Laboratory Evaluation and Functional Tests: _____/10
- ____ Radiographic or imaging studies
 - ____ Biochemical assessment including macro and micronutrient status
 - ____ Scientifically valid special or functional tests
 - ____ Results of tests used correctly in forming diagnosis and treatment plan
8. Diagnosis: _____/10
- Appropriate primary diagnosis consistent with findings
 - Secondary diagnosis(s)
 - Differential diagnosis(s)
9. Treatment Plan: _____/10
- Is the plan appropriate for the diagnosis (with appropriate referral if indicated)
 - Does the plan show thought for the patient in terms of compliance and cost
 - Does the plan include diet and lifestyle modification as appropriate
 - Can the plan be supported by scientific data and/or clinical judgment of peers
10. Case Progress and Outcome: _____/10
- Was follow-up recommended and carried out appropriately
 - Changes in signs and symptoms addressed by additional investigation as indicated
 - Treatment Plan modified based on changes in signs and symptoms
 - Case was documented and recorded
 - Outcome was as expected or complete explanation given if different

Comments by Grading Doctor:



Jeffrey E. Weber, MA, DC, DCBCN
President

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Consultants
Alan Adams, DC, MS, DCBCN
Alan Pressman, DC, PhD, DCBCN

CASE HISTORY ATTESTATION

This is to certify that the two (2) Case Histories I have submitted to the CBCN, as part of the certification examination, are original, actual patient case histories from my own practice. All of the data collected and treatment prescribed was done so by me personally or under my direction. I have personally written the case histories based on the format of the CBCN grading form.

I am submitting three complete copies of each case history, with appropriate backup documentation in a bound format. Each case history is typed, double spaced, in 10 point, Times Roman font with 1 inch margins.

I am enclosing the grading fee by check or money order in the amount of \$50.00.

I understand a minimum passing grade is 75. The grade is an average of the grades from the CBCN Diplomates who reviewed the case histories. Only in the case of a failing grade will I receive suggestions and/or recommendations to be used when resubmitting case histories for review. The case histories will not be returned.

I agree to abide by the decision of the CBCN.

Printed Name _____

Signature _____

Date ____/____/____

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