The Academy of Nutrition and Dietetics (Academy) and its credentialing agency, the Commission on Dietetic Registration (CDR), believe it is in the best interest of the profession and the public it serves to have a Code of Ethics in place that provides guidance to nutrition and dietetics practitioners in their professional practice and conduct. Nutrition and dietetics practitioners have voluntarily adopted this Code of Ethics to reflect the values and ethical principles guiding the profession and to set forth commitments and obligations of the nutrition and dietetics practitioner to the public, clients, the profession, colleagues, and all others to which they provide service. The updated Code of Ethics was approved by the Academy Board of Directors and the Commission on Dietetic Registration, effective June 1, 2018.

THE CODE OF ETHICS APPLIES TO THE FOLLOWING PRACTITIONERS:

• All members of the Academy who are credentialed by CDR
• All members of the Academy who are not credentialed by CDR
• All CDR credentialed practitioners whether or not they are members of the Academy

The Code is overseen by a three-person Ethics Committee, with representation from the Board of Directors, Commission on Dietetic Registration and House of Delegates. The term of office is three years.
A preamble, 4 principles and 32 standards comprise the code

PRINCIPLES AND STANDARDS

1. Competence and professional development in practice
   (Non-Maleficence)

   Nutrition and dietetics practitioners shall:
   a. Practice using an evidence-based approach within areas of
      competence, continuously develop and enhance expertise, and
      recognize limitations.
   b. Demonstrate in depth scientific knowledge of food, human
      nutrition and behavior.
   c. Assess the validity and applicability of scientific evidence
      without personal bias.
   d. Interpret, apply, participate in and/or generate research to
      enhance practice, innovation, and discovery.
   e. Make evidence-based practice decisions, taking into account
      the unique values and circumstances of the patient/client and
      community, in combination with the practitioner’s expertise and
      judgment.
   f. Recognize and exercise professional judgment within the
      limits of individual qualifications and collaborate with others,
      seek counsel, and make referrals as appropriate.
   g. Act in a caring and respectful manner, mindful of individual
      differences, cultural, and ethnic diversity.
   h. Practice within the limits of their scope and collaborate with
      the inter-professional team.

2. Integrity in personal and organizational behaviors and
   practices (Autonomy)

   Nutrition and dietetics practitioners shall:
   a. Disclose any conflicts of interest, including any financial
      interests in products or services that are recommended.
      Refrain from accepting gifts or services which potentially
      influence or which may give the appearance of influencing
      professional judgment.
   b. Comply with all applicable laws and regulations,
      including obtaining/maintaining a state license or
      certification if engaged in practice governed by nutrition
      and dietetics statutes.
   c. Maintain and appropriately use credentials.
   d. Respect intellectual property rights, including citation and
      recognition of the ideas and work of others, regardless of
      the medium (e.g. written, oral, electronic).
   e. Provide accurate and truthful information in all
      communications.
   f. Report inappropriate behavior or treatment of a patient/
      client by another nutrition and dietetics practitioner or
      other professionals.
   g. Document, code and bill to most accurately reflect the
      character and extent of delivered services.

PREAMBLE

When providing services the nutrition and dietetics practitioner adheres to the core values of customer focus, integrity, innovation, social responsibility, and diversity. Science-based decisions, derived from the best available research and evidence, are the underpinnings of ethical conduct and practice.

This Code applies to nutrition and dietetics practitioners who act in a wide variety of capacities, provides general principles and specific ethical standards for situations frequently encountered in daily practice. The primary goal is the protection of the individuals, groups, organizations, communities, or populations with whom the practitioner works and interacts.

The nutrition and dietetics practitioner supports and promotes high standards of professional practice, accepting the obligation to protect clients, the public and the profession; upholds the Academy of Nutrition and Dietetics (Academy) and its credentialing agency the Commission on Dietetic Registration (CDR) Code of Ethics for the Nutrition and Dietetics Profession; and shall report perceived violations of the Code through established processes.

The Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession establishes the principles and ethical standards that underlie the nutrition and dietetics practitioner’s roles and conduct. All individuals to whom the Code applies are referred to as “nutrition and dietetics practitioners”.

By accepting membership in the Academy and/or accepting and maintaining CDR credentials, all nutrition and dietetics practitioners agree to abide by the Code.
h. Respect patient/client’s autonomy. Safeguard patient/client confidentiality according to current regulations and laws.

i. Implement appropriate measures to protect personal health information using appropriate techniques (e.g., encryption).

3. Professionalism (Beneficence)

*Nutrition and dietetics practitioners shall:*

a. Participate in and contribute to decisions that affect the well-being of patients/clients.

b. Respect the values, rights, knowledge, and skills of colleagues and other professionals.

c. Demonstrate respect, constructive dialogue, civility and professionalism in all communications, including social media.

d. Refrain from communicating false, fraudulent, deceptive, misleading, disparaging or unfair statements or claims.

e. Uphold professional boundaries and refrain from romantic relationships with any patients/clients, surrogates, supervisees, or students.

f. Refrain from verbal/physical/emotional/sexual harassment.

g. Provide objective evaluations of performance for employees, coworkers, and students and candidates for employment, professional association memberships, awards, or scholarships, making all reasonable efforts to avoid bias in the professional evaluation of others.

h. Communicate at an appropriate level to promote health literacy.

i. Contribute to the advancement and competence of others, including colleagues, students, and the public.

4. Social responsibility for local, regional, national, global nutrition and well-being (Justice)

*Nutrition and dietetics practitioners shall:*

a. Collaborate with others to reduce health disparities and protect human rights.

b. Promote fairness and objectivity with fair and equitable treatment.

c. Contribute time and expertise to activities that promote respect, integrity, and competence of the profession.

d. Promote the unique role of nutrition and dietetics practitioners.

e. Engage in service that benefits the community and to enhance the public’s trust in the profession.

f. Seek leadership opportunities in professional, community, and service organizations to enhance health and nutritional status while protecting the public.

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Glossary of Terms

**Autonomy:** ensures a patient, client, or professional has the capacity and self-determination to engage in individual decision-making specific to personal health or practice.¹

**Beneficence:** encompasses taking positive steps to benefit others, which includes balancing benefit and risk.¹

**Competence:** a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis.²

**Conflict(s) of Interest(s):** defined as a personal or financial interest or a duty to another party which may prevent a person from acting in the best interests of the intended beneficiary, including simultaneous membership on boards with potentially conflicting interests related to the profession, members or the public.²

**Customer:** any client, patient, resident, participant, student, consumer, individual/person, group, population, or organization to which the nutrition and dietetics practitioner provides service.³

**Diversity:** “The Academy values and respects the diverse viewpoints and individual differences of all people. The Academy’s mission and vision are most effectively realized through the promotion of a diverse membership that reflects cultural, ethnic, gender, racial, religious, sexual orientation, socioeconomic, geographical, political, educational, experiential and philosophical characteristics of the public it serves. The Academy actively identifies and offers opportunities to individuals with varied skills, talents, abilities, ideas, disabilities, backgrounds and practice expertise.” ⁴

**Evidence-based Practice:** Evidence-based practice is an approach to health care wherein health practitioners use the best evidence possible, i.e., the most appropriate information available, to make decisions for individuals, groups and populations. Evidence-based practice values, enhances and builds on clinical expertise, knowledge of disease mechanisms, and pathophysiology. It involves complex and conscientious decision-making based not only on the available evidence but also on client characteristics, situations, and preferences. It recognizes that health care is individualized and ever changing and involves uncertainties and probabilities. Evidence-based practice incorporates successful strategies that improve client outcomes and are derived from various sources of evidence including research, national guidelines, policies, consensus statements, systematic analysis of clinical experience, quality improvement data, specialized knowledge and skills of experts.²

**Justice (Social Justice):** supports fair, equitable, and appropriate treatment for individuals¹ and fair allocation of resources.

**Non-Maleficence:** is the intent to not inflict harm.¹
Approach to Ethical Decision-Making*

**STEP 1**
STATE AN ETHICAL DILEMMA
Identify components of potential ethical dilemma
- Is it an ethical issue, OR a
- Communication problem, OR a
- Practitioner-patient issue, OR a
- Practitioner-supervisor/employer issue, OR a
- Legal matter
- What are the facts of the situation?
- Objectively identify the issue
- Who are key participants
- Identify your perceptions/values
- What further information is needed

**STEP 2**
CONNECT ETHICAL THEORY TO THE DILEMMA IN PRACTICE
Employ four key principles of ethical theory*
- Autonomy
- Non-Maleficence
- Beneficence
- Justice

**STEP 3**
APPLY THE ACADEMY/CDR CODE TO THE ISSUE AND YOUR ETHICAL DECISION-MAKING
There are four principles of the current Academy/CDR Code of Ethics:
- Competence and professional development in practice
- Integrity in personal and organizational behaviors and practices
- Professionalism
- Social responsibility for local, regional, national, global nutrition and well-being

**STEP 4**
SELECT THE BEST ALTERNATIVE AND JUSTIFY YOUR DECISION
Identify possible alternatives to resolve the dilemma, considering:
- Cultural influences affecting your decision-making process
- How alternative solutions track with your values and your institution’s values
- Your confidence in and ability to defend the ultimate decision
- Whether the decision aligns with the Academy/CDR Code of Ethics and/or the SOPs/SOPPs
- How the decision might affect others and whether they will support it
- Make a final decision

**STEP 5**
DEVELOP STRATEGIES TO SUCCESSFULLY IMPLEMENT THE CHOSEN DECISION
Strategies to successfully implement the chosen resolution
- Seek additional knowledge to clarify or contextualize the situation as needed
- Implement chosen resolution

**STEP 6**
EVALUATE THE OUTCOMES AND HOW TO PREVENT A SIMILAR OCCURRENCE
- Monitor outcomes, ensuring intended outcome(s) are achieved
- What are the strategies to prevent a similar issue in the future?

References

*Adapted from Fornari A. Approaches to ethical decision-making. J Acad Nutr Diet. 2015; 115 (1): 119-121.
**INDIVIDUAL - VS - ORGANIZATIONAL ETHICS**

What if my ethics complaint concerns an organization or group, not an individual?

The Code of Ethics for the Nutrition and Dietetics Profession pertains to individual practitioners, not organizations. The Academy is an individual professional membership organization. Thus, the Academy cannot accept ethics complaints that pertain to organizations. If you have an organizational ethics issue:

- Reach out to the governing body or Board of Directors, if your concern involves a for-profit or non-profit organization,
- Consider contacting the American Hospital Association (AHA), if your concern relates to a hospital or healthcare system,
- The America’s Health Insurance Plans (AHIP) may be able to assist, if your complaint involves a health insurer,
- Consider contacting the professional organization that represents that profession or their state department of professional regulation, if your concern relates to a non-CDR credentialed nutrition and dietetics practitioner that is not an Academy member.

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**How Do I Know if it is Really an Ethics Issue?**

In the Ethics Committee’s experience, many of the matters brought to them are not ethics matters. Instead, the matters presented are business disputes, employment disputes, or legal matters. What is...

**AN ETHICAL ISSUE?**
The violation of established rules or standards governing the conduct of a person or the members of a profession. An ethical issue is specific to one of the four principles and 32 standards of the Code.

**A LEGAL ISSUE?**
Many state and federal laws apply to our profession. If a state or federal law has been violated, the issue could result in action by the Ethics Committee. However, not every violation of the law is a breach of the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession.

**A BUSINESS ISSUE?**
An issue may be a business issue, but not an ethical issue, if it arises from a business dispute or breach of a contractual obligation, or a failure to provide products or services of an expected quality. Examples include billing or contract disputes, scheduling problems or other dissatisfaction with services provided. You should not attempt to use the Code to resolve business disputes between practitioners, other health care providers or consumers.

**AN EMPLOYMENT ISSUE?**
Employment issues can be addressed by an employer’s policy or policies or can be resolved in the workplace via the appropriate structure to provide oversight (i.e., Human Resources) or through federal and state laws that protect employees. An employment issue may not be an ethical issue, such as a disagreement with a supervisor or other employee about how to conduct business. Additional examples of an employment issue include: disagreement about time or hours worked; misleading statements to supervisors, co-workers, customers, or vendors; and misusing an employer’s assets.

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The focus of the code is:

**EDUCATION**
**REMEDICATION**
**SELF-REGULATION**

The purpose of the code is not policing practitioners.