A Business Plan for a Nutrition Counseling Private Practice Specializing in Food Allergies and Celiac Disease

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II. Executive Summary

Food allergies and celiac disease are increasingly becoming a public health problem that affects both children and adults. Research studies estimate that over 15 million Americans have a food allergy and about 3.2 million Americans have celiac disease. (11,12) While both celiac disease and food allergies have only one single treatment option of avoiding the trigger food, they are not the same conditions. Food allergies develop through a genetic and/or environmental trigger, which creates an IgE mediated reaction. When the allergen is ingested, the patient can experience either small reactions, such as an itchy throat, or a more severe reaction, such as life-threating anaphylaxis. Like food allergies, celiac disease develops from a genetic and/or environmental trigger, but an autoimmune response occurs when gluten, the protein found in wheat, barley, malt, and rye, is ingested. When even the smallest crumb of a gluten-containing food is consumed, damage to the intestinal villi occurs resulting in a variety of possible symptoms ranging from gastrointestinal issues to brain fog and joint pain.

People affected by both food allergies and celiac disease often receive their diagnosis during a health care visit, and then are left alone to navigate a brand-new diet on their own. This was the case for my eight-year-old daughter and me when we received our life-altering celiac diagnosis several years ago. At diagnosis, we were told to go on a gluten free diet, given a short handout, and then asked to come back in six months. We were not given any detailed instructions, sample meal plans, or any type of nutritional support. We were confused and overwhelmed, and I do not believe we are the only ones that have had this experience.

Within the healthcare community, there is not sufficient time or resources to give to food allergy and celiac disease patients the in-depth support and encouragement they need, and often patients are left feeling the same way as my daughter and I did. It was through this experience of feeling lost and confused where the idea of Julie Kennedy Nutrition began. To adequately navigate the gluten free diet, people need ongoing support including tips for avoiding nutritional potential deficiencies, grocery shopping, eating out, eating during the holidays, sending children to camp or school, and the list goes on. The goal of my nutrition counseling private practice is to fill this gap between a food allergy or celiac disease diagnosis and a reasonable plan for management. Through this business, I will offer the services patients need to cope with these life-changing realities, the services that my daughter and I desperately needed when we were diagnosed.

III. Organizational Plan

a. Location of the Practice

Within six months of opening, the practice will operate from shared office space in the Holly Springs/Care/Apex area. I have identified three locations, each a shared space with another complementary health service provider (family therapist, acupuncturist, etc.). I will contract space once client meetings total at least 10 per week. Prior to that time, I will hold client sessions in either the client's home, a coffee shop, a library, or another public location where clients confirm they will be comfortable. Administrative work will be completed from my home office.

b. Equipment and Resources Needed

As compared to other types of business models, a private practice nutrition counseling business does not require a large investment upfront. Starting the practice by meeting clients in their home or a public location will significantly delay the need to invest in office space. However, there are some essential costs before clients can be seen. I have elected to structure the practice as an Limited Liability Company (LLC) because of the liability protection and tax advantages that the structure offers. Obtaining an LLC in North Carolina is a simple and straightforward process that will cost \$125. In addition, once I pass the registered dietitian examination, I will obtain a license to practice medical nutrition therapy in the state of North Carolina, which will cost \$175. Eventually I will offer Telehealth services, a technology used to communicate virtually with clients rather than meeting in person. Using Telehealth with clients outside of North Carolina will require licensing within the state where the client resides, creating additional costs that will vary between states.

Equipment needed to operate an efficient and secure nutrition counseling business will be both tangible and non-tangible. The tangible equipment includes a mobile all-in-one printer/fax/copier (\$79), an Apple MacBook computer (\$1000), and Square reader for credit card transactions (one-time fee of \$49 plus 2.75% per transaction). To stay on top of the latest research and evidence-based recommendations, subscriptions to the Academy of Nutrition and Dietetics' Nutrition Care Manual (\$195/year) and the Up to Date database (\$45/month) will be maintained. Additionally, memberships to the Academy of Nutrition and Dietetics (\$204/year) and the Nutrition Entrepreneur dietetic practice

group (\$40/year) will provide networking and mentoring opportunities. I will conduct client communications using my personal cell phone, but I will create a new business phone number. The costs for cellular data, another phone line, and cell phone usage will be covered by the business (\$100/month). Client records and chart notes will be store using the Healthie application (\$89/month), which was designed specifically for registered dietitians working in private practice. Healthie can also be used for scheduling appointments, client communication, and billing. Office Ally, another software application designed to assist private practice business owners with insurance billing, will be used monthly (\$35/month). Providing medical nutrition therapy to clients will require protection, such as liability insurance, which will cost around \$140/year. Also, a payment of \$26/month will be made to Square Space to maintain an active and current website. Finally, within six months of opening the practice or when I see an average of 10 clients per week, I will begin to use a shared office space. On average, to rent a private and furnished office space in the Holly Springs/Cary/Apex area, it will cost around \$100 per day. If the space I find is unfurnished, I will need to purchase office furniture as well, but this decision will be made during the second half of 2019. While these are the estimated initial costs for necessary equipment and resources, other miscellaneous cost will come up as the business develops.

c. Services Offered

Client services will be grouped into four areas – individual counseling, community building, shopping and pantry management, and restaurant consulting. In the beginning, I will solely focus on individual counseling sessions, finding new clients, and gaining new referral sources. Once a steady stream of clients is established, other services such as community building, shopping and pantry management, and restaurant consulting will be added.

Individual counseling sessions will include an initial visit lasting 60 minutes and if necessary, follow up visits lasting 45 minutes. An initial visit will include a complete nutrition assessment, a nutrition-based diagnosis, and a plan for monitoring and evaluating the client's progress after the visit. During a follow up visit, we will discuss whether any new issues developed, or if any new issues could develop in the future. A discussion regarding any potential hidden sources of the specific food allergen and other additional educational topics will continue. I will also continue to monitor lab work, accidental exposures, and meal plan options. Using the Healthie application, I will also offer individual or follow up sessions using Telehealth, where instead of meeting in person, the client and I will meet virtually. Some

clients may prefer using Telehealth services considering most families with teenagers or small children, my target market, have very busy schedules.

In addition to counseling services, I will offer other services such grocery store visits and in-home pantry makeovers. During a grocery store visit, the client will gain an understanding of how to shop for foods that do not contain a food allergen. I will give suggestions on how to shop for allergen-free or gluten-free foods in the most efficient and thorough manner including focusing on the best sections of the grocery store and label reading. During an in-home pantry makeover, we will meet in the client's home to discuss typical staple food items that could potentially contain a food allergen or gluten. Creating a welcoming, organized pantry for busy families will also be covered, if desired. Also, I will work with the client in their own kitchen to help identify potential hot spots for cross contamination. Using these hands-on approaches to introduce strategies for living with food allergies or celiac disease will provide my clients with an alternative style of interaction, which some may prefer.

Eventually, I will also offer group sessions to create and foster relationships between clients dealing with similar issues. Creating strong networks between clients within the food allergy and celiac disease communities will provide additional peer-to-peer support. These group sessions will be tailored towards teens and adults to provide an opportunity for building relationships within a comfortable community where they do not feel different or alone. Eventually, cooking classes will be offered to clients that either focus on allergen-free or gluten-free recipes or just a general cooking class on healthy eating.

After the business is well established, I will begin to offer other services such as restaurant consultations. A restaurant consultation will include an educational session consisting of safe food allergy practices for the wait staff, manager, and kitchen staff. I will train wait staff on how to speak to customers regarding food allergies and gluten free foods and I will train kitchen staff on how to prepare allergen-free or gluten-free food safely. Another restaurant service will include kitchen walkthroughs to identify hot spots for cross-contamination. Restaurants could use these services to enhance their marketing efforts, draw more customers, and grow their business. Currently there are five states that have laws designed to make it safer for individuals with food allergies to dine in restaurants. For example, in Massachusetts, restaurants are required by law to display a food allergy awareness poster in the staff area and include notices that read, "Before placing your order, please inform your server if a person in your party has a food allergy." This law also requires restaurants to have on staff a certified food protection manager who has been issued a Massachusetts certificate of allergen awareness training. (20) In the future, North Carolina could adopt very similar legislation that would increase the

demand of certified allergen awareness trainers, which would increase opportunity in this area. In addition, the new federal menu-labeling law enacted by Congress in May of 2018 that requires all food establishments that are part of a chain of twenty or more locations to add calorie data to menus and menu boards. This new legislation could open opportunities to provide menu nutrient analysis services for restaurants as well.

The purpose of this business is to help improve the lives of those people dealing with food allergies or celiac disease. Whether clients receive services individually with one-on-one counseling sessions, or as a group during cooking class, or on a wider scale by dining out in a restaurant that has been consulting on safe serving practices for food allergies, the purpose still remains the same.

d. Significance of Services

Those that are suspecting or formally diagnosed with either a food allergy, food intolerances, or celiac disease will use the above-mentioned services. Additionally, any individual that is interested in addressed any sort of heath issue such as diabetes, prediabetes, hypertension, gastrointestinal disorders, obesity, or general healthy eating can also use the individual nutrition counseling services. Ideally, I would like to focus on helping adolescents or younger children along with their family members but understand this may be too specialized to implement in the beginning. After teaching middle school for thirteen years, I have grown to enjoy spending time with this age group and I have learned through trial and error what does and does not work in terms of motivation. Navigating the adolescent years while dealing with a food allergy or celiac disease can be quite challenging for some. My hope is to bring an open mind and caring heart to help guide children and their parents through what could potentially be an overwhelming diagnosis. Not only will my services be open to children and adolescents, adults with food allergies or celiac disease will be welcome as well. Using my first-hand knowledge of dealing with celiac disease myself and as a caregiver for my adolescent daughter with celiac disease, I will be able to counsel clients with a true understanding of their struggles and concerns.

i. Nutrition Assessment

For individual counseling sessions, my services will provide evidence-based nutritional support and interventions while managing a food allergy or celiac disease using the Nutrition Care Process. (1) Clients will receive a nutrition assessment that will include a three-day food record to identify any abnormalities in the diet, specific foods that are being avoided, and foods that have been tolerated or reintroduced. Recent allergic reactions will also be discussed and documented. Questions regarding

alternative forms of the allergen such as baked milk or eggs will be asked and discussed. Any accidental exposures and the consequences of those exposures will be documented. In addition, all anthropometric data including weight, height, weight for length, body mass index, assessment of individual growth velocity/growth history, and comparison of growth to the reference population will be taken. If necessary, I will perform a nutrition focused physical exam to determine any potential level of malnutrition. Biochemical tests, if available, will include nutrition specific blood tests to determine serum calcium, serum zinc, hemoglobin, mean corpuscular volume, serum iron, vitamin D 25-hydroxy, and plasma tocopherol (vitamin E) levels. In addition, I will monitor patients with celiac disease for celiac disease specific antibodies (IgA-tTg), anemia (hematocrit, folate, ferritin, vitamin B12), thyroid stimulating hormone (TSH), and mineral deficiencies such as copper or zinc. I will also recommend to adults with celiac disease to have a bone mineral density scan within the first year of diagnosis. (1, 18)

ii. Nutrition Diagnosis

During each visit, I will determine and document a nutrition diagnosis. The nutrition diagnosis will be stated as a PES (Problem, Etiology, and Signs and Symptoms) statement and will be used to develop the appropriate nutrition intervention. Potential nutritional diagnoses include nutrient deficiencies, overly restrictive eating behavior, lack of safe cooking skills, limited ability to self-advocate or food-and-nutrition-related knowledge deficit. (1)

iii. Nutrition Intervention

There are several potential nutrition interventions related to food allergies and celiac disease.

According to the Academy of Nutrition and Dietetics, education on managing food allergies should begin at diagnosis and continue through each phase of life from childhood to adulthood. Also, parents of children with food allergies may experience heightened anxiety, so focusing on increasing self-efficacy and self-advocacy through increased education for the both the child and the adult can be helpful. (1) Therefore, in the beginning, I will focus on educational topics such as safe food preparation at home, nutritional substitutions, label reading (including the "may contain" label), dining out in restaurants, managing food allergies or celiac disease in schools, if applicable, and how to treat an accidental reaction. I will point to the allergy educational curriculum, which is available online, created by The Consortium of Food Allergy Research program as a guideline for the best way to help these clients. A study conducted in 2012 by Dr. Scott Sicherer, an expert allergist, tested these specific educational materials with 60 parents of newly referred children with a prior food allergy diagnosis and an

epinephrine autoinjector. Their post intervention exit surveys showed very high levels of satisfaction and efficacy. On a 7-point Likert scale, all satisfaction categories remained above a favorable mean score of 6: straight-forward, organized, interesting, relevant, and recommend to others. (22) I will also develop additional food allergy and celiac disease educational materials along the way while evaluating effectiveness with clients.

Another nutrition intervention I will consider when helping clients with food allergies or celiac disease is addressing potential nutritional deficiencies that may arise when eliminating a food allergen or foods that contain gluten. When foods such as milk, eggs, meat, or most gluten-containing foods are eliminated from the diet, specific vitamins, minerals, or macronutrients could be lacking, resulting in poor growth and development. Providing nutritional support using the nutrition care process can improve client outcomes. A study published in 2014 in the Journal of the Academy of Nutrition and Dietetics found that children with food allergies that received routine nutritional counseling by a registered dietitian improved their overall nutritional status over time when compared to children without food allergies that did not receive nutritional counseling. In this study, nutritional status was assessed by comparing energy and protein intake, weight-to-length ratio, anthropometric and laboratory biomarkers data from enrollment to the end of the six-month intervention. (3) I will encourage those patients dealing with celiac disease to consume whole/enriched gluten free grain products and a multivitamin, when needed. (18) Other potential nutritional deficiencies to monitor could include reduced calcium, reduced vitamin D, or reduced iron resulting from poor intestinal absorption.

When dealing with any type of restrictive eating, quality of life can be an issue. Working with patients that have no other treatment for their disease other than eliminating a common ingredient from their diet will require an understanding of this burden. These patients and their parents can become overwhelmed by thinking about every single bite of food that goes into their mouth. Eating out in restaurants rarely provides a relaxing and comfortable situation as the fear of cross contamination is always lingering. Parents of children with food allergies or celiac disease must place their trust in other adults at either a day care or school setting to practice safe procedures for preparing their child's food. A study analyzing the impact of food allergies on the daily activities of children and their families found more than 25% of parents that were surveyed during food allergy appointments do not allow their children to participate in sleepovers or camps. In addition, more than 15% of the parents surveyed said they do not go to restaurants and more than 10% avoid child care settings or playdates at friends'

houses. (15) In terms of celiac disease, a recent study found that when compared to individuals that are less vigilant to the gluten free diet, individuals that are hypervigilant have a much lower quality of life, experiencing more frequent episodes of anxiety and fatigue. (19) As someone who knows first-hand how quality of life can be affected by a restrictive gluten-free diet, I am well equipped to assist others in finding strategies to tackle these issues.

iv. Nutrition Monitoring and Evaluation

Ongoing monitoring of nutritional deficiencies and improvement in food allergy or celiac disease related knowledge will be imperative in providing the best care for each client. The plan for monitoring clients in their celiac disease or food allergy journey will require close communication with the client's healthcare provider. Once each session is concluded and with the client's permission, I will share the notes documenting our visit and action plan with the referring provider. Using this method of communication, both the client and the healthcare provider will have an idea of the topics discussed and any conclusions that were drawn, as well as the plan moving forward.

Additionally, there is evidence to support an association between education on celiac disease and gluten free diet adherence. (24) For those with celiac disease, the American Gastroenterological Association and the American College of Gastroenterology and consensus statement from the U.S. National Institutes of Health recommend regular healthcare follow up with a healthcare provider including a physician and registered dietitian. While continued follow up is recommended, a survey conducted in 2017 by Beyond Celiac (a patient advocacy group) found that 27% of 1,832 survey respondents diagnosed with celiac disease reported that they had not visited a healthcare provider since diagnosis. (22) The reasons survey responders gave for not seeing a healthcare provider or dietitian for follow-up were answers such as, "we're doing fine on our own" or "they did not need to, their provider was not knowledgeable or previous visits were not helpful." (22) These results show that many people with celiac disease are trying to manage on their own because they don't feel like they have gotten proper care from their primary healthcare providers. This exposes the need for supplemental care providers to play an active role in helping families cope with their food-related realities. New information regarding celiac disease and food allergies is constantly changing and meeting with a registered dietitian at least several times a year will keep these patients healthier, up to date, and informed. During follow up visits, blood test results can be monitored to check antibody levels that will indicate possible gluten exposure as well as blood levels of essential vitamins and minerals signifying some sort of nutritional deficiency. I will also monitor gluten free diet adherence during follow up visits and will provide supplemental education, if necessary.

e. Practice Overview

Owning and operating a small business is never something I dreamed of doing until members of our family experienced a celiac disease diagnosis. Finding out that the foods we were eating everyday were causing internal physical harm to both my daughter and me ignited a flame from within that I hope will continue to burn throughout this process. My hope is to provide the support to other individuals and families that we wished we had. I will be understanding, sympathetic, and most of all, encouraging to these families to help them feel a sense of confidence and acceptance. Of course, running a business will be difficult with many ups and downs, but I believe my passion and desire to help others will allow this business to thrive.

I will be the sole owner of this service-based small business. When clients are interested in nutrition services, they will contact me through my website or by phone and we will set up the appointment time and place together. Before our first session, each client will receive a free fifteen-minute phone consultation to make sure there is a clear understanding of what to expect during our time together. Relationships with medical providers and other registered dietitians in the area will create potential sources of referrals. In the beginning, clients will be seen with any sort of nutrition issue, but over time as the business continues to grow, I will become more specialized by only seeing clients with food allergies or celiac disease. Once the business is running smoothly, a typical week will include seeing clients three days per week and working out of my home office the other two days of the week.

f. Goals

Short term goal 1: Sit for registered dietitian examination to become credentialed and apply for licensure in the state of North Carolina by the end of February 2019.

Short term goal 2: Form LLC (Limited Liability Company) and launch a private nutrition counseling practice focused on helping others with food allergies or celiac disease by April 2019.

Short term goal 3: Create relationships with at least 10 potential referral sources and develop marketing materials to distribute by June 2019.

Short term goal 4: Once licensed in the state of North Carolina, become a Blue Cross/Blue Shield insurance provider by June 2019.

Long term goal 1: Establish steady referral sources that will supply an average of 15 working hours per week by the end of 2019.

Long term goal 2: Expand services beyond individual one-on-one counseling to group classes, restaurant consultation, and grocery store trips by June 2020.

II. Marketing Plan and Analysis

a. Overview of Marketing Plan

Our diagnosis process and personal story will be the centerpiece of the marketing plan. Most registered dietitians in the area have had intense training very similar to what I have received at the Gillings School of Public Health. While Carolina's nutrition program ranks as one of the top programs in the nation, I do not believe this is the main reason people will decide to schedule a consultation with me. Additionally, considering most of my career has been spent in the middle school classroom, I do not have the seasoned expertise of conducting nutritional counseling for many years like some other registered dietitians in the area. People are going to decide to make an appointment with me because I have personal knowledge about living with and caring for someone with celiac disease. Also, my experience working directly with adolescents for so many years is going to make parents feel comfortable sending their children to me. These are the things that must be conveyed through any marketing activity or supplemental product pieces. Whether it is in the 'about me' section on the website or a short 30 second elevator pitch, people must understand when they schedule an appointment with me, they will get someone who is empathetic, knowledgeable, and will provide real-life solutions to their food related health issues. Finding clients will be my most critical task for the early years of the business. I intend to pursue a four-pronged marketing strategy that includes the following: 1. Establish referral relationships with medical providers, 2. Create robust social media and web presences, 3. Develop marketing materials that clearly state services offered and credentials, and 4. Mine my natural market for potential discounted "practice cases" and referrals.

b. Availability of Food Allergy and Celiac Disease Focused Registered Dietitians

To help quantify the number of registered dietitians in the area that are comfortable working with food allergies or celiac disease, I conducted a search using the Academy of Nutrition and Dietetics 'Find an Expert' tool. I used the keywords, 'food allergies, food intolerance, and gluten intolerance' which

revealed a total of 17 registered dietitians in the Raleigh/Durham/Chapel Hill area. (10) If an estimated 1% of the population have celiac disease (8) and another 4% - 8% have food allergies (11,12), and there are 2.7 million people living in the Raleigh/Durham/Chapel Hill area, then that's about 243,000 potential clients. 17 registered dietitians in this area is not an adequate number of dietitians to provide proper nutritional care to this potentially large group of people. Not only are there not enough registered dietitians in the area that focus on food allergies or celiac disease, the prevalence of these health conditions is increasing. At this time, approximately 15 million people in the United States have food allergies, including about 4% of people aged 18 years or older and roughly 8% of children. That is equivalent to about 1 in 13 children or roughly two children in every classroom. Additionally, about 3.2 million people, or 1 in 133 Americans, are projected to have celiac disease, but only 17% of those people are officially diagnosed. With 83% of people with celiac disease undiagnosed or misdiagnosed, there is plenty of room for increasing rates of diagnosis. According to Datamonitor healthcare group, diagnosis rates should increase to 50%-60% by 2019 due to efforts to raise public awareness. (20) In addition, a recent study conducted in 2017 by Dr. Edwin Lui, the director of the University of Colorado Celiac Disease Center found that by the age of fifteen slightly more than 3% of Denver children followed for up to twenty years had developed celiac disease (9). These findings provided a statistic 3 times as high as the current prevalence rate for the overall U.S. population. Currently the only treatment for both food allergies and celiac disease is removing the allergen or gluten from the diet. Both the American Gastroenterological Association and the American College of Gastroenterology consider visiting a registered dietitian knowledgeable of celiac disease and the gluten free diet as the "gold standard" in managing celiac disease. With a limited number of registered dietitians in the area specializing in food allergies and celiac disease and increasing prevalence, creating a business geared toward this population could be beneficial to both the user and the owner.

c. Pricing of Services

The first step in determining appropriate fees for services is to offer prices like other private practice dietitians in the area. After reviewing various websites, the prices listed for a one-hour individual counseling session ranged from \$120 - \$160 and prices for a 30 – 45-minute follow-up session were between \$50 and \$75. Dietitians set their fees based on reimbursement schedules from insurance companies and the only billable hours are those that are spent face-to-face with the client. Time spent preparing for the session, reaching out to the referral source, and following up with the client after each session are not considered billable hours. It is estimated each hour of face-to-face interaction will

require an additional 2 hours of time outside, totaling about 3 hours of work. While this rate may seem high to some, it encompasses much more than one hour of work. In addition to a la carte services, packages will also be offered. The price of each package is 10% lower than purchasing each session separately. Other services such as grocery store visits and pantry makeovers are priced to include travel time and materials needed.

Fees for Services -

Individual Initial nutrition counseling Session (60 minutes) - \$140

Follow up nutrition counseling sessions (45 minutes) - \$75

Packages will also be offered to provide consistent accountability and contact:

1-month "initial diagnosis" package - \$328 (10% reduction in price)

- 1 initial consultation (60 minutes)
- 3 follow up sessions (45 minutes each)
- Unlimited contact in between sessions via text message or email
- Starter basket of food products
- Restaurant recommendations

2-month package - \$530 (10% reduction in price)

- 1 initial consultation (60 minutes)
- 6 follow up sessions (45 minutes each)
- Unlimited contact in between sessions via text message or email
- Starter basket of food products
- Restaurant recommendations

Grocery Store Tour (60 minutes) - \$140

- Guided grocery stores will help you navigate the grocery store with your new food allergy or celiac disease diagnosis
- Nutrition labeling education and hidden sources

Pantry Makeover (60-90 minutes) - \$200

1-week meal plan - \$30

d. Assessing the Competition

As mentioned above, registered dietitians that specialize in food allergies and celiac disease are rarely found in the Raleigh/Chapel Hill/Durham area even though the healthcare industry is prominent in this area. Some larger nutrition private practices in the area such as Healthy Diets, Inc employee a few registered dietitians that claim they will counsel patients with celiac disease or food allergies. Large hospital systems such as Wake Med and UNC Healthcare have outpatient registered dietitians on staff that specialize in food allergies or celiac disease, but due to the large number of patients in the system their schedules are often booked and getting an appointment within a reasonable amount of time could be difficult.

Most private practice registered dietitians in the area specialize in areas such as eating disorders, gestational diabetes, or general healthy eating, which allows room for a focus in pediatric food allergies and celiac disease. For example, Carolina Nutrition Specialists, a nutrition counseling private practice owned by two registered dietitians with extensive experience offer similar services, but according to their website their target audience is adults with chronic diseases who are interested in weight loss. Maria Kennedy, MPH, RD, LDN, another private practice registered dietitian in the area, offers individualized nutrition counseling with a focus on diabetes, prediabetes, and gestational diabetes as well as PCOS, insulin resistance, preconception nutrition, and postpartum nutrition care. She does offer counseling for food intolerances and celiac disease, but does not mention specializing in the pediatric community. Lutz, Alexander, and Associates is a group of registered dietitians in the Triangle area who specialize in medical nutrition therapy for eating disorders in children, adolescents, and adults. Establishing a trusting and mutually benefit referral relationship with these dietitians will be a priority. Anna Lutz, co-owner of Lutz, Alexander, and Associates, expressed interest in sending patients with specific food allergy or celiac disease issues my way during an in-person conversation. In turn, I offered to refer those patients with potential eating disorder back to her. LG Nutrition, another private practice in Raleigh, appears to have a similar mission as my potential business, specializing in celiac disease and gluten intolerance, diabetes, gastrointestinal disorders, and obesity. Again, while the health issues are quite similar, there is no mention of addressing the concerns of the pediatric or adolescent population. In addition to some similar in-person, nutritional services, quite a few of these dietitians also offer Telehealth services. As our society continues to move in the direction of virtual healthcare, it will be imperative that my business stays up to date with methods of delivery as well. Networking within this group of private practice registered dietitians and others in the area will help me create a community of potential resources for both business and counseling advice, as well as possible sources for future referrals.

Other competitors in the area could include chiropractors and acupuncturists. While some chiropractic offices offer nutrition counseling services such as Chiropractic Nutrition Center in Cary, NC, others may choose to outsource to a registered dietitian. For example, Anderson Chiropractic Center in Holly Springs, NC provides services like cryotherapy, moist heat therapy, chiropractic adjustments and rehabilitation, and massage therapy, but there is no mention of nutrition services. Combining my nutrition services with the services offered by a chiropractor could help them achieve their purpose of caring for the "patient's overall well-being." Therefore, some chiropractors will be considered competition, while others could be a potential referral source. The same could be true for acupuncturists. A company named Acupuncture Wellness Connection, LLC operates out of Holly Springs and mentions nutrition advice as a potential service. While an acupuncturist is not officially qualified to offer medical nutrition therapy, she can provide general nutrition advice. Creating a relationship with both chiropractors and acupuncturists in the area will be advantageous to all parties since we hold very similar mission statements of helping people achieve overall health and wellness.

Allergy Partners, P.A., is a large private practice in the area that employs several certified allergists and some nurse practitioners, but there are no registered dietitians on their staff. In addition, the UNC Food Allergy Initiative, which is made up of expert allergists in peanut allergy, alpha gal allergy and general pediatric food allergies also does not have a registered dietitian on staff that specializes in food allergies. While these experts would love to counsel their patients on specific allergen-free eating plans, there is not enough time in their schedules with seeing new patients and conducting research. In theory, these competitors/practitioners could become referral sources as the services I will offer are more in depth than what they are able to accomplish during their visits.

e. Marketing Strategy

i. Target Market

While I am willing to serve all age groups, it would be my preference to serve clients that are between the ages of two and eighteen. Ideally, most of my clients will have either a food allergy, food intolerance, or celiac disease. However, in the beginning, being this specialized may reduce the number of referrals and it may be necessary to broaden the type of clients I will see. Potential clients could have other health conditions such as diabetes, prediabetes, hypertension, or gastrointestinal disorders, or someone could simply be interested in adopting a healthier way of eating.

ii. Tools Used

1. Initial Office Contact

Before any scheduled nutrition counseling session, clients will be offered a free 15-minute phone consultation. During this discussion, I will ask about the patient's specific goals for the session and I will share a summary of how the first session will be conducted including which items will be necessary to bring. Since this will be the first-time clients will be exposed to the practice, promptly returning phone calls and portraying a welcoming and informative tone will be crucial. A well placed "free 15-minute consultation" button will be displayed on the website guiding the client to an online scheduling tool where he/she can make an appointment for the consultation.

2. Getting Referrals

In the beginning, finding and obtaining referral sources will require the largest portion of my time. At first, I will contact those that are already familiar with who I am and the work that I have completed. For example, during my advanced internship for my graduate program, I worked at the UNC food allergy initiative in Chapel Hill, NC and developed relationships with several allergists and pediatric gastroenterologists that could become potential sources of referrals. I worked very closely with these physicians during my 10-week internship, which allowed me to shadow their clinic visits and offer suggestions from a nutritional perspective. Additionally, during my program I conducted research on nutrition counseling private practices in the area that allowed me to establish relationships through interviews with fellow registered dietitians in the area. In our discussions, most dietitians shared their willingness to refer patients with food allergies to me since most of them had different areas of expertise. Within my social group and my children's network of friends, I can also share my goals and availability since they will also know our story directly. Some friends can serve as "practice cases" where I will meet with them for free or at discounted price and then they can write a testimonial or comment on a social media site about our experience. Doing this with five to ten families in the beginning will give me great experience and will add credibility to my marketing approach by providing personal stories. After several months, the plan is to become an insurance provider with Blue Cross/Blue Shield of NC, which will also serve as an additional referral source.

Once all potential familiar referral sources have been initially approached, it will be necessary to expand my marketing strategy to people and places that I do not know using a variety of methods and tools. Initially, I will offer groups classes or informational sessions at various fitness or community centers in the area. During these sessions, I can offer helpful nutritional advice and advertise for individual one-

on-one counseling sessions for those that are interested. To establish relationships with potential steady referral sources, I will provide short lunch and learn opportunities for pediatrician and gastroenterology practices, which will include leaving a supply of brochures and business cards with my contact info and description of my services.

3. Evaluating Services

Not only will it be imperative to find and attract new clients for nutrition counseling, it will also be important to keep those clients engaged and understand their feedback about their experience working with me. After either an initial or follow-up visit, clients will be sent a very short survey via text message where they will provide a rating of their visit using a scale from 0 to 10. As another option, clients will have the opportunity to provide feedback in the form of an open-ended explanation to serve as potential testimonials for the website or added to a collection of other data gathered. Both the rating scale and open-ended response options will provide me with an opportunity for self-reflection, potential areas of improvement, and quantifiable feedback for any future sources of supplemental funding and identify my happiest clients and potential referral sources. Additionally, at each new visit clients will be asked how they heard about me, whether through a friend, on the internet, or by their physician. Every three months, I will analyze this data for specific trends that could impact how I do business. Based on these results, adjustments in the marketing strategy will be made. Acting as the sole owner of a service-based small business will require a great deal of flexibility and openness to change. If client feedback shows a service or an approach is not effective, then it must be re-evaluated to meet the individual needs of the clients.

4. Social Media and Internet Presence

To operate a business in today's technology driven society, creating a strong social media presence is imperative. I will create a business Instagram, Facebook, and Twitter account that will include contact information, a description of my services, and a small biography. Through social media, I will portray a sense of professionalism, expertise, approachability, trustworthiness, and responsiveness. Regular posts will include helpful tips for living a gluten free or allergen free lifestyle including recipes, reliable restaurants in the area, and safe products that we trust. Additionally, potential clients could access this information to validate their intentions of making an appointment. Using social media will allow me to reach many people quickly rather than using traditional methods of advertisement. Once the Telehealth

portion of the business has started, social media will allow for introductions of potential clients that do not live close by.

Adding my name, credentials, and areas of interest to various lists of experts will provide additional places for those conducting a basic internet search to find me. Once I am officially a registered dietitian nutritionist (RDN), I can enroll in the "Find an Expert" program offered by the Academy of Nutrition and Dietetics found on their website, www.eatright.org. This program gives users the opportunity to search for a qualified registered dietitian nutritionist by zip code and area of expertise. Listing my business name and credentials on another internet site titled, Health Profs, www.healthprofs.com, could also generate additional potential clients. Once I become an insurance provider with either Blue Cross/Blue Shield or another insurance company, my name will be given as a reliable resource for nutrition counseling for those with that health insurance. Since I am specializing in celiac disease and food allergies, creating relationships with national non-profit foundations, such as Beyond Celiac or the Food Allergy Research and Education foundation, will be imperative. Many people with these diseases look to well-known non-profit foundations to find dietitians in their area they can trust.

Before the first client is seen, I will create a professional and attractive website that is easy to navigate. Necessary content on the website will include sections for 'about me,' description of services, scheduling appointments, gluten free blog, gluten free recipes, testimonials, and new client forms including food records, referral forms, and intake forms. The website will be created and maintained using Square Space, an intuitive and easy to operate website building software. In some ways this website will be the most important aspect of the marketing plan, as this will be the place potential clients will get to know who I am and decide if they would be willing to trust me.

III. Financial Plan

To own and operate a nutrition counseling small business, there will be both fixed and variable costs. In the beginning, the fixed annual expenses will include obtaining an LLC (\$125), registration fee for Registered Dietitian Examination (\$200), license application to practice in the state of North Carolina (\$175), a subscription to the Nutrition Care Manual (\$194), a membership to the Academy of Nutrition and Dietetics (\$204), and the Nutrition Entrepreneur practice group (\$40), and liability insurance (\$140). Also, equipment will need to be purchased including a mobile all-in-one printer (\$79), square reader device (\$49), and an Apple Mac Book Computer (\$1000). Recurring fixed monthly expenses include

subscriptions to Up to Date (\$45/month), Healthie Application (\$89/month), Office Ally (\$39/month), Square space website platform (\$26/month), cellular data and phone service (\$150/month), and eventually office rental space (\$300/month). One variable monthly expense is the Square transaction fee of 2.75% per transaction, which will be charged each time a credit card is swiped. As a requirement to keep my registered dietitian credentials up to date, I will complete a total 75 Continuing Professional Education units every 3 years that will cost an average of \$25 - \$30 per unit.

As of January 2018, the current Medicare Fee Schedule gives a reimbursement rate for registered dietitians providing medical nutrition therapy face-to-face in a non-facility (private practice) in North Carolina as \$28.48 for every 1 unit (1 unit = 15 minutes). (24) To factor in work that will be completed outside of the face-to-face time including billing, scheduling, follow-up notes, and meal planning, my rate will be increased to \$35/every unit. This rate is similar to the Blue Cross/Blue Shield reimbursement rate. In terms of projected income, if an average of 15 hours per week are spent seeing clients face-to-face, an average of \$2100 will be made as revenue, about \$8,400 each month. Accounting for an average of \$400 in both fixed and variable monthly expenses, total monthly income could be around \$8,000. As with any business, the number of actual clients will be difficult to predict each week, so it is likely this projected income will vary considerably.

IV. Supporting Documents

a. Resume

JULIE S. KENNEDY, M.Ed.



EDUCATION

University of North Carolina – Chapel Hill
Gillings School of Global Public Health
Master of Public Health/Registered Dietitian Program, December 2018

Georgia State University – Atlanta, Georgia School of Education Master of Education, August 2006 Major: Middle Childhood Education – Concentration in Math

University of North Carolina – Chapel Hill School of Education Bachelor of Arts, May 2000 Major: Middle Grades Education – Concentration in Math and Science

EXPERIENCE

Dietetic Intern, UNC Food Allergy Initiative, Chapel Hill NC (August 2018 – October 2018)

- Worked collaboratively with expert certified allergists and pediatric gastroenterologists in a variety of settings to develop individualized plans for both adult and pediatric patients
- Developed educational handouts for patients to gain an understanding of the alpha gal meat allergy and other food allergies including nutritional implications and sample meal plans

Clinical Dietetic Intern, Wake Med Hospital, Wake County, NC (May 2018 – August 2018)

- Completed 480 hours in a variety of clinical rotations: Medical ICU, Pediatric ICU, Neuro ICU, Cardio-thoracic ICU, Surgery and Trauma ICU, cardiology, long-term acute rehabilitation, and general medicine
- Rotated through a 40-hour food service experience
- Used medical nutrition therapy for both acute and ambulatory patients by completing nutrition assessments, interventions, and plans for monitoring and evaluation
- Provided appropriate nutritional education

Dietetic Intern, Wake County Cooperative Extension, Wake County, NC (May 2017 – August 2017)

Completed 320 hours of public health nutrition within the community setting

- Created a Breakfast in the Classroom program implementation and outreach guide for Wake County Public Schools
- Collaborated with a local farmer to create and implement a 6-week Farm It Forward course for lower income families living in Wake County
- Assessed the partnerships between local farmers and restaurants in Wake County and created a google map to display the results

Graduate Assistant, UNC Gillings School of Global Public Health, Department of Nutrition, Chapel Hill, NC (January 2017 – present)

- Abstracted data from end of study interviews for a Type 1 diabetes intervention study
- Created the diet education materials for a pilot study involving a lower carbohydrate, lower calorie diet intervention for overweight participants with Type 1 diabetes
- Developed the script for the research study Registered Dietitian

Middle School Math Tutor (March 2013 – August 2017)

- Met one-on-one with middle school students to reinforce mathematical concepts
- Developed additional study materials to introduce upcoming topics in advance to ensure success
- Communicated with parents to determine each student's strengths and areas of weakness
- Tailored each tutoring session to meet each student's individual needs

8th grade Math Teacher, Wake County Public Schools, Apex, NC, Apex Middle School (October 2013 – May 2014)

- Implemented and taught the Math 1 and Math 8 Common Core Curriculum
- Worked collaboratively with other 8th grade math teachers to create engaging, standardsbased math lessons
- Differentiated instruction to meet the needs of special education students as well as academically gifted students

7th and 8th grade Math Teacher, Cobb County Public Schools, Marietta, GA, Hightower Trail Middle School (June 2000 – May 2002) and Dickerson Middle School (August 2002 -May 2012)

- Used an organized framework for instructional planning to support standards-based instruction
- Differentiated instruction to meet students' readiness levels, language proficiency, and interests
- Worked collaboratively with an inclusion math teacher to develop and use common assessments in at least one team-taught class per year
- Acted as the team leader for 8th grade (2003-2007)

SKILLS Proficient in Smartboard Notebook program, Blackboard, PowerSchool grading software program, Microsoft Power Point, Word and Excel, R software, EPIC electronic health recording system.

VOLUNTEER WORK

- Beyond Celiac Patient Advisory Council Member (January 2015 present)
- Beyond Celiac Team leader for Patient Advisory Research Sub-committee (January 2016 December 2016)
- Beyond Celiac Core Work Team (June 2015 July 2016)
- Meals on Wheels Chapel Hill, NC (January May 2015)
- Beyond Celiac's Research Summit for Celiac Disease (April 2015)

HONORS AND AWARDS

- Nominated as Teacher of the Year (2010)
- Committee Member of School Improvement Planning Team (2006, 2007 and 2008)
- Supervised a Georgia State University student teacher (2004 and 2012)
- Awarded Lettie Pate Whitehead Foundation Scholarship (2017 and 2018)
- Awarded MaryAnn Farthing MPH Scholarship (2018)

b. Contracts or leases

c. Articles of incorporation

d. Cash flow analysis

Julie Kenned	y Nutrit	ion Serv	ices - 20	19									
	-												
Year End Goal:													
Clients per week	Rate per	Weeks per	Annual	Monthly									
(hours)	hour	year	Revenue	revenue									
15	\$140	45	\$94,500	\$8,400									
Projected													
													Annual
	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Revenue
Hours per week	0	0	2	4	10	10	15	15	15	15	15	15	116
Hours per month	0	0	8	16	40	40	60	60	60	60	60	60	464
Projected Revenue	\$0	\$0	\$1,120	\$2,240	\$5,600	\$5,600	\$8,400	\$8,400	\$8,400	\$8,400	\$8,400	\$8,400	\$64,960
Projected													
Fixed Monthly													
Up to Date			\$45	\$45	\$45	\$45	\$45	\$45	\$45	\$45	\$45	\$45	
Healthie App			\$89	\$89	\$89	\$89	\$89	\$89	\$89	\$89	\$89	\$89	
Office Ally			\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	
Square space	\$26	\$26	\$26	\$26	\$26	\$26	\$26	\$26	\$26	\$26	\$26	\$26	
Cellular data and		7-0	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	\$150	
Rent (3 days/wk)				, i			\$300	\$300	\$300	\$300	\$300	\$300	
Fixed Annual													
LLC					\$125								
Mobile all-in-one					\$79								
Square reader					\$49								
Apple MacBook					\$900								
Nutrition Care													
Manual Subscription					\$195								
AND Membership						\$204							
NE DPG						\$40							
Liability Insurance					\$140								
Variable Monthly													
Square transaction			\$31	\$62	\$154	\$154	\$231	\$231	\$231	\$231	\$231	\$231	
Total Expenses	\$26	\$26	\$380	\$411	\$1,991	\$747	\$880	\$880	\$880	\$880	\$880	\$880	
													Projected Annual
Total Monthly	-\$26	-\$26	\$740	\$1,829	\$3,609	\$4,853	\$7,520	\$7,520	\$7,520	\$7,520	\$7,520	\$7,520	\$56,100

e. Forms (2)

i. Patient registration form

First name:		Las	t Name:		Date:		
Address:			City/State/Zip code:				
Home phone number:	Wo	ork phone	e numbe	er:			
Cell phone number:	Em	ail addre	ss:				
Social security number:							
Occupation:		Dat	te of birth	າ:	Sex:		
Who referred you?							
Physician:							
Physician address:			_ Physicia	an phor	e number:		
Insurance provider name:			ID r	number	:		
Group number:							
Do you have another plan? If YE	S, plea	se state	which or	ne:			
Who is responsible for bill/copay?							
Amount of Copay:							
Do you need a referral for this visit?	YES	NO					
Do you have the referral with you?	YES	NO					
Are you covered for nutrition visits?	YES	NO					
Have you confirmed coverage with you	r insura	nce pro	vider? *	YES	NO		
Have you met your yearly deductible fo	r specia	alists:	YES	NO			

*If visit is denied by insurance provider, you will be responsible for payment

Major nutrition	concern(s)		
Height:	Weight:	Usual Weight:	_
Medications:			
Supplements:			
Do you have his	tory of intestinal pro	oblems, such as bloating, excessive gas,	constipation, or diarrhea?
	/ food allergies or in	tolerances?	
Do you smoke c	igarettes:	If YES, how many years?	Number per day
	(illnesses, surgeries)):	
Family Medical I	History:		
Past diet history	:		

Exercise (how often/type/duration):								
How many meals and snack do you eat per day? Meals Snacks								
Do you ever skip meals? YES NO								
If YES, please explain:								
Do you ever eat because you are (please check if YES)								
lonely bored stressed anxious sad								
depressed happy tired angry								
Which do you enjoy more?								
eating along eating with others								
Do you chew your food well before you swallow? YES NO								
Do you read Nutrition Fact Labels? YES NO								
If YES, what do you look for on the label?								
Who does the cooking in your house?								
Do you know how to cook? YES NO								
Who does the grocery shopping?								
Do you have enough money for food? YES NO								

ii. Office and Payment Policy

Consultations

The initial visit is 60 - 90 minutes. Follow up visits are 30 – 60 minutes. Office visits must end on time, so please be on time.

Please bring a three-day food record with you to the visit. If you have had any recent lab work done, bring the results from that with you as well.

Referrals

If you need a referral from your physician, please bring it with you to the initial visit.

Cancellations

If you need to cancel your visit, please do so at least 48 hours prior to the visit. Otherwise, you will be charged for 50% of the visit.

Insurance Payments

Please contact your insurance provider before we meet to ensure that you are covered for nutrition visits. If you have NOT met your yearly deductible for specialists, you should pay for the visit at the time of service and the claim will be sent to your insurance provider.

If any fees are not covered by insurance, I understand that I am financially responsible for all accumulated charges. If I don't have a referral for this visit and require a referral, I will be responsible for paying for this visit today. All unpaid balances over 30 days will be sent to collection, which will increase fees. I will also be fully responsible for payment of any appointments that are not canceled in advance.

I have read the financial obligation clause above.		
Responsible party	Relationship	Date

iii. Permission to release health information form

I grant the right to Julie Kennedy,	, MPH, RD, LI	ON, MEd to relea	se and/or obtain health information about
	(patie	nt's name) to m	y third-party payers and the following
health care providers or persons:	:		
Signature of person competing th	nis form:		
Relationship to patient:	Self	_ Parent	_ Guardian
Print Name			

iv. Acknowledgement of Receipt of Notice of Privacy Practices

PATIENT:							
understand that under the Health Insurance Portability and Accountability Act of 1998 I have certain							
rights to privacy in regard to my protected health information (PHI). I have received, read, and							
understand the notice of privacy practices.							
The practice reserves the right to change its terms of the notice of privacy practices. I understand that							
the practice will provide a current notice of privacy practices upon request.							
Signature:							
Relationship to patient: Self Parent Guardian							

v. 3-day Food record

Date	Time	Meal	Food	Amount
				Consumed

vi. Goal Setting Form Date: _____ Patient: _____ Goals to work on for next visit: 1.) 2.) _____ Incentive(s) for goals: 2.) _____ 3.) _____

Patient Signature:

Next nutrition visit date: _____

vii. Follow up letter

[Date] [Physician's name and address] Re: [Patient's name] Date of birth: [Patient date of birth] Dear [Physician's name]: Thank you for referring [Patient's name] for medical nutrition therapy for [diagnosis]. [Patient name] came to see me on [appointment date] for an initial consultation. [Patient name] is [height in feet and inches] tall and weighs [weight in pounds]. [His or her] body mass index (BMI) is [number]. A complete nutrition assessment indicated that [description of findings]. I reviewed my findings with [patient name] and together we established strategies to achieve [his or her] goals. A follow-up appointment has been scheduled for [date]. Thank you again for referring [patient name]. Your referrals are always appreciated. Regards,

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