

## Appendix F.

### Changes Seen in Clinical Research Center Dietary Units over the Years

- Decreased time monitoring stool output with use of stable isotopes for balance studies .
- Changed from the CRC program to the GCRC program
- Developed expertise in the application of new nutritional assessment instrumentations such as indirect calorimetry and dual-energy x-ray absorptiometers (DEXAs).
- Expanded our services to encompass the expenditure side of energy balance, to include exercise testing and activity assessments.
- Traded in hours spent with pencils for hand diet calculations for software products that allow us to manage complex nutrient intake measurements.
- Similarly, computerized nutrient data banks facilitated analysis of food records and 24 recalls for many, many nutrients and nutrient combinations.
- Experienced budgets that swell and shrink.
- Reflected our scientific role by changing our titles from *Research Dietitians* to *Bionutritionists*.
- Changed our units from *Dietary* to *Bionutrition Unit*
- integrated Bionutrition into the research structure for initial review of proposed studies.
- Serve on Institutional Review Boards.
- Modernized from balance scales to digital scales with computerized data output.
- Contributed as first authors and co-authors to peer-reviewed publications, generated from research study visits on GCRCs.
- Received funding to implement independent research projects.
- Trained research technicians to assist bionutritionists in anthropometric assessments, data entry for food analysis and intake, and completion of indirect calorimetry and DEXA.

Enhanced anthropometric measurement techniques to provide better measurement of the body including circumferences, circumference ratios, sagittal diameters, and height measures not requiring standing (ie sitting height).