

**DIET SHEETS FOR
FOOD SERVICE
PERSONNEL**

*Now Available on
PEN!!*

HOW DO I...

*Get A Quick Update
And Overview On A
Certain Topic in PEN*

**NUTRITION
RESEARCH &
MASS MEDIA**

An Introduction

**THERE'S AN APP
FOR THAT**

*Challenges and
Opportunities for
Dietitians*



*The Global Resource
for Nutrition Practice*

eNews

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FROM THE EDITOR

With a change in season upon us, I was doing some garden maintenance, when I heard a radio advertisement from our provincial dietitian’s regulatory body. The ad promoted the dietitian as the food and nutrition expert who can translate the science of nutrition into everyday practical solutions. The ad encouraged listeners to seek the counsel of a dietitian on all matters food and diet-related.

As I listened, I looked at my garden and saw it as a metaphor for evidence-based dietetic practice. Just like a garden needs love and care to thrive, dietitians have an important set of knowledge and skills to maintain requiring several inputs.

- Just like a garden needs water and nutrients, dietitians need to add in new research findings and knowledge to stay current.
- Just as a gardener needs to

identify what plants to keep and which are weeds, dietitians need to know what knowledge to keep, and what knowledge to update.

- To manage a garden, some basic tools are needed - a shovel, a rake, seeds, and a watering can [to name a few]. Dietitians need to have tools to help them “dig into” nutrition research, to “rake” the research to pull out the less relevant research from that which is well designed and could influence our practice.

- Just like weeds often find ways to come back, dietitians need to promote evidence-based information when the “flavour of the day” fad comes to be popular.

- Gardeners have questions and need to know where they can go to find the answers to their questions. Dietitians need to have their go-to place where they can go to find the answers to their questions – what information is accurate? What resources will help to set the record straight?

- And finally, gardeners need to

HOW DOES YOUR GARDEN GROW?

carve out time to maintain their garden. Dietitians need to find time to maintain their knowledge and skills.

Regardless of whether you are cleaning out or just planting your garden, each season will present unique challenges. But with having the right tools and knowledge, you’ll set your garden up for success! The same is true for dietetics.

In PEN eNews 1(4), we have many great articles for you including Nutrition research and mass media: An Introduction; There’s an App for that – challenges and opportunities for dietitians; What’s New in PEN, including Diet Sheets for Food Service Personnel. You’ll meet one of PEN’s Evidence Analysts, Dawna Royall, as well as a PEN in Action spotlight on Canadian dietitian Nicole Spencer. This and more in PEN eNews 1(4).

Kristyn Hall MSc, RD
Editor, PEN eNews



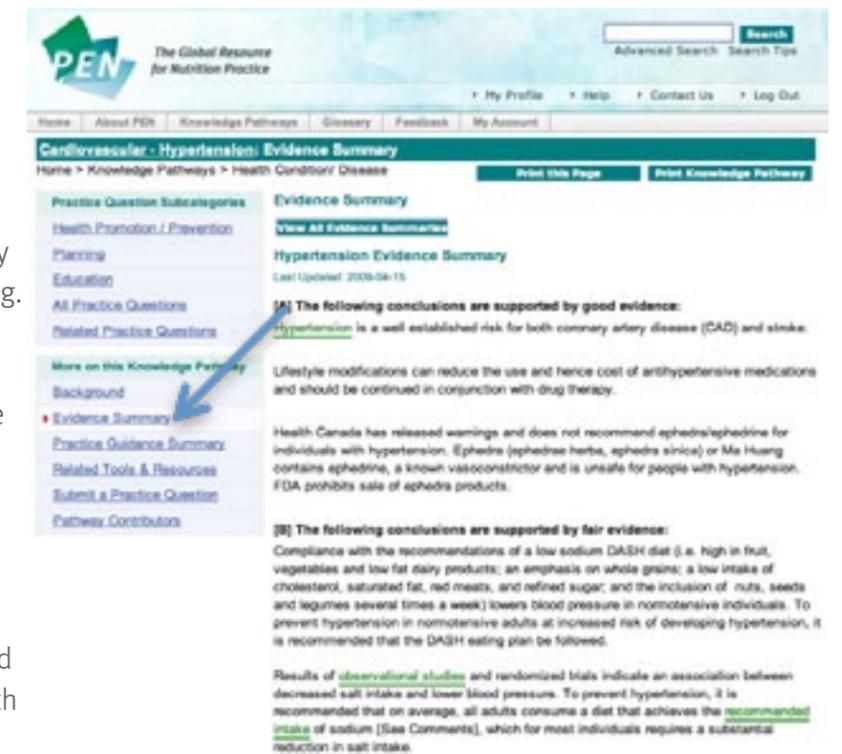
HOW DO I... Get A Quick Update And Overview On A Certain Topic In Pen?

Written by Lisa Koo, RD
PEN Quality Assistant

The PEN team is constantly receiving questions, suggestions and feedback from users. Here is a question we recently received: What if I just want a quick update and overview on a certain topic? Is there any option for getting an overview of answers (e.g. key practice points) in one place on PEN?

Yes – what you are asking for is the Evidence Summary for a specific knowledge pathway. The Evidence Summary provides a summary of the evidence-based recommendations on a particular topic and the recommendations are organized under the four grades of evidence. Evidence-levels range from A (good evidence based on well designed studies with a sufficient sample size) to D (where there are no studies on the topic or single studies with major design flaws or contradictory results where conclusions can not be drawn). Evidence summaries can be particularly useful if you want to quickly check what practice recommendations are supported by good evidence and which ones need more research to support them.

To access, once in the appropriate knowledge pathway, click on the Evidence Summary on the left hand side of the page.



Note: later this year PEN will launch a new look. At that time, access to the Evidence Summary will be on the right hand side of the page.

We love to hear from our users!

If you have any questions or suggestions about PEN or this article, please email us at eNews@pennutrition.com

WHAT'S NEW IN PEN

Written by: Kerri Staden BSc, RD and Jane Bellman MEd., RD
PEN Resource Managers

Have you heard about the latest research on acai, bitter orange (synephrine), guar gum, and ephedra/ephedrine (Ma Huang)? Are they safe and effective for weight loss? Click here for the scoop on these four + 25 other weight loss supplements...

<http://www.pennutrition.com/KnowledgePathway.aspx?kpid=15325&pqcatid=ALL>

Here is a quick glance at some of the new and updated content in PEN. In your search results, or when viewing the table of contents by practice category, look for the **UPDATED** symbol next to the Knowledge Pathways to see more new and enhanced content!

Updated Practice Questions

In diet counseling with individuals, is there evidence that use of a computerized nutrient analysis/

assessment program to calculate nutrient intake and compare dietary intake to recommended nutrient values, improves client intake reporting and motivation to make diet changes when compared to traditional counseling and manual recording methods (for example interviewer-collected diet history, diet record books, comparison to checklists or food groups)?

In adults with elevated blood lipids, what are the effects of specific dietary components (e.g. soy, fibre, plant sterols, nuts, fish oil) or food combinations (e.g. portfolio diet, Mediterranean diet) on blood lipids?

Does a child's growth pattern change at certain points during the first five years? Is there a corresponding effect on their appetite?

If you have a practice question or a suggested tool/resource, email us at eNews@pennutrition.com

DIET SHEETS FOR FOOD SERVICE PERSONNEL - NOW AVAILABLE IN PEN!!

You asked for it - resources that focus on diet information that can be used by food service staff during meal service to prepare standard meal trays for those on specific diets. To determine the

specific food service stakeholder needs, in the fall of 2010, members of the PEN team sent an online survey to contacts from the following Dietitians of Canada Networks: clinical nutrition managers, food service administrators and gerontology.

The purpose of the survey was twofold: to obtain feedback on current food lists and other PEN resources, and to determine what additional resources were needed by staff to support food services. The key survey result was a need for easy to read and accessible

diet sheets, which contain a listing of food to serve/not serve to enable food service staff to safely prepare special diet meal trays for new clients until the dietitian could provide detailed client follow-up.

The first diet sheets for food service personnel published on PEN are:

High Fibre Diet, High Protein/High Calorie Diet, Low Sodium/Low Salt Diet

Each diet sheet lists the following information:

- The title of the diet
- Key features of the diet
- Essential diet information
- Food lists
- Additional resources.

In addition, the Guidelines for Using PEN's Food Service Diet Resource describes the

target audience, how to use the resources and general diet information. These diet sheets are not intended to be used as client teaching tools. They contain very basic dietary guidelines and are written for food service staff.

You can access these resources on PEN in 3 ways:

1. On the PEN homepage - look in the PEN Handouts box under the What's New Box and on the soon-to-be released "new look" PEN click on the PEN Handouts Collection icon; or
2. Go to the "Food Service" knowledge pathway and click on the Related Tools and Resources link; or
3. Do a general search for "food service" or the name of the diet.

At about the same time as the online survey was conducted to determine food service staff needs, a focus group with food service professors/faculty at universities was completed to explore what else is needed to support evidence-based dietetic practice in food service.

What else is PEN doing to support evidence-based dietetic practice in food service?

- Development of diet sheets for cardiovascular disease and osteoporosis with others to follow in the coming months.
- Additional questions and topic areas will be added to the Food Service Knowledge Pathway.
- Creating guidelines for developing food policy in food services.

We welcome any feedback you have on these tools and resources. Your feedback will ensure tools are valuable to your practice. Email us at enews@pennutrition.com

New Knowledge Pathways

Telehealth/Teledietetics

Updated Knowledge Pathways

Nutrigenomics

Healthy Weight/Obesity - Natural Health Product

NUTRITION RESEARCH & MASS MEDIA

AN INTRODUCTION

Introduction: Over the past 100 years, great strides have been made in improving the health of people the world over. In the United States, for example, life expectancy has increased by about 25 years for men and 30 years for women, largely due to scientific advances that have helped prevent and treat many serious diseases. The end results of science undeniably benefit us, but to people who don't work in the field, the scientific process can also be frustrating. This is particularly true for anyone trying to make important decisions about his or her health. What should I eat? How much exercise should I get? How often should I see the doctor for health checks? We all expect that science—specifically, health research—will provide answers to these very important and personal questions.

Unfortunately, it's often hard to get a straight answer. One day the "experts" say one thing. The next, they seem to say another. Then it all appears to switch back again. Such flip-flops can be maddening, especially when you're making

your best effort to live a healthy lifestyle. Why go to the trouble of making big changes when today's highly recommended choice may be tomorrow's bad example? The classic case of such flip-flopping in nutrition is the butter-versus-margarine question. More than 30 years ago, as research began to suggest that saturated fat might be bad for the heart, recommendations were made that encouraged people to switch from butter, which is high in saturated fat, to low-saturated-fat margarine. However, further research showed that, in many cases, margarine contained a type of fat (known as trans fat) that's even worse for the heart than saturated fat. This seeming about-face led many people to throw up their hands in frustration.

But the butter-versus-margarine question is also a well-known, if somewhat vexing, example of how research often works. Scientific research is a dynamic process that moves forward slowly. Recommendations are made based on the best science available at the time. However,

with new research and new results, these recommendations may be revised.

On the other hand, such radical shifts in advice are rare today. There's far more research on diet and health available now than there was 30 years ago, when the original recommendation to switch to margarine occurred. This means that contemporary diet recommendations tend to be better-grounded—based on the results of many studies—and involve much less guesswork than in the past.

But contradictions in research results still occur. They are an inevitable part of the scientific process. Researchers are constantly performing studies and reporting their results. And when so many different people study each topic in so many different ways, it's natural that the results won't always be the same. What is the key, though, and what drives health recommendations is the weight of evidence on a particular topic—what all the results as a whole point to.

Research study types: There are many different types of research studies, and each has distinct strengths and weaknesses. In general, randomized trials and cohort studies provide the best information when looking at the link between a certain factor (like diet) and a health outcome (like heart disease).

Read more about these types of research studies:

- Laboratory and Animal Studies
- Case-Control Studies
- Cohort Studies
- Randomized Trials

Read an example of how different types of studies shaped health recommendations about fiber and colon cancer.

How Nutrition Research Works

The research process is like placing stones on an old-fashioned balance scale. When enough weight accumulates on one side, the scale tips in favour of a particular recommendation. And the more weight there is on one side, the stronger the recommendation is and the more evidence it would take to change it.

If, on one side of the scale, you have over 40 studies showing that moderate alcohol intake can lower the risk of heart disease and, on the other, one or two studies that contradict those results, the scale would hardly budge. The weight of evidence would still be greatly in favour of moderate alcohol intake protecting against heart disease. Indeed, the link between

alcohol and heart disease is so strong that it's known as an established relationship.

But not all topics are as clear-cut as this. Often, the weight of evidence is not as great. In some cases, only a handful of studies have addressed a particular question. In other cases, a large number of studies may support one side, but there may be some particularly significant studies supporting the other side as well—just enough to cast some doubt. In these instances, we'd say that there is a probable link between a behaviour and a disease. The value of eating moderate amounts of nuts to protect against heart disease is an example of a probable link.

There are also possible links, where the weight of evidence is still less and, in effect, the scale only tips slightly to one side. Possible links often develop in new, emerging areas of study, where a few studies have found a relationship, but more studies need to be done to confirm the results. A high intake of trans fat and an increased risk of diabetes is an example of a possible relationship that needs to be confirmed.

To carry this analogy further, the scale's likelihood of tipping reflects not only the number of stones placed on one scale, but also the size of those stones. Bigger stones will make the scale tip faster than smaller ones. Likewise, big, well-designed studies tend to play a more important role in establishing a relationship—and in shaping health recommendations—than smaller, less-well-designed studies.

Although the details can get complicated, large studies that follow human participants over time (randomized trials and cohort studies) tend to provide more reliable results than smaller studies that ask people about their past activities (case-control studies).

Continued on next page..



Deciphering Media Stories on Diet

Even at its best, science is a painstaking, deliberate process, which doesn't fit very well into the cut-and-dry, newer-is-always better world of the mass media. And it's the media reports on health that are responsible for much of the frustration the public feels toward the public health community. With their emphasis on short, "newsworthy" pieces, the media often only report the results of single studies, and many stories are chosen simply because the results run contrary to current health recommendations. Because such reports provide little information about how the new results fit in with other evidence on the topic, the public is left to assume that, once again, the scientists screwed up and are now backtracking.

Fortunately, in many cases it only takes a few incisive questions to get at the heart of a research-related news story and see how important the results are for you

Whenever reading or watching a news story on health, keep these questions in mind:

- Are they simply reporting the results of a single study? If so, where does it fit in with other studies on the topic? Only very rarely would a single study be influential enough for people to change their behaviors based on the results.
- How large is the study? Large studies often provide more reliable results than small studies.
- Was the study done in animals or humans? Mice, rats, and monkeys are not people. To best understand how food (or some other factor) affects human health, it must almost always be studied in humans.
- Did the study look at real disease endpoints, like heart disease or osteoporosis? Chronic diseases, like heart disease and osteoporosis, often take many decades to develop. To get around waiting that long, researchers will sometimes look at markers for these diseases, like narrowing of the arteries or bone density. These markers, though, don't always develop into the disease.
- How was diet assessed? Some methods of dietary assessment are better than others. Good studies will have evidence that the methods have validity.

personally. One of the most crucial things to keep in mind is the issue we've already discussed above:

How does a given study fit into the entire body of evidence on a topic?

With these tips and a better understanding of the world of health research, you can look at

health information with a more discerning eye. While this won't be a guarantee against frustration, it should help you embrace health recommendations—and the healthy lifestyle they promote—with more confidence.

What did you think of this article? Email us at eNews@pennutrition.com.

Thank you to PEN volunteers

Our global PEN partnership has benefited from volunteer efforts around the world! Please take a moment to read and acknowledge your colleagues who have served as authors or peer reviewers for PEN content since May 2011. If you would like to be a PEN author or reviewer, please click here to send us your contact information: <http://www.pennutrition.com/BecomeAuthor.aspx>



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SHAPING OUR FUTURE

"After working on my PEN internship project, I feel that I am better equipped to assess nutrition-related literature. I also have more confidence in my ability to locate appropriate sources of information. I am familiar with the use of PEN, which I think will be a valuable resource for my future career." Danielle Crutchley, MHS, Dietetic Intern

How has PEN influenced your nutrition and dietetic training? Email us at enews@pennutrition.com

PEN INSIDER

Spotlight on Dawna Royall



Dawna Royall MSc, RD
Evidence Analyst Contractor
Dietitians of Canada

“My biggest learning from PEN is the availability of so many searchable databases to find evidence.”

My role in the PEN Team involves.... As an evidence-analyst for PEN, my role is to research and write knowledge pathways (KPs) and practice questions (PQs) for PEN - this includes updating existing content and writing new content. Since many dietitians contribute PEN content, I am also involved in mentoring new writers and reviewing content submitted to PEN. Knowledge pathways that I have recently been involved in writing include: cardiovascular disease, mental health disorders, nephrology, nervous system (Parkinson’s disease) osteoarthritis, rheumatoid arthritis, wound care and the lifecycle KPs: pregnancy and lactation.

A day in my life as an evidence analyst A typical PEN day starts by checking the health news and evidence updates in my inbox. I electronically file relevant studies, reviews or guidelines that I will refer to in future work. Then I begin doing research on the current KP or PQ that I am working on. The isolation of my workday is sometimes broken by teleconference meetings with individuals from the PEN team (in Canada and abroad!) and of course there is regular email traffic back and forth about PEN content.

Biggest learning from evidence-based practice; from taking a PEN approach

My biggest learning from PEN is the availability of so many searchable databases to find evidence.

Although PubMed is my staple, there are important ways to limit PubMed searches to make the results more relevant, and also many other databases that can help to identify key evidence to answer practice questions.

What impact does evidence-based practice have on nutrition and dietetics?

Evidence-based practice represents best practice, but finding and applying research evidence to everyday health decisions is a major challenge! We are so fortunate to have PEN as a knowledge translation tool to facilitate evidence-based practice by dietitians.

My favourite thing about PEN is...

The great PEN team I have to work with. Although we don’t see each other regularly, we are in regular contact, and one email question can illicit lots of useful feedback.

What strategies do I use to stay on top of my topic areas?

I subscribe to a number of different online health newsletters and evidence updates including: Agency for Healthcare Research and Quality (AHRQ), Canadian Obesity Network (CON), Cochrane, Health-Evidence.ca, Medscape, and Obesity+. I electronically file relevant papers that I refer to when I’m updating PQs.

How to reach me...

Send an email to: dawna.royall@sympatico.ca

THERE'S AN APP FOR THAT - CHALLENGES AND OPPORTUNITIES FOR DIETITIANS

Written by: **Kristyn Hall, MSc, RD**
PEN Evidence Analyst

It seems that there is an App for everything! An App is short for Application, a software program that you use on a computer or a mobile device (smart phones – e.g. iPhone, Blackberry, Android, or tablet e.g. iPad, Galaxy). Apps are intended to make it easier to do the things you do every day - check the weather, news, sports, manage finances, find local restaurants and coffee shops, play games, and listen to new music. For example, with the Shazam App, I hold up my iPhone to a speaker playing music and the App “tags” the song for me, telling me what the song is, who sings it, and where I can download it.

Of course, there are thousands of Apps for health, fitness, nutrition, food and diet. Apps exist for calorie and nutrients in foods and drinks, for tracking dietary intake, managing diabetes, estimating caloric intake, tracking your running and cycling routes. Other Apps offer resource information including recipe databases, the glycemic index of foods and uses for various culinary oils.

There exist challenges and opportunities for dietitians in the App world – both as an advisor to clients who are using Apps, and as a consumer of Apps to facilitate evidence-based dietetic practice.

Your clients are most likely using Apps – and yet, the credibility of an App is not guaranteed. Just like books, the quality of the information is dependent

The creation of credible Apps seems like a golden opportunity for dietitians, though they are expensive to develop.

on who is creating the content. There are many nutrition-related Apps available including Apps for infant nutrition, management of diabetes, and IBS. It is worth asking your clients how they use an App and become familiar with how the App facilitates your nutrition care recommendations. The creation of credible Apps seems like a golden opportunity for dietitians, though they are expensive to develop. Therefore, dietitians may wish to forge strategic partnerships in App creation.

Dietitians of Canada is joining the App world with their EatWise App, available in the new year. The web version is available now at www.eatwise.ca. PEN is also exploring whether its users would find an App helpful. We'd like to hear from you: **Do you use Apps? What Apps do you use to make your work life easier or contribute to a healthier lifestyle? We will compile a list and publish it in a future eNews and on our Facebook page. Email us at enews@pennutrition.com**



You can download Apps at the Apple App Store, Android market, BlackBerry App World, Amazon Appstore, and GetJar.com . Many are free, or have a small one-time fee.

Here are some of my favourite Apps.

- 1) Food Network App where I can view recipes by my favourite cooking show host, by preparation method (bake, BBQ, braise) and then create a customized grocery list.
- 2) Medscape App where I can access the Medscape reference database of over 10,000 drugs, conditions and procedures, can check for drug and herbal interactions, and monitor topics found in the news.
- 3) Documents to go – this App allows me to view, edit and create Microsoft® Word, Excel® and PowerPoint® files, and view Adobe® pdf files. I like this App because it allows me to review documents wherever I like (on an airplane, or while waiting for an Appointment), rather than printing them or having to be at my computer. The file can then be easily sent to my computer via email.

NICOLE SPENCER – A DIETITIAN WITH AN INDISPENSABLE VIEW ON DIETETIC PRACTICE

As an outpatient dietitian at St Paul's Hospital, Vancouver, Canada, Nicole Spencer M.Ed., RD, knows about the value in accessing timely and credible nutrition information. People arrive at her office often having done their own research. Nicole uses PEN to help her clients cut through the “nutritional noise” and show them what the evidence says about a topic.

“There is so much information out there. Before PEN, it was challenging to get the download on a topic – but that is what PEN offers.” Nicole Spencer.

Prior to working as an outpatient dietitian, Nicole did her masters in Health Education, and also worked in primary health care. In this work, she started using the concept of mindful eating, which helps to explore food and the eating experience, rather than a focus on external thinking about food. At that time, Nicole noticed that few dietitians used mindful eating concepts in practice, despite this being an important area in dietetics. She saw this as a gap in dietetic practice and also as an opportunity for dietitians to be leaders in the area. She wanted to share her knowledge and make it better known.

To do this, Nicole authored the [knowledge pathway on Mindful Eating](#).



“As dietitians we need to take responsibility to use current evidence in our practice – and then communicate the evidence (of what we specialize in) to others. We have to share with each other. It is silly for multiple people to do the same things in our own silos. If everyone takes a little piece of the pie, what an amazing database PEN could be.”

Nicole encourages dietitians to consider what you are on the cutting edge of – and what can you contribute? Now that is an indispensable view on dietetic practice worth cultivating!

Want to contribute to PEN? There are many ways! To find out more, click here or email us at: eNews@pennutrition.com.

KNOWLEDGE TRANSFER EVENTS AND RESOURCES

Webcast: The optimal diet to prevent cardiovascular disease: What is the role of saturated fat? Public health emphasis on reducing saturated fatty acid consumption without considering the replacement nutrient or the many other food-based risk factors for cardio-metabolic disease is unlikely to produce substantial intended benefits. Food based scientific research and policy recommendations may be most relevant in the modern era to understand and reduce the pandemics of chronic disease. View this free webcast presentation, first presented at the 2011 Dietitians of Canada Annual Conference: <http://www.dietitians.ca/Knowledge-Center/Events-and-Learning/Webinars-Podcasts.aspx>

Webcast on lactose intolerance - The United States National Institute of Health released a statement on lactose intolerance and health and presented it at a conference. The conference presentations were webcasted and archived. Go to: <http://consensus.nih.gov/2010/lactose.htm> and select Archived Webcast Day 1|2|3.

Social Networking Sites and Our Lives How people's trust, personal relationships and civic and political involvement are connected to their use of social networking sites and other technologies. Report available at : http://pewinternet.org/Reports/2011/~/_media/Files/Reports/2011/PIP%20-%20Social%20networking%20sites%20and%20our%20lives.pdf

Webcast: Institute of Medicine, Obesity Prevention Policies for Young Children - Reviews factors related to overweight and obesity from birth to age five, with a focus on nutrition, physical activity and sedentary behaviour. This report makes recommendations that various sectors can do to help prevent obesity in children five and younger. Webcast available from: <http://www.iom.edu/Activities/Nutrition/YoungChildObesity.aspx>

6th Biennial Childhood Obesity Conference, San Diego California Contains conference handouts covering topics on agriculture and food systems, built environment, land use and transportation, community nutrition and physical activity, early childhood, prevention strategies, marketing to kids and school/after school. Available at: http://www.childhood-obesity.net/schedule_sessionHandouts.cfm

Know of a knowledge transfer event? Email us at eNews@pennutrition.com

PEN does not have editorial or other control over the contents of the referenced Web sites. We are not responsible for the opinions expressed by the author(s) of the knowledge transfer events and do not endorse any product or service.

ANNOUNCEMENTS FROM PEN

We're going social! PEN has just launched a facebook page and twitter account. Like us on **facebook**. Follow us on **twitter**. Look for us on LinkedIn in the near future.

For the first 100 people who sign up for our Facebook page, their names will be entered into a draw to win an itunes gift card.

Reviewers Wanted!

For client handouts to be truly valuable to the practicing dietitian and the client, they must be reviewed by both users. PEN has developed 3 new client resources on How to Prevent and Manage Constipation in:

[Babies \(0-12 months\)](#)

[Toddlers \(1-3 years\)](#)

[Children \(4-18 years\)](#)

If you specialize in an area where you would use these resources, please complete this [Handout Feedback](#) survey.

If you have clients that you could pilot the handouts with, we welcome their feedback. Please go to the same [Handout Feedback](#) and tick off Client at the top of the form. Then use the client's feedback and comments to complete the form. The survey will be open until December 4, 2011. Thank you for your feedback!

Seeking Dietitians Who Work With Clients With Parkinson's Disease

This past August, the PEN pathway on Parkinson's disease was updated and enhanced. As part of our global partnership, experts in Parkinson's disease from Australia, Canada and the United Kingdom have contributed to the review process. This work has lead to an invitation for dietitians working with clients with Parkinson's disease to participate in a short survey regarding the need for clinical practice guidelines on the nutritional management of Parkinson's disease and the relevant issues that should be covered in such guidelines. This project is part of ongoing research at the Queensland University of Technology (QUT). For more information and to access the survey please click here <http://survey.qut.edu.au/survey/172465/4353/>

You asked for it Canadian and UK PEN subscribers!

A marketing letter about PEN to give to your administrators. This letter describes what is PEN, benefits of PEN to achieve organizational goals, features of PEN to better serve users, and site license subscriptions rates. To obtain this letter, please go to : <http://www.pennutrition.com/aboutpen.aspx>

PEN eNews Fact

Over 1,300 people visited our PEN eNewsletter after the release of our 3rd issue. We would like to see this number grow. We invite you to share this newsletter with colleagues. If you are an administrator of a group PEN license, please share PEN eNews with your group members.

COMING NEXT ISSUE

- *Birth of a PEN Pathway*
- *How do I...customize PEN handouts?*
- *Deciphering media stories on diet Part II*

CONTACT US

PEN eNews is a newsletter to help you:

- keep up to date on new content, features and technology available in PEN
- optimize your time spent in PEN
- enhance your skills in critically appraising the literature
- enhance your knowledge of and participation in knowledge transfer
- position yourself as a leader in evidence-based practice

To access current and archived copies of PEN eNews, go to: <http://www.pennutrition.com/enews>

*Do you have comments, questions or feedback?
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