|  |
| --- |
| **NCPT Classification Workgroup Application / Questionnaire** |

Thank you for your interest in serving on a Nutrition Care Process Workgroup. To be considered for this volunteer leadership opportunity, please complete this form and send this application accompanied by your résumé/CV to [ncp@eatright.org](mailto:ncp@eatright.org). Please note: the term length of this workgroup is expected to be 6 months to 2 years.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: | | | | | | Country in which you reside and work: | |
|  | | | | | |  | |
| Title: | | | | | | Professional Affiliation: | |
|  | | | | | |  | |
| Mailing Address | | | | | | Email: | |
|  | | | | | |  | |
|  | | | | | | Telephone number: | |
|  | | | | | |  | |
|  | | | | | |  | |
| **What is your experience with NCPT (Nutrition Care Process Terminology)? Please select all that apply:** | | | | | | | |
|  | I use terminology in practice | | | | | | |
|  | I have been involved in NCP terminology development | | | | | | |
|  | I teach use of the terminology to students | | | | | | |
|  | I provide workshops teaching professionals how to use the NCPT | | | | | | |
|  | I have been involved with integrating structured outcomes monitoring into practice, e.g. electronic health record templates and reports | | | | | | |
|  | I have been involved in the administrative aspect of EHR development for a hospital or clinic | | | | | | |
| Other: |  | | | | | | |
|  | | | | | | | |
| **What is your future interest in working with the NCPT, select all that apply.** | | | | | | | |
|  | I am interested in promoting the correct use of the NCPT in my work environment | | | | | | |
|  | I am interested in participating in NCP Terminology Development | | | | | | |
|  | I am interested in advocating for improved nutrition terminology in SNOMED-Clinical Terms and LOINC | | | | | | |
| Other: |  | | | | | | |
|  | | | | | | | |
| **Please state why you are interested in serving on the NCPT Classification Workgroup.** | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **I can commit to attending 1 or 2 one hour teleconferences per month. If you reside in another country the teleconference times are listed below?**  **[Please consult** [**timeanddate.com**](http://www.timeanddate.com/worldclock/converter.html) **for time conversion]** | | | | | | | |
| * 9am CST (1400 UTC) | | Yes | No | Comments: | | | |
| * 4pm CSY (2100 UTC) | | Yes | No | Comments: | | | |
| **What is your experience with use of nutrition terminology within the electronic health record?** | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **Are you actively involved in research?**  **(Please provide details below)** | | | | | Yes | | No |
|  | | | | | | | |
|  | | | | | | | |
| **Are you formally involved in teaching?**  **(Please provide details below)** | | | | | Yes | | No |
|  | | | | | | | |
|  | | | | | | | |