

## SCOPE OF PRACTICE & CLIENT DISCLAIMER

### 1. Who I Am & What I Do

Rosemary (Rosie) Whiteway is a Nutritional Therapist trained at the College of Naturopathic Medicine (CNM), UK. Nutritional Therapy is a complementary health discipline that uses personalised nutrition, lifestyle medicine, and evidence-informed dietary strategies to support overall health and wellbeing.

Nutritional Therapy is distinct from the regulated profession of Dietitian in the UK and Dietetics / Dietista-Nutricionista in Spain. Rosie does not hold a university degree in Human Nutrition and Dietetics, is not registered as a Dietista-Nutricionista with any Spanish or Balearic Islands professional college, and does not practise as a regulated healthcare dietitian.

### 2. What This Service Is

Ahara Nutrition, trading as Ahara Consulting Ltd provides:

- Educational information and guidance on nutrition, dietary patterns, and lifestyle
- Personalised nutritional therapy programmes based on functional assessment
- Support for healthy individuals seeking to optimise their diet and wellbeing
- Gut health and digestive wellness education
- Digital resources, programmes, and content for health and lifestyle improvement

**This service is intended to complement, not replace, the care of your GP or other regulated healthcare professionals.**

### 3. What This Service Is Not

#### **Important — Please Read**

**Nutritional Therapy does not constitute medical diagnosis, medical treatment, or clinical dietetic management. Rosie Whiteway does not diagnose illness, prescribe medication, or provide medical nutrition therapy for clinical conditions. If you have a diagnosed medical condition, you should continue to work with your GP or specialist and seek their advice before making significant dietary changes.**

**Specifically, this service does not include:**

- Clinical diagnosis of any medical or nutritional condition
- Medical nutrition therapy for acute illness, eating disorders, or complex clinical conditions
- Prescribing of medications or therapeutic doses of nutrients beyond normal dietary ranges
- Management of conditions requiring the supervision of a registered dietitian or physician

### 4. Jurisdiction & Regulatory Status

Rosie Whiteway serves clients principally in the United Kingdom in person or online. In the United Kingdom, the title 'Nutritional Therapist' is not a protected title and is not regulated by statute. Rosie's practice is guided by the professional standards of the College of Naturopathic Medicine and the General Naturopathic Council (GNC).

For persons based in Spain or the Balearic Islands: Rosie does not practise as, or represent herself to be, a Dietista-Nutricionista regulated under Spanish Law 44/2003 (LOPS) or registered with any Spanish Colegio Oficial de Dietistas-Nutricionistas. Services provided to Spanish-resident clients are offered as nutritional education and lifestyle support only.

## 5. Professional Indemnity

Rosie Whiteway holds professional indemnity insurance appropriate to the practice of Nutritional Therapy. Details are available on request.

## 6. Informed Consent

By engaging Ahara Nutrition services, clients confirm that they have read and understood this scope of practice statement, that they are engaging these services as a complementary and educational support to (not a replacement for) medical care, and that they will inform Rosie Whiteway of any diagnosed medical conditions, prescribed medications, or changes in their health status.

### RED FLAG SYMPTOMS: GP REFERRAL CRITERIA

The following symptoms and clinical presentations require immediate referral to a General Practitioner or, where indicated, emergency services. Rosie Whiteway will not continue or commence a nutrition programme where any of the following are present without prior GP assessment and clearance.

#### In an emergency

If a client presents with severe chest pain, signs of anaphylaxis, difficulty breathing, collapse, or any other acute life-threatening emergency — call 999 (UK) or 112 (Spain/EU) immediately.

| Category                  | Symptoms / Signs Requiring Referral   |
|---------------------------|---|
| Unexplained Weight Loss   | <ul style="list-style-type: none"> <li>Unintentional weight loss of &gt;5% body weight in 3 months</li> <li>Unexplained weight loss in the context of fatigue, night sweats, or fever</li> </ul>  |
| Gastrointestinal — Urgent | <ul style="list-style-type: none"> <li>Blood in stool (fresh red or dark/tarry/melaena)</li> <li>Rectal bleeding not previously investigated</li> <li>Persistent change in bowel habit lasting &gt;6 weeks (especially over 50)</li> <li>Severe or worsening abdominal pain</li> <li>Difficulty swallowing (dysphagia) or painful swallowing (odynophagia)</li> <li>Unexplained persistent nausea and vomiting</li> </ul> |

| Category                             | Symptoms / Signs Requiring Referral   |
|--------------------------------------|---|
| <b>Gastrointestinal — Concerning</b> | <p>Abdominal mass felt by client or previously identified</p> <p>Signs of gastrointestinal obstruction (distension, failure to pass stool/wind)</p> <p>Persistent severe bloating with weight loss or bleeding</p> <p>Suspected coeliac disease not yet investigated</p>  |
| <b>Liver &amp; Biliary</b>           | <p>Jaundice (yellowing of skin or eyes)</p> <p>Dark urine with pale stools</p> <p>Right upper quadrant pain, especially after eating</p> <p>Known or suspected liver or gallbladder disease not under medical management</p>  |
| <b>Cardiovascular</b>                | <p>Chest pain or tightness</p> <p>Palpitations with dizziness or breathlessness</p> <p>Severely elevated blood pressure (&gt;180/120 mmHg)</p> <p>Oedema of unknown cause</p>   |
| <b>Endocrine &amp; Metabolic</b>     | <p>Suspected or unmanaged Type 1 Diabetes or unstable Type 2 Diabetes</p> <p>Signs of diabetic ketoacidosis (DKA): extreme thirst, vomiting, acetone breath, confusion)</p> <p>Suspected hyperthyroidism or hypothyroidism not under medical review</p> <p>Signs of adrenal insufficiency: extreme fatigue, salt craving, hypotension, skin darkening</p> |
| <b>Renal</b>                         | <p>Blood in urine (haematuria) not previously investigated</p> <p>Significant reduction in urinary output</p> <p>Known chronic kidney disease — dietary changes require medical supervision</p>   |
| <b>Neurological</b>                  | <p>New or worsening headaches, especially with visual disturbance or vomiting</p> <p>Numbness or tingling in extremities of unknown cause</p> <p>Cognitive changes, confusion, or memory loss</p> <p>Severe B12 or folate deficiency with neurological symptoms</p>   |
| <b>Eating Disorders</b>              | <p>Suspected anorexia nervosa, bulimia nervosa, or ARFID</p> <p>BMI below 17.5 or significant ongoing restriction</p>   |

| Category                         | Symptoms / Signs Requiring Referral  |
|----------------------------------|--|
|                                  | <p>Lanugo hair, bradycardia, electrolyte symptoms, or fainting</p> <p>Purging behaviours — client must have GP and ideally eating disorder team support before engaging nutrition programme</p>  |
| <b>Pregnancy &amp; Fertility</b> | <p>Hyperemesis gravidarum (severe pregnancy vomiting with weight loss)</p> <p>Pre-eclampsia symptoms: severe headache, visual disturbance, significant oedema</p> <p>Any high-risk pregnancy — must have obstetric team involvement</p> <p>Signs of miscarriage or ectopic pregnancy</p>                       |
| <b>Mental Health</b>             | <p>Active suicidal ideation or self-harm</p> <p>Acute psychosis or severe psychiatric deterioration</p> <p>Severe depression or anxiety that is destabilising — refer to GP and continue only with multi-disciplinary team awareness</p>   |
| <b>Allergy &amp; Immune</b>      | <p>History of anaphylaxis — ensure emergency plan in place before commencing elimination protocols</p> <p>Symptoms of acute allergic reaction during or after programme</p> <p>Significantly compromised immune function (e.g. active chemotherapy, organ transplant)</p>                                      |
| <b>Medication Interactions</b>   | <p>Client taking warfarin, immunosuppressants, lithium, or narrow therapeutic index drugs — dietary and supplement changes require GP/pharmacist liaison</p> <p>Client commencing or recently changing psychiatric medication</p> <p>Any unexplained new symptom coinciding with supplement recommendation</p> |