

OVERWEIGHT/OBESITY PROVIDER QUICK REFERENCE CHECKLIST

SCREENING

Identification	Measure BMI on all patients and record in chart	<input type="checkbox"/>
	If BMI ≥ 25 kg/m ² , measure waist circumference	<input type="checkbox"/>

ASSESSMENT

Risk Assessment	Determine patient's risk status	<input type="checkbox"/>
CV risks	Determine associated cardiovascular risks	<input type="checkbox"/>
Co-morbidities	Determine presence of very high absolute risk (CAD, DM, sleep apnea, PAD, AAA, carotid disease or ≥ 3 CV risks) and other obesity associated disorders (menstrual irregularities, osteoarthritis, gallbladder disease, stress incontinence)	<input type="checkbox"/>
Labs	Comprehensive metabolic panel, Lipids, TSH, uric acid,	<input type="checkbox"/>
Nutrition	Assess nutritional history and eating attitudes with appropriate screening tool Determine RMR (Resting Metabolic Rate - MedGem)	<input type="checkbox"/> <input type="checkbox"/>
Physical Activity	Assess present physical activity through interview or questionnaire Assess attitudes and barriers	<input type="checkbox"/> <input type="checkbox"/>
Behavior	Assess willingness to lose weight/reasons and confidence/previous attempts Assess support from family and friends, stress level and mood Assess time availability Screen for depression (PHQ), binge eating or other psychosocial disorders	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

TREATMENT

(BMI ≥ 30 kg/m² OR \uparrow ABDOMINAL CIRCUMFERENCE WITH ≥ 2 CV RISKS)

Nutrition Prescription	Recommend goal of 10% weight loss over 6 months. Recommend caloric budget according to RMR. Assist in healthy choices and balanced eating as determined by nutrition questionnaire. Consider referral to Registered Dietician or commercial weight loss program.	<input type="checkbox"/>
Physical Activity Prescription	Recommend 60 minutes of activity daily for weight loss and 30 minutes for weight maintenance. Determine safe parameters for exercise. Assist in selection of activity.	<input type="checkbox"/>
Behavior treatment	Provide support or referral. Consider referral for Cognitive Behavioral Therapy (CBT) or other psychotherapy.	<input type="checkbox"/>
Control Co-morbidities	Control BP, lipids and blood sugar per evidence-based guidelines.	<input type="checkbox"/>
Drug Therapy or Surgery	Consider weight loss medication (orlistat, subratramine, phentermine) if fails to reach goal at 6 months. Consider bariatric surgery if BMI ≥ 40 kg/m ² or ≥ 35 kg/m ² with high risk co-morbidities.	<input type="checkbox"/>

MAINTENANCE

Nutrition	Reassess RMR after 10% weight loss or patient weight loss stabilizes. Continue nutrition counseling.	<input type="checkbox"/>
Physical Activity	Recommend 30 minutes of activity daily to maintain weight. Assess barriers and problem solve.	<input type="checkbox"/>
Behavior	Re-enforce successes/gains	<input type="checkbox"/>