

READY TO DISCUSS TREATMENT OPTIONS FOR YOUR PATIENTS LIVING WITH OBESITY? USE THIS GUIDE TO GET STARTED.



1 **Make accommodations** in your office and operating procedures for patients with overweight and obesity. Many patients avoid or delay medical treatment due to concerns that their providers will not have furniture, equipment, or an environment that accommodates their needs. In a typical primary care setting, a significant proportion of patients are too heavy to fit into common office furniture and medical equipment, such as scales and examining tables, as well as blood pressure cuffs and exam gowns.

2 **Ask patients to fill out a pre-visit questionnaire** to provide important information prior to the encounter. *Suggested pre-screen questions can be found on page 6 of the **Weight Can't Wait Guide**.*¹

3 **Gather information during the pre-encounter** to start a weight-related conversation with the patient, including diet and physical activity history; medications; existing co-morbidities or risk factors; stress; sleep; quality of life (QOL), depression and surgical history.

4 **Ask the patient "May we measure your weight today?"** If the patient chooses not to be weighed, respect their decision. Providers need to recognize that patients may have had highly stigmatized healthcare experiences and may find being weighed and discussing their weight uncomfortable.

5 **Ask the patient: "Is now a good time for us to discuss** how your weight and health may be affecting each other and how we can work on it together?"

If the patient answers YES, the provider should ask:

- What concerns you most about your weight?
- What is the single most important outcome that you hope to achieve with weight loss?
- What would stand in the way of achieving outcome?
- Is there a first step that you are ready to take?
- What will you consider a successful outcome?
- What impact will the changes we have discussed have on your life?
- Obesity is a chronic problem. What frequency and type of follow-up would be most helpful?

If the patient answers NO, the provider should:

- Acknowledge concerns.
- Respectfully make the connection between obesity and comorbidities.
- Provide additional resources.
- Schedule follow-up or referral.
- Wrap up the conversation about weight by offering to cover the topic at the next appointment.

6 If the patient has agreed to pursue treatment of obesity, the provider should provide the patient with a checklist/handout with shared decisions and schedule a follow-up visit focusing on obesity to assess progress. Providers should consider using prescriptions with patients to facilitate discussion about nutrition, exercise, and behavior modification plans for obesity treatment. RX pads are available at the Obesity Medicine Association [website](#).⁴

7 **Schedule follow up visits.**

- The best ways to measure progress: change in weight, BMI, change in waist circumference, improvement of co-morbidities, improved quality of life.
- Applaud successes.
After the patient has worked to implement lifestyle changes, providers should discuss other treatment options.
- Provider should begin discussion by requesting patient permission to discuss treatment options:



Provider: *“Healthy eating and increased physical activity may not be enough to maintain a healthy weight. Other factors, such as your metabolic response to food may require other interventions, such as medication or surgery. Is now a good time to discuss these options?”*

If the patient answers YES, the provider should:

- What has the patient tried before, and what targets does the patient suggest?
- Ask patient if they know what treatments their insurance covers.
- Acknowledge patient concerns.
- Provide appropriate resources and recommendations (refer to page 6 of the **Weight Can't Wait Guide**¹)
- Schedule follow-up appointments.
- Make referrals.

If the patient answers NO, the provider should say:

“I understand that you may not be ready to discuss your weight. However, I am concerned about the impact of your weight on your health. There may be some things that we can do together in the future. Please make a follow up appointment if you'd like to discuss this further.”

Note: If the patient is not interested in pursuing treatment, ask if this decision reflects a lack of financial or physical access to follow up? Provide educational materials for the patient's consideration.

8 Referrals: If you and your patient decide that a referral to other resources in the community is the next step, provide them with a list of resources, such as:

- OAC's provider locator: <https://obesitycareproviders.com/>
- ABOM's Diplomate search: <https://bit.ly/35oEJvg>
- ASMBS Find a Bariatric Surgery Provider: <https://bit.ly/3t6R1AM>
- CDC's Registry of National Diabetes Prevention Program's Diabetes Prevention Recognition Program (DPP): <https://bit.ly/3vftb8t>
- Obesity Medicine Association's Obesity Medicine Clinician directory: <https://bit.ly/3t6NthH>
- AND's directory of nutrition experts: <https://bit.ly/3JXutJD>
- WW's directory of studios: <https://bit.ly/3LYkTb5>
- YMCA directory: <https://bit.ly/3JVecVd> and DPP program: <https://bit.ly/3t5xXCR>

For further reading on how to create a positive experience for your patients, please visit the following websites:

ObesityCareWeek.org / ObesityActionCoalition.org / STOP.PublicHealth.gwu.edu
ObesityMedicine.org / ASMBS.org / Obesity.org / ObesityCareAdvocacyNetwork.com / ConscienHealth.org

Stay up-to-date on the latest OCW news! Sign up for alerts at ObesityCareWeek.org/ocw-alerts

Resources

1. *Weight Can't Wait's Guide for the Management of Obesity in the Primary Care Setting* <https://bit.ly/3BM8gLS>
2. Rudd Center Office Checklist: <https://bit.ly/3LULg6F>
3. *Why Weight Guide*: <https://bit.ly/36rtPp1>
4. OMA RX Pads: <https://bit.ly/3pej9AB>
5. *Weight Can't Wait's Curated Resources for the Management of Obesity*: <https://bit.ly/3JP8ZOX>
6. *Your Weight Matters Toolkit*: <https://www.yourweightmatters.org/>
7. **Creating Inclusive Environments: How to Make Patients of All Sizes Feel Welcome**: <http://bit.ly/41hnEfr>