

Health Assessment Guide for Patients with Obesity



There is an ever increasing number of people with weight issues, and more specifically, Adiposity Based Chronic Disease (ABCD). Patients with a BMI of 30 or greater are considered obese. Obesity has been recognized as disease by the American Medical Association and patients should receive treatment just as they would for any other disease. It is vitally important to understand the science of obesity and its treatment options. This guide provides helpful information and resources to help treat this condition.

Body Mass Index (BMI)

The Body Mass Index (BMI) is a measurement tool that compares height to weight, and provides an indication of whether an individual is overweight or obese.

How to calculate your BMI

$$\frac{\text{WEIGHT}}{(\text{HEIGHT IN INCHES})^2} \times 703$$

Underweight
BMI: <18.5

Healthy Weight
BMI: 18.5 - 24.9

Overweight
BMI: 25 - 29.9

Class I Obesity
BMI: 30 - 34.9

Class II Obesity
BMI: 35 - 39.9

Class III Obesity
BMI: \geq 40

Tools and Resources

Considering bariatric surgery can be overwhelming. The Metabolic and Bariatric Surgery Program is here to provide the support and resources you need to make an informed decision.

Visit fresnobariatrics.org or call 866-433-8558 to learn more!

Please complete the information below and return to info@myfresnobariatrics.com or fax 559-261-4501.

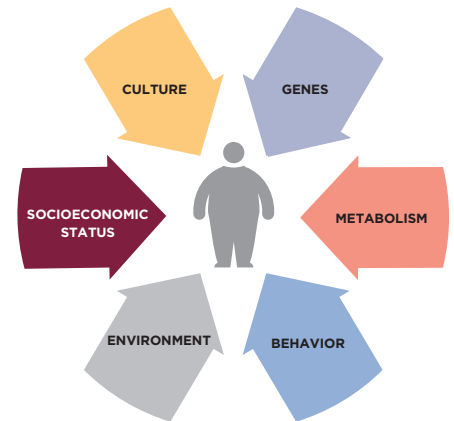
PATIENT NAME

DATE OF BIRTH

PHONE

Causes of Obesity

There are a variety of factors that play a role in weight gain and specifically obesity. It is a complex health issue to address.



Obesity Related Conditions

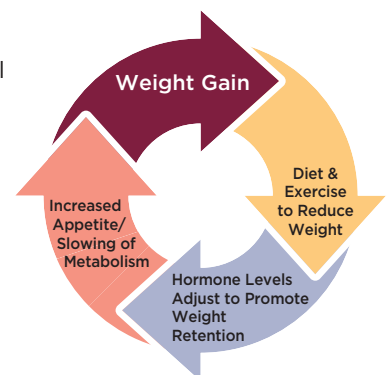
Many people that are overweight, or obese, have significant other health conditions that are either caused by or affected by their condition.

Patient's conditions affected or caused by excess weight - check all that apply.

- Type 2 Diabetes Mellitus
- Obstructive Sleep Apnea
- Hypertension
- Urinary Stress Incontinence
- Migraines
- Hypercholesterolemia
- Osteoarthritis/Degenerative Other _____
Joint Disease _____
- Asthma _____

Weight Loss Efforts

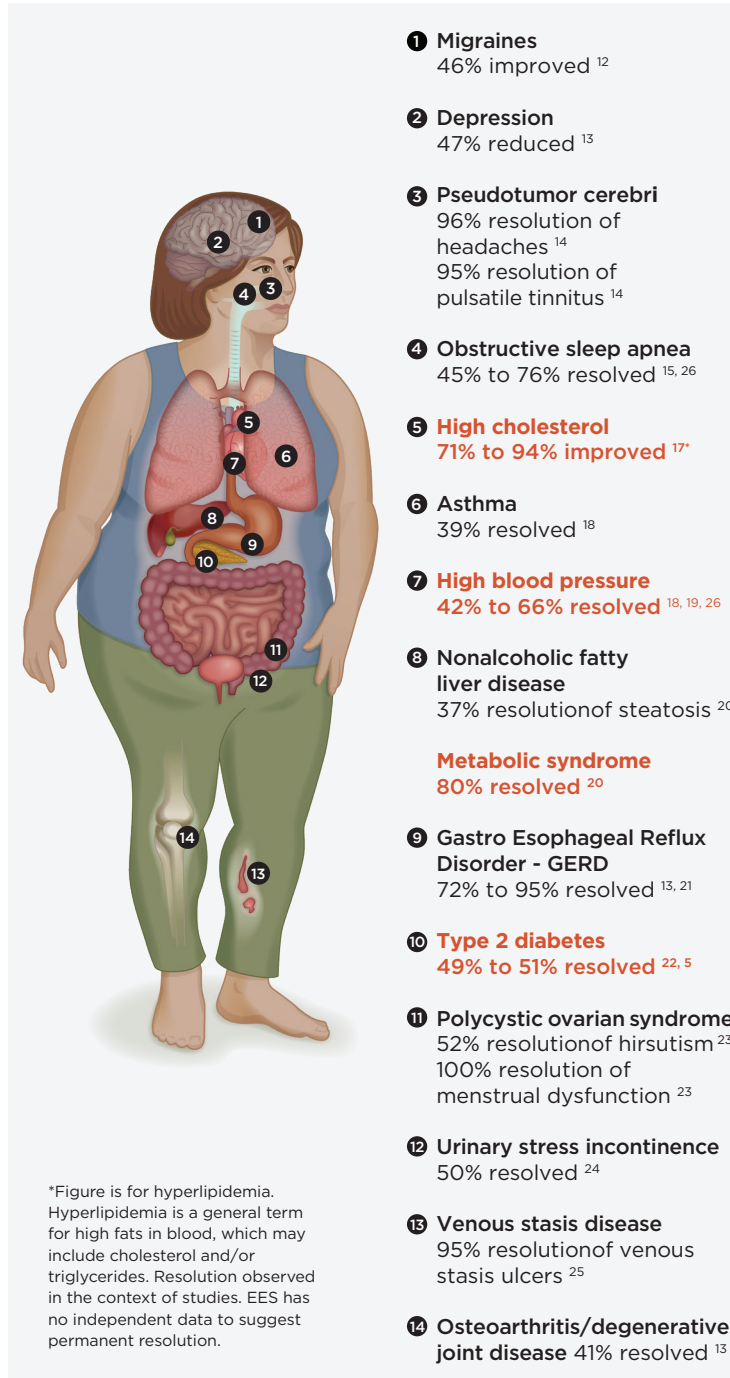
There are important hormonal changes associated with weight loss attempts that affect long term success. Weight loss with diet and exercise alone is challenging because the body fights to maintain its current weight.



Health improvements associated with weight loss, particularly from bariatric surgery

Surgery has strong results – short and long term, for reducing weight as well as reducing and/or resolving obesity-related diseases such as Type 2 Diabetes Mellitus.

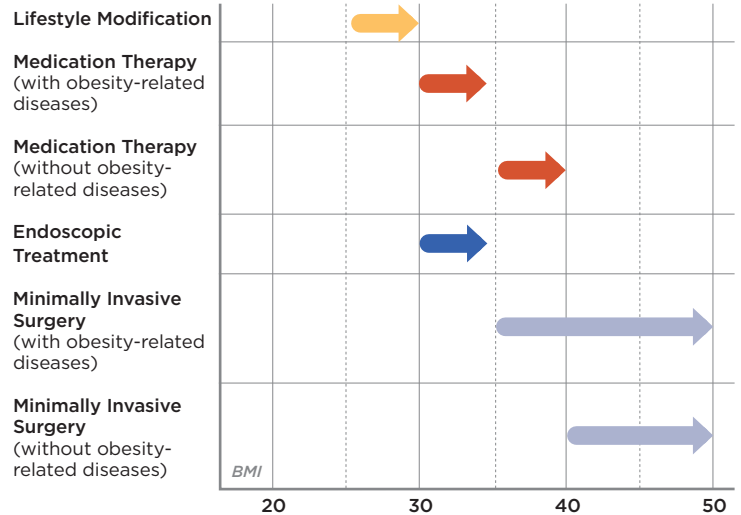
IMPORTANT SAFETY INFORMATION: There are risks with any surgery, such as adverse reactions to medications, problems with anesthesia, problems breathing, bleeding, blood clots, inadvertent injury to nearby organs and blood vessels, even death. Bariatric surgery has its own risks, including failure to lose weight, nutritional or vitamin deficiencies, and weight regain. Patients should consult their physicians to determine if this procedure is appropriate for their condition.



Treatment Options

Depending on a patient's BMI and/or the presence of obesity-related diseases, there are currently four groups of treatment options for obese patients. List previous weight loss attempts and indicate if the weight loss was sustained beyond one year (Y/N).

Treatment options



Lifestyle Modification

BMI ≤ 25-29.9

Diet - establish a healthful eating pattern and attainment of individualized glycemic, blood pressure and lipid goals

Exercise - breakup continuous sitting time over 90 minutes

Medication Therapy

BMI ≤ 30-34.0

with obesity-related diseases

BMI ≤ 35-39.9

without obesity-related diseases

- Phentermine, Lorcaserin, Phentermine, Topiramate ER and Naltrexone-Burpion

Endoscopic Treatment

BMI ≤ 30-35

Gastric balloon - A temporary silicone balloon designed to help portion control and ultimately improve weight loss.

Minimally Invasive Surgery

BMI ≤ 35

with obesity-related diseases

BMI ≤ 40

without obesity-related diseases

- **Gastric Bypass** - procedure where the stomach is divided into a small upper pouch and much larger lower "remnant" pouch.

- **Sleeve Gastrectomy** - removes approx. 80% stomach, restricting the amount of food that can be consumed.

- **Bilopancreatic Diversion with Duodenal Switch (BPS/DS)**

- a small tubular stomach pouch is created by removing a portion of the stomach, then a large portion of the small intestine is bypassed.

*All minimally invasive surgery options above suppress hunger and prolong fullness.

For a full list of references please visit: communitymedical.org/CMC/media/FHSH/Documents/Health_Assessment_Guide.pdf