## Interdisciplinary Certification in Obesity and Weight Management

### Content Outline

1. Patient Assessment and Development of Treatment Plan  (28%)

#### A. Patient History and Current Status

1. Collect patient assessment information:
   
a. weight history, including
      - development
      - genetics
      - growth pattern indices
   
b. dietary history, including
      - current eating habits
      - eating patterns
      - past diet attempts
      - diet restrictions
      - intolerance
      - allergies
   
c. factors in the environment impacting weight, including
      - food deserts
      - transportation
      - physical safety
      - lack of playground activities
      - climate conditions
      - living conditions
      - work schedule
   
d. ethnic, cultural or religious practice that impact the patient’s diet
      (e.g., religious fasting)
   
e. family history
   
f. medical and surgical history, including review of systems and
      obesity-related health problems, including
      - cancer
      - cardiovascular
         - hypertension
         - dyslipidemia
         - cardiomyopathy
      - diabetes
      - joint disease
      - liver disease
      - osteoarthritis
      - sleep apnea
      - cerebrovascular accident (CVA)
      - asthma
      - renal
      - auto-immune disorders
      - gastrointestinal (GERD)
      - mental health issues
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Content Outline

1. Assess patient population and clinical conditions
   a. lifestyle, including
      - medications
      - OTC supplements
      - psycho-social history
      - socioeconomic status
      - substance use (e.g., alcohol, drugs, nicotine)
      - emotional and physical trauma and abuse history
      - weight history including birth weight and previous weight loss attempts
      - sleep habits
      - physical activity and exercise history
   b. physical examination
      - vital signs and anthropometrics
      - behavioral health screening
      - physical activity and exercise history

2. Recommend additional testing based on evaluation of patient data

3. Evaluate patient needs including
   - medical
   - nutritional
   - physical
   - psychological/social

4. Identify key life stages that are associated with weight gain or loss, including
   - infancy
   - puberty
   - pregnancy
   - menopause
   - aging

5. Assess patients’ expectations, readiness, motivation, and self-efficacy to begin and maintain weight management treatment

6. Assess patients’ knowledge, beliefs, and attitudes toward weight management and perceived benefits and barriers to weight change

7. Identify weight management issues related to special populations, including
   - cultural
   - pediatric
   - pregnancy
   - geriatric
   - bariatric surgery patients

B. Physical Findings and Test Results

1. Review initial assessment results:
   a. vital signs and anthropometrics, including
      - height/weight BMI
      - waist circumference
   b. behavioral health screening, including
      - PHQ-9
      - GAD-7
      - AUDIT
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#### Content Outline

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<th>c. Biometric, including</th>
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<td>• cholesterol</td>
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<th>d. Body composition, including</th>
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<th>e. Resting energy expenditure (REE)</th>
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<td>f. Cardiac assessment, including</td>
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<td>• EKG</td>
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<td>• stress test</td>
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<th>g. Health-related quality of life (e.g., SF-36)</th>
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<td>h. Nutritional evaluation (e.g., nutritional adequacy)</td>
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| i. Physical examination                       |
| j. Psychological testing, including           |
| • Cognitive                                    |
| • Psycho-diagnostic                           |

### 2. Intervention/Treatment (48%)

#### A. Development of Treatment Plan

1. Establish a therapeutic relationship conducive to promoting patient’s behavior change
2. Assess patient readiness to change
3. Assess family members’ readiness to change
4. Respect patient autonomy with patient participation in care decisions
5. Describe health benefits associated with weight reduction
6. Identify potential contraindications in weight management treatment
7. Facilitate patient in developing realistic weight loss and treatment goals
8. Collaborate with interdisciplinary team members and other healthcare professionals to formulate a comprehensive treatment plan
9. Establish measurable short and long-term goals and expected outcomes
10. Discuss treatment options with the patient
11. Personalize treatment plan for each patient
12. Coordinate the comprehensive treatment plan
13. Identify resources and referrals needed, including
    • exercise professional
    • registered dietitian nutritionist
    • behavior specialist
    • medical professional
14. Identify potential barriers to successful implementation of comprehensive treatment plan
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**B. Lifestyle Modification**

1. Help patients develop healthier behaviors/habits that reduce the risk of weight gain and enhance the likelihood of weight loss maintenance, such as
   - not eating while watching television
   - reducing sedentary behaviors
2. Educate patient regarding the identification of environmental factors that influence weight gain
3. Educate patient regarding the modification of their environment to support ongoing weight control
4. Educate patient on how to make positive lifestyle choices
5. Establish an encouraging support group/system for the patient
6. Conduct support groups and classes
7. Explain differences between exercise and lifestyle physical activity
8. Apply behavioral treatment strategies for facilitating short and long-term behavior change

**C. Nutrition**

1. Determine energy requirements for nutrition prescription
2. Determine physiological role of macronutrients in the body
3. Determine physiological role of micronutrients in the body
4. Discuss role of macronutrients in the diet
5. Discuss role of micronutrients in the diet
6. Counsel patient on food intake, including
   - caloric intake
   - meal and snack planning
   - portion size
   - variety of food groups and variety with groups
   - consideration that “all foods can fit”
   - calorie density
   - cultural considerations
   - resources for selection and preparation techniques
   - budget considerations
   - strategies for incorporating foods prepared away from home
7. Assess patient eligibility criteria, indications, and contraindications for use of meal replacements
8. Discuss indications, safety, and efficacy of vitamins, minerals, and other dietary supplements
9. Assess indication for individual medical nutrition therapy, including
   - food intolerance
   - bariatric
   - pregnancy
### D. Exercise and Physical Activity

1. Assess patient’s contraindications for exercise and physical activity and obtain medical clearance when indicated
2. Establish a safe and effective exercise and physical activity routine tailored to each patient
3. Determine the role of all types of exercise and physical activity related to weight loss and maintenance, including
   - aerobic
   - resistance training
   - flexibility
   - balance and coordination
4. Determine the amount of exercise and physical activity recommended for general health benefits and for weight management
5. Discuss strategies for incorporating exercise and physical activity into daily living
6. Provide information on fitness and recreation resources in the community
7. Identify self-monitoring tools for assessing activity level and energy expenditure

### E. Behavioral Health

1. Facilitate behavior modification sessions
2. Educate the patient on the development of coping skills regarding underlying thoughts, feelings, emotions, or behaviors that influence weight change
3. Monitor depression, anxiety or other mental health concerns co-exist with obesity
4. Address body image issues
5. Assist patient in developing insight into behaviors that led to weight issues
6. Apply cognitive-behavioral counseling techniques, including
   - self-monitoring
   - stimulus control
   - cognitive restructuring
7. Identify technology for self-monitoring, social support and education
8. Employ motivational interviewing skills
9. Discuss patient’s perceptions about food and subsequent change
10. Address patient’s feelings about behavioral changes
11. Discuss psychological issues in dealing with weight or food, including
    - addictions
    - assertive communication
    - emotional eating
    - readiness for change
    - self-esteem issues
    - stress management
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<th>12. Provide information, resources, or referral services as needed for:</th>
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<td>a. advocacy services</td>
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<td>b. crisis intervention</td>
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<td>c. specialty mental health</td>
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<td>d. substance abuse</td>
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<td>e. food bank</td>
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<td>f. support groups (e.g., pre- and post-surgery support groups)</td>
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<th>13. Evaluate intervention plan implementation considering special situations, including</th>
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<td>• major life events/changes</td>
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F. Medical Intervention

1. Manage health conditions including comorbidities during treatment
2. Provide or coordinate care with other healthcare professionals for pharmacotherapy and/or bariatric surgery
3. Identify physical, psychological, and nutritional needs of patients following bariatric surgery
4. Provide patient follow-up after bariatric surgery

3. Monitoring, Evaluation, and Case Management   (24%)

A. Assess patient adherence to the treatment plan
B. Monitor patient’s progress towards goals
C. Monitor changes in patient health
D. Document outcomes
E. Evaluate the effectiveness of each element of treatment plan
F. Identify patient lapses in the execution of the weight management plan
G. Revise treatment plan as needed
H. Discuss strategies for weight maintenance and relapse prevention
I. Facilitate communication with medical providers regarding patient progress

Total 125 Items