Pediatric Weight Management at Family Medicine Clinic

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Importance
- According to the CDC, pediatric obesity prevalence has been rising since 1999 with a current rate of 18.4% in children age 6-11.
- Prior to this intervention, adherence to AAP obesity management guidelines at our clinic was unknown.

Aim Statement
- In children ages 6-11, we aim to increase the follow up/referral rate for BMI above 85 percentile by 75%.

Methods
- Baseline data collection, literature review and smartphrase development
- Smartphrase: AAP Intervention Stages, Table of recommendation for BMI Categories, Instructions for follow up and reminder of Healthy Weight Order Set availability

PDSA Cycles
- PDSA 1: Smartphrase rollout, flyers posted and didactic announcement
- PDSA 2: Warm handoff from PCS to provider if vital sign for BMI >85 percentile. Chart review every 2 weeks

Discussion
- Treating BMI percentile >85% as a critical vital sign may improve rates of follow up/referral
- More compliance when shorter follow up was recommended

Next Steps
- Re-emphasize and repeat PDSA with PCS to provider warm handoff
- Expand QI project to other UMP clinics
- Consider focus group with parents of children with obesity
- Explore how terminology affects rates of weight management

References