

For Pediatric Health Care Providers Five Easy Steps to using *Trim Kids* in the Pediatric Office Setting

Sponsored by: Scientists for Translational Obesity Research in Youth (STORY)
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Step 1 – Initial Visit:

- Determine the child's risk for overweight by using the body mass index percentile charts on pages 21-23 of the Trim Kids book. Discuss the child and family's desire to be healthier.
- Discuss the child's condition with the parents.
- Put in the PBS 1 hour documentary: *Kids Trying to Trim Down* (Go to www.lpb.org or www.lsuhsu.edu)
- Have the family view the documentary.
- Order additional medical tests as needed.

[Refer to Charts from pgs. 21-23 of the Trim Kids book]

Step 2 – Initial Visit:

- Encourage the parents to pick up the Trim Kids book at their local bookstore or at www.amazon.com
- Provide the link to the PBS six-part series Kids Trimming Down (Go to www.lpb.org or www.lsuhsu.edu)
- Provide the link to the Trim Kids exercise DVD Down (Go to www.lpb.org or www.lsuhsu.edu)
- Ask them to read the first 4 chapters before the next office visit. Schedule the next visit in 4-6 weeks.

[Insert Physician Letterhead]

Dear Parents,

Please go to your local bookstore and purchase Trim Kids: The Proven 12-Week Plan That Has Helped Thousands of Children Achieve a Healthier Weight. Trim Kids can also be purchased at www.amazon.com. Read the first four chapters before your next visit on _____.

Signature of Physician

Step 3 – Second Visit:

- Conduct and record the results of the medical evaluation on the Initial Measurements chart on page 83 of the Trim Kids book.
- Discuss the results of the evaluation and the child’s condition with the parents.
- Optional: Have the family watch Parts 1 & 2 of the Louisiana Public Broadcasting series *Step by Step: Kids Trimming Down*.
- Encourage the family to follow weeks 1 through 4 of the Trim Kids plan.
- Schedule a follow-up visit in 4 weeks.

[From page 83 of the Trim Kids book]

Trim Kids Initial Measurements

Name _____ Age ____ Today’s Date _____

Initial Height _____ Initial Weight _____

Ideal body weight _____

Body Mass Index (BMI) _____ (refer to chart on page 20)

Level of Overweight condition (check one):

___ RED ___ YELLOW ___ GREEN ___ BLUE

Waist circumference _____ Hip circumference _____

Blood Pressure _____

Laboratory values: Triglyceride _____

Total Cholesterol _____ HDL _____ LDL _____

Step 4 - Follow-up Visit:

- After the child is weighed and measured have them report any nutrition, behavior, and physical activity accomplishments during the past 4-6 weeks.
- Provide positive comments for accomplishments and encouragement to continue.
- Have the family watch parts 3 and 4 of Louisiana Public Broadcasting series, *Step by Step: Kids Trimming Down*.
- Discuss the meal and exercise plan with the family.
- Discuss the child and family's commitment to following the program.
- If the family is having difficulty with the meal plan suggest a consultation with a registered dietician; with the physical activity plan encourage them to consult an exercise professional; any behavioral, emotional or family problems, consult with a mental health professional
- Encourage the child and parents to continue to follow the Trim Kids plan, weeks 4 through 12.
- Schedule a follow-up visit in 8 weeks.

Step 5: Second follow-up visit:

- Record the results of the medical evaluation on the Quarterly Evaluation on page 370 of the Trim Kids book. Praise positive behavior changes. Discuss/refer difficulties.
- Discuss the results of the follow-up evaluation and the child's condition with the parents.
- Have the family watch parts 5 & 6 of the Louisiana Public Broadcasting series, *Step by Step: Kids Trimming Down*.

- Encourage the family to repeat weeks 1-12 of the Trim Kids plan.
- Schedule a follow-up visit in 12 weeks.

[From page 370 of the Trim Kids book]

Trim Kids Quarterly Evaluation

Name: _____ Age: _____ Today's date _____ Level: _____

3 Months Ago

Your child's weight was _____ lbs.

Your child's height was ___ft___inches

Your child's BMI was _____

This value is based on the pediatric growth charts (page 00)

Your child was in Level _____, the _____ color.

Based on your child's past height, his/her goal weight was _____ lbs.

Now...

Your child's weight is _____ lbs.

S/he lost _____ lbs. In the last _____ months!

Your child's height is ___ft___in.

Your child grew _____ inches in the last _____ months!

Your child's BMI is now _____

This means your child is now in the _____th percentile for his/her height.

Your child graduated to Level _____, the _____ color.

Your child's new goal weight is _____ lbs. (Your pediatrician will tell

you this.) Bear in mind that your child's weight will increase as your child grows.

Your child's % body fat range was ___ to ___%.

Your child's % body fat range is ___ to ___%

Your child's cholesterol level was _____.

Your child's cholesterol level is _____. The normal level for children is <170.

Your child's triglyceride level was _____.

Your child's triglyceride level is _____. The normal range for children is _____.

Your child's LDL level was _____.

Your child's LDL level is _____.

This is the "bad" cholesterol.

The normal range for children is <110.

Your child's HDL level was _____.

Your child's HDL level is _____.

This is the "good" cholesterol.

The normal range for children is >35.

Your child's waist and hip measurements are ___ in (waist) _____ in. (hip)

Your child's waist and hip measurements are ___ in (waist) _____ in. (hip)

S/he lost ___ inches!