## EATING DISORDERS DECISION TREE Screening & Initial Evaluation

Use ESP to screen (attached). Consider having a PA, NP or RDN do screening.

Positive? Can you diagnose?

If you can diagnose:

Consult Diagnostic Criteria (see attached DSM 5 criteria)

Continue to evaluate for warning signs

Positive and Cannot Diagnose?

Consult handout: Regional Help & Resources

Refer to RDN, mental health specialist, NP or PA for further assessment.

## •ASK ABOUT:

- Use of <u>compensatory behaviors</u> (i.e., self-induced vomiting, laxative abuse, dieting, fasting or excessive exercise) to influence weight after eating or binge eating
- Inappropriate use of appetite suppressants, caffeine, diuretics, laxatives, enemas, ipecac, artificial sweeteners, sugar-free gum, prescription medications that affect weight (insulin, thyroid medications, psychostimulants, or street drugs) or nutritional supplements marketed for weight loss.
- OR refer to a specialist

## **WARNING SIGNS\*\*\***:

- Weight loss history-is it extreme?
- Weight stability-has weight fluctuated in past year or have multiple dieting attempts been tried?
- Vital signs-Bradycardia (slow pulse) present-heart rate<50bpm?</li>
- Orthostatic changes in pulse- >20 bpm or >10 mm Hg (change in blood pressure & pulse)
- Temp <96 degrees F,
- Electrolytes-Serum potassium < 3.2 mmol/L or Serum chloride < 88mmol/L

**Consult Hospitalization Criteria** 

**IF Warning signs** present or fits diagnostic criteria-

- 1. Refer to treatment center (see attached list for Oregon and Washington)
- 2. Or contact a local eating disorders provider.
- 3. IMMEDIATE NEED: Set up a local treatment team; Need to evaluate for appropriate level of care.

May need to admit for medical stabilization

Contact Regional Help & Resources
provider
See the AED Booklets

\*\*\*Do not assume a low heart rate is an "athletic heart" even if working with an athlete. Ask about food intake. If low for more than 2 days, assume the bradycardia is due to malnutrition. Understand this - eating disorders are a serious illness and not a personal choice. Do not assume that if your patient says they feel fine, that they are fine.