



Optimizing Chronic Disease Management

Request for Consultation
Be Your Best Program

Pediatric Obesity Services
Royal University Hospital
103 Hospital Drive, Saskatoon SK S7N 0W8
Phone: (306) 655-2199 Fax: (306) 655-6758

Please fax referral to LiveWell CDM 655-6758

DATE: FROM:

RE: Name:

Address:

Parents:

Phone: (H) (W)

Date of Birth: PHN:

Requested consult please check one: Be Your Best Program *

OR

Pediatrician Dietitian Psychologist Exercise Therapist

- *Be Your Best provides practical support for families in creating healthy eating and an active lifestyle. A multidisciplinary team of Pediatrician, Psychologist, Exercise Therapist and Dietitian will provide the program. Families will learn about positive lifestyle changes, skills required to develop and maintain a healthy lifestyle and issues that may block positive change. The child & both parents must attend & be willing and motivated to make family lifestyle changes.
Assess your family by asking: How motivated is this child to participate? 2. How motivated are the parents to participate? 3. Describe current family functioning ie. Cohesive, conflict, disengaged, dysfunctional 4. Are there any significant stressors or limitations that interfere with group participation?

Medical history: Hypertension Dyslipidemia Presence of Acanthosis PCOS Sleep Apnea

Family history: Obesity, Hypertension, Lipidemia, Pre-diabetes, Diabetes, Sleep Apnea

Medications:

Recent BP

Psychology/Psychiatry History:

Nutrition Information:

Current Level of Activity: type/frequency/week

Physical limitations

Please attach copy of growth chart, labs (lipids, FPG, LFT, AST, ALT, GGT, and ALK PO4)

