**Overweight/obesity**

We treat overweight/obese children who have evidence of dyslipidemia, insulin resistance or diabetes. The clinical recommendations listed below are not mandatory standards, and are not intended to be medical advice, but rather a set of recommendations for clinical evaluation and care. These recommendations are not a substitute for reasonable clinical judgment and decision making and do not exclude other options. Clinical care must be individualized to the specific needs of each patient and interventions must be tailored accordingly.

### Cardiovascular risk factors:
1. High-risk race/ethnicity: African American, Hispanic, Native American, Pacific Islander
2. Family history* of:
   a. Cardiovascular disease: < 55 year-old men; < 65 year-old women
   b. Dyslipidemia or use of lipid-lowering medication
   c. Obesity or history of bariatric surgery
   d. Diabetes or maternal history of gestational diabetes
   e. Hypertension or use of blood pressure-lowering medication
3. Tobacco use: History of smoking

* First- or second-degree relatives

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Signs/symptoms</th>
<th>Suggested lab workup prior to referral</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Overweight: BMI 85-94th%</td>
<td>• No cardiovascular risk factors</td>
<td>• Fasting or non-fasting lipid profile (Chol, LDL, HDL, TG) • Comprehensive metabolic profile (CMP)</td>
<td>For children &lt; 2 years of age, genetic testing and/or genetic referral should be considered, especially if the child has: • Developmental delay • Dysmorphic features</td>
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<tr>
<td>Obese: BMI 95-99th%</td>
<td>• No cardiovascular risk factors • No first- or second-degree relatives with diabetes mellitus</td>
<td>• Fasting or non-fasting lipid profile (Chol, LDL, HDL, TG) • Comprehensive metabolic profile (CMP)</td>
<td>For children 2-7 years of age, the following tests are generally recommended: • Fasting or non-fasting lipid profile (Chol, LDL, HDL, TG) • Comprehensive metabolic profile (CMP)</td>
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<tr>
<td>Obese: BMI 95-99th%</td>
<td>≥ two cardiovascular risk factors PLUS • First or second degree relatives with diabetes mellitus</td>
<td>• Fasting lipid profile • Hgb A1c • Comprehensive metabolic profile (CMP) • Complete blood count (CBC) • Lipoprotein (a) • Spot urine for microalbumin: creatine • Two-hour oral glucose tolerance test</td>
<td>Overweight or obese children who are pre-hypertensive or hypertensive without significant insulin resistance, have evidence of auto-immune thyroid disease or dyslipidemia should be referred to a Cook Children’s cardiology or nephrology specialist The recommendations listed for overweight/obesity are generally intended for children &gt; 8 years of age</td>
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<tr>
<td>Morbid obesity: BMI &gt; 99th%</td>
<td>• BMI &gt; 99th%</td>
<td>• Fasting lipid profile • Hgb A1c • Comprehensive metabolic profile (CMP) • Complete blood count (CBC) • Lipoprotein (a) • Spot urine for microalbumin: creatinine • Two-hour oral glucose tolerance test</td>
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Evaluation and referral guidelines

Tips for an effective visit:

- Inform the child and family about the reason for the referral and what to expect.
- Ensure all recommended evaluations have been completed prior to the child’s scheduled endocrine appointment.
- Provide relevant insurance information (copy of insurance card if available), clinic notes, growth charts, laboratory test and other diagnostic test results.

Referral priority

**EMERGENCY**
Hospitalization anticipated/required
Cook Children’s Emergency Department
682-885-4095
Teddy Bear Transport
1-800-KID-HURT
Notify endocrinologist on call
682-885-4000

**URGENT**
Outpatient visit needed within 1-5 days
Contact endocrinologist on call at 682-885-4000.

**ROUTINE**
First available appointment
Fax request for referral to 682-885-1327.

**NOT SEEN**
New patient referrals > 18 years of age

All referrals are seen as soon as scheduling and staffing permit. If there are concerns about a delay in a child’s scheduled outpatient appointment, if the child’s condition deteriorates or if other circumstances require the child to be evaluated sooner, please contact the endocrinologist on call.

Our staff

- Paul Thornton, M.D., Medical Director
- John Dallas, M.D.
- Alejandro De La Torre, M.D.
- Susan Hsieh, M.D.
- Jill Radack, M.D.
- Sani Roy, M.D.
- Joel Steelman, M.D.
- Larry Swanson, M.D.
- Teena Thomas, M.D.
- Michael Willcutts, M.D., Ph.D.
- Don P. Wilson, M.D.
- Teresa Newman, CPNP
- Lisa Truong, CPNP

Referral priority

**682-885-1940**
To better serve our treating clinicians, we can assist you with:
- Non-emergent transfer requests
- Direct admissions
- Specialist consultations