

CLINICAL OBESITY ASSESSMENT

At a minimum, health care professionals should perform an annual assessment of weight status in all children under their care. Assessment should include the following components:

MEDICAL AND FAMILY HISTORY

- Identify familial risks (e.g., overweight/obesity, type 2 diabetes, high blood pressure, heart disease, high cholesterol).
- Identify underlying syndromes or secondary complications of overweight and obesity (e.g., hypothyroidism, polycystic ovarian syndrome, Prader-Willi syndrome, diabetes, sleep apnea).

PHYSICAL EXAMINATION

- Measure height and weight, calculate BMI and plot on standard growth charts (e.g., CDC BMI for Age Percentiles grids).
- Measure blood pressure.
- Inspect and examine body systems to identify underlying syndromes or secondary complications of overweight and obesity (e.g., hirsutism, dysmorphic features, slipped capital femoral epiphysis, leg bowing, acanthosis nigricans).

DIETARY ASSESSMENT

- Identify eating behaviors, food intake and preferences.

PHYSICAL ACTIVITY ASSESSMENT

- Identify daily activities and exercise patterns.

PSYCHOSOCIAL ASSESSMENT

- Screen for depression, if indicated (e.g., Center for Epidemiological Studies Depression Scale for Children).
- Assess family support and readiness to change.

LABORATORY TESTING

Examples include, but are not limited to, fasting lipid profile, liver function tests, fasting plasma glucose and insulin levels and are based on history or exam findings. If the BMI for age and sex is:

- 85th to 94th percentile (overweight) with no risk factors: Obtain fasting lipid profile.
- 85th to 94th percentile (overweight) with risk factors in history or physical examination: Obtain also aspartate aminotransferase, or AST; alanine aminotransferase, or ALT; and fasting glucose.
- Greater than the 95th percentile (obese), even in the absence of risk factors: Obtain all of the tests listed in second bullet above, plus blood urea nitrogen and creatinine. Covered under patient's medical benefit.

MORBID OBESITY

Body Mass Index 99th Percentile Cut-Points (kg/m²)

Age-Year	Boys	Girls
5	20.1	21.5
6	21.6	23.0
7	23.6	24.6
8	25.6	26.4
9	27.6	28.2
10	29.3	29.9
11	30.7	31.5
12	31.8	33.1
13	32.6	34.6
14	33.2	36.0
15	33.6	37.5
16	33.9	39.1
17	34.4	40.8

Weight Loss Targets

Age-Year	BMI 85th-94th Percentile No Risks	BMI 85th-94th Percentile With Risks	BMI 85th-94th Percentile	BMI > 99th Percentile
2-5	Maintain weight velocity	Decrease weight velocity or weight maintenance	Weight maintenance	Gradual weight loss of up to 1 lb/mo if BMI is very high (>21 or 22 kg/m ²)
6-11	Maintain weight velocity	Decrease weight velocity or weight maintenance	Weight maintenance or gradual loss (1lb/mo)	Weight loss not to exceed an avg. of 2 lb/wk*
12-18	Maintain weight velocity. After linear growth is complete, maintain weight	Decrease weight velocity or weight maintenance	Weight loss not to exceed an average of 2 lb/wk*	Weight loss not to exceed an avg. of 2 lb/wk*

Abbreviation: BMI, body mass index.

*If greater loss is noted, monitor for causes of excessive weight loss.

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