

<b><u>NAME OF ROTATION:</u></b>	Childhood Obesity Elective
<b><u>COURSE DIRECTOR:</u></b>	Sandra E. Moore, MD MS (O) (404) 756-1371 (p) (404) 743 -2480
<b><u>LOCATION:</u></b>	Various
<b><u>PREREQUITE:</u></b>	Must sign-up a least 2 months prior to elective block

## **Goals and Objectives**

### **GOAL 1: Understanding Childhood Obesity**

Objective 1.1: Discuss the epidemiology and prevalence of obesity, and how the trends differ across communities, age, gender and ethnicity and socioeconomic status.

Objective 1.2: Learn the proper technique to assess for overweight and obesity in children, including anthropometric measurements, body fat caliper testing, diagnostic imaging and water volume displacement and waist circumference.

Objective 1.3: Learn the consequence of childhood overweight and obesity across the lifespan and how obesity impact's society as a whole (economic, mental, medical, etc.).

### **GOAL 2: Obesity. Understand the diagnosis and management of childhood obesity in primary care.**

Objective 2.1: When caring for pediatric patients obtain and interpret an appropriate history in a culturally relevant manner:

1. Use trigger questions to assess risk for obesity, poor nutrition, and eating disorders.
2. Obtain a dietary history
3. Assess time spent in physical activity vs. sedentary activities.
4. Assess satisfaction with eating patterns, perception of body image, adherence to food fads and diets, eating in secret, bingeing, purging, and use of laxatives, diuretics or dietary supplements.
5. Obtain a medical history
6. Obtain a family medical history
7. Using BMI category, medical and family history, assess risk for co –morbid disease associated with overweight and obesity (e.g., hypertension, hyperlipidemia, PCOS, type 2 diabetes).

Objective 2.2: When caring for pediatric patients perform and interpret an appropriate physical examination:

1. Learn to properly measure height and weight.
2. Identify stigmata of obesity on examination (acanthosis nigrans, striae)
3. Identify abnormal physical findings in the overweight patient that may indicate a co – morbid disease

Objective 2.3: Explain the findings on history and physical examination that lead to a diagnosis of overweight or obesity in a child or adolescent. These findings should include calculation and plotting of body mass index percentile for age and gender.

Objective 2.4: Know the differential diagnosis of childhood overweight and obesity and how to distinguish extrinsic obesity from intrinsic obesity (e.g. endocrine and genetic disorders).

Objective 2.5: Recognize, screen and interpret findings for co – morbid disease associated with overweight and appropriate (e.g., diabetes, hypertension, hyperlipidemia, sleep apnea, PCOS , orthopedic problems, low self esteem) and eating disorders.

Objective 2.6: Identify the risk factors for developing obesity, including family history of obesity, lack of exercise, sedentary behaviors (such as television viewing and computer usage), socioeconomic status, diet of high-calorie food, snacking and other eating patterns, and other environmental influences.

Objective 2.7: Develop an anticipatory guidance plan to counsel patients and families on lifestyle changes that may prevent or reduce obesity.

Objective 2.8: Discuss the adverse health effects associated with obesity. These include the relationship of obesity to asthma, Type 2 diabetes, gastroesophageal reflux, hyperlipidemia, liver disease, hypertension, orthopedic complications, psychological effects and stigma, and sleep apnea.

Objective 2.9: Compare the different methods used to treat obesity, and describe the indications for, risks and benefits of the following: diet therapy, physical activity, behavior therapy, drug treatment and surgery.

Objective 2.10 Discuss behavioral techniques used to help reduce overweight

Objective 2.11 Discuss the role of health insurance (including HMO) reimbursement in the care for the overweight patient

**GOAL 3: Understand the management of childhood obesity a referral center.**

Objective 3.1: Understand the parameter for appropriate referral to a tertiary care pediatric obesity weight management center

Objective 3.2 Understand specialty treatment approaches (both dietary and surgical) and potential complications from such approaches

**GOAL4: Understanding the role of community organization and schools in combating childhood obesity.**

Objective 4.1: To learn how community based programs approaches work within the community and how this approach may differ from the healthcare setting

Objective 4.2: To understand at least one school system perspective on it's role in childhood overweight (physical activity requirements, access to vending machine, school nutrition policies)

Objective 4.3: To prepare and deliver an age appropriate, culturally sensitive program on any component of childhood overweight

**GOALS5: Understanding Critical Reading and Application of Research.: It's role in Childhood Obesity**

Objective 5.1: Locate, appraise, and assimilate evidence from scientific studies related to one specific aspect of childhood obesity.

**GOAL 6: Child Health Advocacy: The role of the pediatrician in advocating for childhood obesity issues.**

Objective 6.1: Explain why children need child advocates (e.g., children cannot vote, lobby, or speak for themselves).

Objective 6.2 : Define the role of a child advocate and describe ways in which a pediatrician can advocate for children as it relates to childhood obesity.

Objective 6.3: Discuss how the American Academy of Pediatrics advocates for children (e.g., AAP's federal and state legislative activities and the CATCH Program). Identify other regional, national, and international child advocacy organizations that advocate for overweight children and describe how to obtain more information about them.

Objective 6.4: Identify key issues being considered by legislators (local and national) that could potentially impact childhood obesity.

Objective 6.5: Discuss barriers to healthy lifestyle for obese children and their families in their own community and some strategies to overcome these, including action the pediatrician can take, what the role of local and national government agencies should be, and community resources that are available to lessen or overcome the barriers.

Objective 6.6: Speak effectively about childhood obesity to families and community groups and participate in local child advocacy activities.

Objective 6.7: Work collaboratively with professionals in the medical, mental-health, educational and community system to optimize preventive health services for overweight and obese children.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM	Orientations Didactics 1. Fit Kids 2. Kay 3. Me 4. Marilyn or Rockelle	BeWell101	Dr. Beno	Continuity Clinic	Dr. Wulkan
PM	DIDATICS FOR ALL RESIDENTS	BeWell101	AAP?	Dr. Moore clinic  TIPPS (4-8)	Independent research and review, amy have some of the Monday AM stuff