



2022 LEAD Capstone Poster Session

Shifting the Paradigm of “Obesity Refer to Outpatient”: Getting hospitalists on board with EXCITE

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Abstract

- Most days, where the Hospitalist division census averages about 350, a 3rd of the census is with BMI of >28 with comorbidities
- Large fraction of these patients are uninsured with no access to follow up
- Our usual solution for this while Inpatient: **Obesity : refer to Outpatient**
- System Failure: as long wait for clinic appointments and those encounters focused on more acute/prominent issues and may be lost to follow up as no access to care
- As hospitalists we may have an opportunity to start education on Obesity in simple, kind and achievable terms
- While this has worked for me, it can be a challenge in understanding the Return on Investment if all of us spend some time doing this.
- So, I present this project : EXCITE which is an acronym



Objectives

E	Educate the patient on their BMI in a nonjudgmental way, starting with education videos which are extremely underutilized. Like the handbook for Diabetes, create a brochure for Obesity and ensure Dieticians visit patients to educate before discharge
X	eXercise : group classes /community classes- walking groups, advertising the benefits of eXercise – how much and what kind
C	Continuity : we can use post discharge calls- which can be bundled into the TCU (Transitional Care Unit), reiterate the need for exercise, smaller healthier meal portions, follow up with the Dietician
I	involvement - -most importantly- we should work towards identifying a buddy or support system- have the patient commit to a buddy- document and arrange for a call/visit with this buddy with a Dietician /nursing educator before they leave the hospital
T	Track . Teach patients to track their weight, food log, using simple bedside teaching-free Apps on phones. Send them home with a weighing machine- we send them home with Diabetes kits but no weighing machine! And finally:
E	Eliminate the pounds slowly over time in a healthy fashion- aim to lose 5-10% of their body weight over 6 months



Background Information

- Problem (supporting evidence)
 - According to CDC data, over 40% of US population is obese
 - Costs the US healthcare system \$173B annually (CDC data) and on average spend \$1,800 per month more than a non-obese healthy adult in medical costs
 - One study found that a significant number (65%) of patients admitted to the hospital for general medical conditions were overweight (34%) and obese (31%). Out of these patients, only 23% had the diagnosis of obesity documented during hospitalization.

- At the time of discharge, only 21/170 (12%) patients had obesity as a diagnosis on the discharge list.

- A miniscule percentage (3 of the 170 obese patients) received obesity counseling at the time of discharge highlighting the missed opportunity that could potentially have a positive impact on weight reduction.



Project Plan

- Results metrics: - Identification of obesity (goal >90%) and improving documentation of this
- Inpatient education (goal >90%) : conduct workshops to broaden participation from providers and nursing
- Diet Rx (goal >90%) : have RD visit 90% of these patients identified by above
- Activity Rx (goal >90%) - Increase the number of obese patients losing 5% weight in 6 months – will track the progress with post dc calls at frequent intervals and monitor logs(Tele visit by RD/RN navigator)
- Increase referrals to Parkland and UTSW weight loss programs
- Decrease readmissions to hospital - HTN, DM, OSA goals to be reviewed



Application of What You Learned at LEAD

- Engaging stakeholders
- Learning how to present a high value Project via the Capstone
- Using the skills learnt through coaching for leveraging my Emotional intelligence and leadership skills for collaboration



Proposed Budget

- TCU RN Co Ordinator x 2(existing roles, increase salary by 20%/annum to broaden role and increase volume) or alternatively hire more TCU co ordinators-1-2 for follow up
- RD- Registered Dietician x 2 to cover for Inpatient focused counseling: 67K x2
- Budget for advertisement- increasing awareness with nursing and other staff 10K annually

Description	Budget
TCU RN (2) * 20%	\$24,000
RD * 2	\$134,000
Advertisement	\$10,000
Annual Total	\$168,000



Innovation and Significance

- Utilizing Inpatient time and breaking the barriers of traditional mindset of deferring counseling about Obesity to outpatient
- Need to address one of the largest contributors to medical comorbidity- Obesity while admitted inpatient
- Reducing the burden on already short staffed and high-volume outpatient care of Parkland and likely reducing readmissions
- Establishing a novel program for Inpatients in an Underserved population and bridging the gaps
- Tracking the results to improve the program



References

- [Weight Wellness - Internal Medicine Subspecialties Clinic | Dallas, Texas | UT Southwestern Medical Center \(utswmed.org\)](#)
- [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6111619/#:~:text=This%20study%20found%20that%20a,of%20obesity%20documented%20during%20hospitalization](#)
- [https://shmpublications.onlinelibrary.wiley.com/doi/10.1002/jhm.295](#)