



# The Renfrew Center Eating Disorder Assessment

**This assessment was created to assist physicians and medical professionals in assembling relevant data pertaining to patients with eating disorder symptoms.** This assessment should remain in your patient's file for future reference.

To identify if your patient has an eating disorder, you may first wish to use The Renfrew Center's one-page screening scale entitled, "Eating Disorder Questionnaire." If you do not

have this form, please call **1-800-RENFREW (736-3739)** to request copies. Due to the diversity of eating disorder symptoms, these tools may not catch all eating disorder presentations; they can however illuminate several areas of concern for follow-up.

Upon completion of this scale, feel free to contact The Renfrew Center for additional assistance and resources in treating your patient's disorder.

**Patient Name**

**Home Address**

**Phone**

**Email**

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## WEIGHT CHANGE

Has there been recent weight loss or weight gain?

Yes

No

How much:

Time frame:

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## EATING PATTERNS

**Restricting:**

- Limiting food groups
- Limiting calories
- Skipping meals
- Fasting (non-religious reasons)
- Avoid foods due to sensory experiences (taste, texture, temperature, color)
- Only eat foods considered "clean", unprocessed, or organic

**Night Eating:**

- Consumes 25% of daily food intake after dinner
- Wakes up in the middle of the night to eat at least twice per week

**Bingeing:**

(frequency and amount)

**Purging:**

(frequency and amount)

**Purging Method(s):**

- Vomiting
- Laxatives
- Diet pills
- Enemas
- Ipecac
- Overexercising
- Restricting insulin

## EATING DISORDERS REVIEW OF SIGNS AND SYMPTOMS

Intolerance to cold    Cardiac problems    Constipation    Thyroid abnormalities    Dry skin  
Swollen cheeks    Lanugo/change in hair    Dental erosion    Fainting/dizziness    Blood in vomit or stool

History of amenorrhea:

Bone density scan results for patients with greater than 3 months of amenorrhea or irregular or light periods:

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## LABORATORY STUDIES

Based on the following baseline laboratory studies - **CBC, SMA 7, Biochem Profile, UA, TFTs, EKG** - you may encounter a variety of abnormalities listed in the box below.

Leukopenia and/or mild anemia  
Hypokalemia (May be difficult to correct in setting of acid-base disturbance.)  
Hypocalcemia  
Hypomagnesemia (If present must be corrected to resolve hypokalemia and/or hypocalcemia.)  
Hypophosphatemia (May worsen during early refeeding.)  
Decreased T3, low normal to normal T4, and normal TSH ("sick thyroid syndrome".)  
Hypoglycemia  
EKG (Bradycardia is common; prolonged QT may occur. Cardiomyopathy.)  
Hypercholesterolemia  
Metabolic acidosis due to laxative abuse  
Metabolic alkalosis due to vomiting  
Orthostasis

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## COMMENTS

