Freedom of Information Request: Our Reference CTMUHB_101_24

You asked:

Under the Freedom of Information Act, I would like to request the following:

- A copy of any **referral form** used to refer patients to weight management programmes.
    - If it is not possible to provide the full form, please provide the exact wording of any exclusion criteria i.e. any criteria/questions that would exclude someone from being referred to the programme, such as BMI, age or eating disorders.

Our response:

All referrals are completed utilising the Nutrition and Dietetics Referral form below. Decisions to refer should be in line with The All Wales Weight Management Pathway 2021 all-wales-weight-management-pathway-2021.pdf (gov.wales)

Department of Nutrition and Dietetics
Referral Form
CONFIDENTIAL – PATIENT INFORMATION

Please complete ALL sections. Unfortunately incomplete forms will be returned to the referrer for completion. This will result in a delay in patients being assessed.

Referrals will also be accepted in different formats if the following information is included.

Hospital/NHS Number:			
Title: Mr/Mrs/Miss/Ms	Surname:	Forename:	DOB:
Address:			
Post Code:	Home Tel Number: Mobile Tel Number:		
Does this patient require a home visit: Yes↑ No↑ If yes, please provide further information:			
Patient aware of and consents to referral Yes↑No↑ **Patient seen a Dietitian previously** Yes↑No ↑			
Relevant Medical History:	**Medication (Attach prescription if available):**		
Clinical Information (as appropriate):			
Weight (Kg):	Height (m)	BMI:	MUST score:
LDL:	HDL:	TG:	Other:
Fasting BG:	HbAlc:	Total Cholesterol:	
Reason for referral: Is patient suitable for groups? (Weight Reducers and Diabetes only) Yes↑No ↑			
Any other relevant information, e.g. weight history; social circumstances, etc:			
GP Name: Address: Post Code: Telephone: Fax:			
Name of Referrer (Please Print): Signature: Designation: Date:			
Please send completed form to your nearest hospital:- Nutrition and Dietetics Weight Management Team Keir Hardie Health Park			

Aberdare Road
Merthyr Tydfil
CF48 1BZ
Tel: 01685 728590

Or via email: CTM.weightmanagement@wales.nhs.uk