

# Potential Eating Disorder Assessment Tool

Early detection of an Eating Disorder is the best indicator of a swift and complete recovery. Many people with eating disorders and their families have been turned away from medical intervention and support because they have been told they or their child is "not sick enough". Identifying an eating disorder before a patient is medically compromised and therefore incredibly important.

## This section to be completed by patient or family member based on observation

(If two or more are ticked it indicated seeking an expert opinion)

Assessment	Yes	No
Would you say that food dominates your life?	<input type="checkbox"/>	<input type="checkbox"/>
Fainting or Dizziness?	<input type="checkbox"/>	<input type="checkbox"/>
Loss or disturbance of menstrual periods?	<input type="checkbox"/>	<input type="checkbox"/>
Are you waking up sweating during the night?	<input type="checkbox"/>	<input type="checkbox"/>
Have you recently lost more than 6kg in a 3 month period?	<input type="checkbox"/>	<input type="checkbox"/>
Do you believe yourself to be fat when others say you are too thin?	<input type="checkbox"/>	<input type="checkbox"/>
Do you make excuses to avoid family or social activities that involve food?	<input type="checkbox"/>	<input type="checkbox"/>
Changes in emotional and psychological state? e.g. low self-esteem, stress, anxiety, irritability, depression	<input type="checkbox"/>	<input type="checkbox"/>
Do you worry you have lost control over how much you eat?	<input type="checkbox"/>	<input type="checkbox"/>
Do you ever eat in secret?	<input type="checkbox"/>	<input type="checkbox"/>
Do you feel ashamed at the amount of food you have eaten in one episode?	<input type="checkbox"/>	<input type="checkbox"/>
Do you make yourself sick because you feel uncomfortably full?	<input type="checkbox"/>	<input type="checkbox"/>
Do you try things to manage your weight? <input type="checkbox"/> Restricting food intake <input type="checkbox"/> Excessive intensive exercise <input type="checkbox"/> Use of laxatives <input type="checkbox"/> Induce vomiting	<input type="checkbox"/>	<input type="checkbox"/>

## This section to be completed by your GP

(If observations are not in critical range it does not rule out an eating disorder)

Observations	Critical Signs/ Threshold indicating urgent medical attention
Postural Hypertension:	If postural changes of >10mm/Hg <90mmHg Systolic BP
Postural Tachycardia:	If <50bpm, >100bpm or if postural changes of >20bpm or if irregular (after 1 minute)
Hypothermia:	If <35.5°C
Hypoglycaemia:	Blood glucose <4
Hypokalaemia:	U waves on ecg High urinary pH
ECG Abnormalities:	Arrhythmia Prolonged QT interval Significant U waves Ischaemia
Electrolyte Abnormalities:	
Notes:	

**Further information or referral:** Queensland Eating Disorder Service (QuEDS) – (07) 3114 0809 offer an intake phone service which can provide advice and referral for private and medical practitioners. Monday to Friday 9am-12pm and 1pm-4pm. QuEDS (formerly known as EDOS) also offer a clinic at RBWH. A completed QuEDS written referral is required. Download NEDC Eating Disorders A Professional Resources for General Practitioners (GP) to find a GP with eating disorder experience in your area, contact Eating Disorders Queensland on (07) 3844 6055.

### Referencing:

RANC CP clinical practice guidelines for the treatment of eating disorders, 2014  
([https://www.ranzcp.org/files/resources/college\\_statements/clinician/cpg/eating-disorders-cpg.aspx](https://www.ranzcp.org/files/resources/college_statements/clinician/cpg/eating-disorders-cpg.aspx))