

Phone (336) 713-2348

Fax (336) 713-7841

# Brenner FIT<sup>®</sup> Program

Physician Referral Form

 Wake Forest<sup>®</sup>  
Baptist Health  
Brenner Children's Hospital

Patient Name: \_\_\_\_\_ MRN# \_\_\_\_\_

Date of Referral: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_  Home  Work  Cell

Secondary Phone #: \_\_\_\_\_  Home  Work  Cell

Parent's Preferred Language: \_\_\_\_\_ Interpreter Needed?  Yes  No

Physician Name: \_\_\_\_\_ Specialty: \_\_\_\_\_ Zip: \_\_\_\_\_

Physician Phone #: (\_\_\_\_) \_\_\_\_\_ Fax#: (\_\_\_\_) \_\_\_\_\_

Physician Email address: \_\_\_\_\_

Patient Height: \_\_\_\_\_ in/cm Patient Weight \_\_\_\_\_ lbs/kg BMI \_\_\_\_\_ kg/m<sup>2</sup>

Please check all that apply and/or fax all laboratory values available

Diagnosis

Lab Value (Normal value)

Date Obtained

- Hypercholesterolemia \_\_\_\_\_ Total Cholesterol (< 200mg/dL) \_\_\_\_\_ Date
- Dyslipidemia \_\_\_\_\_ HDL (> 40mg/dL) \_\_\_\_\_ Date
- Hyperlipidemia \_\_\_\_\_ LDL (< 130mg/dL) \_\_\_\_\_ Date
- Hypertriglyceridemia \_\_\_\_\_ Triglycerides (< 130mg/dL) \_\_\_\_\_ Date
- Type 2 Diabetes \_\_\_\_\_ Hemoglobin A1C (<5.7%) \_\_\_\_\_ Date
- Pre-diabetes \_\_\_\_\_ Hemoglobin A1C (<5.7%) \_\_\_\_\_ Date
- \_\_\_\_\_ Fasting Glucose (< 100mg/dL) \_\_\_\_\_ Date

(Pre-diabetes defined as fasting glucose between 100-125 and Hemoglobin A1C between 5.7-6.5%)

- Elevated LFT's/NAFLD/NASH \_\_\_\_\_ AST (≤ 60U/L) \_\_\_\_\_ Date
- \_\_\_\_\_ ALT (≤ 60U/L) \_\_\_\_\_ Date
- Hypertension (Systolic or diastolic BP > 90<sup>th</sup> percentile on 3 or more readings)
- BP \_\_\_\_\_ (Date \_\_\_\_\_) BP \_\_\_\_\_ (Date \_\_\_\_\_) BP \_\_\_\_\_ (Date \_\_\_\_\_)
- Obesity
- Sleep Apnea
- PCOS (Polycystic Ovarian Syndrome)
- Pseudotumor Cerebri
- Acanthosis Nigricans
- Asthma
- Blount's Disease/SCFE (Slipped Capital Femoral Epiphysis)

Please FAX this **completed Referral form, lab results and patient's insurance information** to:  
Brenner FIT (336) 713-7841

**\*For additional questions please call our office at (336)713-2348\***

**Brenner FIT® (Families in Training)**  
**A Multidisciplinary Weight Management Program**  
**for Children and Their Families**  
[BrennerFIT@wakehealth.edu](mailto:BrennerFIT@wakehealth.edu)  
[www.brennerchildrens.org/brennerfit](http://www.brennerchildrens.org/brennerfit)



The Brenner FIT Program at Wake Forest Baptist Health--Brenner Children's Hospital is one of the most comprehensive pediatric weight management programs in the country. Brenner FIT sees patients referred by a physician for having a BMI  $\geq$  95<sup>th</sup> percentile. We are a multi-disciplinary team providing research-based care to children with unhealthy weight and their families. Brenner FIT does not use restrictive diets or medication, but instead utilizes evidence-based methods of family behavior modification, combined with improved nutrition and physical activity. The Brenner FIT Team includes pediatricians, behavioral counselors, dietitians, physical therapists, social workers and exercise specialists. Together, they guide families to a healthier life.

Brenner FIT is here to help all families who are seeking a healthier lifestyle. For English or Spanish speaking families in the greater Piedmont Triad area, the first step is attending an Orientation meeting to learn more about the program. Once the family chooses to begin the program, they will attend 6-months of intensive treatment with Brenner FIT multidisciplinary team that includes clinic visits and classes.

- For Spanish-speaking families, **Brenner FIT en Español** provides a Spanish-speaking team.
- For families living a distance away, we have **TeleFIT sites in Boone, Danbury, Dobson, Elkin, Granite Falls, Greensboro, Lenoir, Hickory, Statesville, West Jefferson, and Wilkesboro**. In these locations, families complete most of the visits via webcam in a local pediatrician's office.

**How To Refer to Brenner FIT®**

- Complete fasting laboratory studies (**glucose, hemoglobin A1C, lipid panel, AST, ALT**)
- Complete referral sheet including identified medical co-morbidity and current lab values
- Fax completed referral form along with patient's insurance information to (336) 713-7841

The family will receive a letter to attend orientation as soon as possible. Once a family decides to begin treatment, the family will be in the program for approximately 6 months. We will update the referring physician when the family begins the program and upon completion. Additional updates will be provided as needed.

Our community prevention and education opportunities (nutrition, activity and parenting classes) are free and available to all members of the community. Please visit our website to learn more. [www.brennerchildrens.org/brennerfit](http://www.brennerchildrens.org/brennerfit).

PLEASE CALL (336) 713-BFIT IF YOU HAVE ANY QUESTIONS.