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Introduction

Over 14 million children & adolescents are obese in the United States.

Why Should we care?

- Short Term illnesses
- Long-term conditions
- Increased cost
- Health care system burden

Problem Statement

The focus of this project is to assess gaps and barriers to pediatric providers' knowledge of bariatric surgical interventions, available resources, and current referral practices.

Methodology

Project Design:

Quantitative, cross-sectional

Project Population & Setting:

 125 pediatric providers from a health care system in central & northern New Jersey

Intervention:

 39-question needs assessment survey

Measurable outcomes:

Gaps in provider knowledge of:

- bariatric procedures
- available resources
- referral patterns

Data Analysis:

Descriptive Statistics & Themes

Childhood Obesity Survey for Pediatric Health Care Providers: Adolescent Bariatric Options





treatments for adolescents

- When to refer adolescents





Discussion

Results signify the need to increase pediatric providers education on bariatric management for adolescents.

Pediatric providers should be aware the **American Academy of Pediatrics(AAP)** and American Society for Metabolic Surgery (ASMBS) Guidelines state:

- Pediatric providers should be familiar with and **understand** the efficacy, risks and benefits of bariatric procedures
- Providers should refer severely obese adolescents in a timely manner
- The ASMBS **no longer** considers previous weight loss attempts as a barrier to bariatric surgery

Implications

Clinical Practice

- Educational interventions on bariatric management, resulting in **increased referral patterns**.
- Quality and Safety
 - Increase providers' knowledge in order to **select the best** treatment option for obese adolescents.
 - May result in better quality of life for the patient
- Education
 - Evaluate **medical school** curriculum, and provide additional education and training in adolescent obesity management



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