

Weight Control Clinic Referral Guidelines

Austin Health holds a weekly Weight Control Clinic for people with severe obesity needing specialist obesity management. **Due to an overwhelming demand for this service, we are currently only accepting referrals for patients meeting the criteria below.** We are developing online obesity management resources for health professionals and patients and will update this page as they become available.

Department of Health clinical urgency categories for Specialist Clinics

Urgent: Referrals should be categorised as urgent if the patient has a condition that has the potential to deteriorate quickly, with significant consequences for health and quality of life, if not managed promptly.

Routine: Referrals should be categorised as routine if the patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life if specialist assessment is delayed beyond one month.

Exclusions: Outside the criteria given in "when to refer" below

Condition / Symptom	GP management	Investigations required	Expected triage outcome	Expected specialist intervention outcome	Expected number of specialist appointments
Severe, complex obesity	When to Refer: ≥18 years old AND wishes to undertake intensive medical weight loss intervention AND BMI ≥55 kg/m² OR Prader-Willi syndrome OR Weight loss required for additional treatment to improve survival (e.g. organ transplantation, surgical removal of malignancy)	To be included in referral: see obesity clinic referral form. Age, height, weight, co-morbidities, and current medications are required. Diagnostics Fasting glucose, electrolytes/renal function, liver function tests, TSH, fasting lipid profile, HbA1c (if has diabetes)	Urgent: within 4 weeks Routine: Patient will be treated in turn	Usual treatment regimen is modified very-low-energy diet (VLED) followed by dietician-supervised transition to regular foods. Pharmacotherapy for appetite reduction and/or referral for bariatric surgery will be considered if indicated.	Dependent on indication for referral. Typically 4-6 appointments over a period of 6 months. Patients will then be discharged back to their general practitioner's care with a plan for longer-term management.