

Practice Readiness Checklist for Plus-Size Patients

Is your office space plus-size welcoming? These are qualities that will make plus-size clients comfortable:

- ☐ Hallways and doorways are comfortably wide
- ☐ Waiting room chairs are armless and will hold 500 pounds (226 KG). Wide bariatric chairs with arms that hold 500 pounds (226 kg) are available to order online.
- ☐ Area for measuring weight is private
 - The scale weighs up to at least 500 pounds (226 kg). Scales that weigh up to 500 pounds (226 kg) are available online for less than \$50 USD (\$70 Canadian).
 - Clients are encouraged to weigh themselves.
 - The scale is placed so that clients can see their own weight
- ☐ Chairs in exam rooms are armless and will hold 500 pounds (226 kg)
- ☐ Exam table has stable step that rests on floor and won't tip
 - Exam table is placed so that clients can easily move around it
 - Exam table holds 500 pounds (226 kg)
- ☐ Plus size gowns are available
- ☐ Large blood pressure cuffs are available wherever blood pressure is measured
- ☐ Toilet room is large enough for comfortable movement
 - The commode has room on both sides for comfort
 - Urine collection hats are available for specimen collection
- ☐ Do your website and handouts include pictures of plus-size clients?
- ☐ If you refer to other clinicians-physicians, dieticians, physical therapists, midwives-are those practices welcoming to plus-size clients?

Does every staff member and provider show respect to clients regardless of size?

Does the practice offer the choice of clients weighing themselves privately during prenatal visits?

Do the practice staff and providers trust clients to self-report weight?

Do providers ask clients for permission to talk about eating, nutrition and weight gain in pregnancy?

Are the potential complications related to obesity discussed with all clients? If the client chooses not to discuss weight-based risks, is permission given to the client to ask for more information at a later time?

Is a target weight gain for pregnancy discussed with all clients at the first prenatal visit?

Do providers ask about client's food preferences or tell clients what to eat?

Are the ways that clients could help prevent obesity-related complications in pregnancy discussed with them? Is decision making shared?

Are providers and staff comfortable with the questions that clients ask about obesity related health?