

***BiW4Teens* Clinic Resource Package**

Back in Whack for Teens [BiW4Teens] is an evidence-based multi-component pediatric weight management intervention for tweens (ages 9 through 12) and teens (ages 13 through 18). The Clinic Resource Package supports clinics who plan to follow youth/parents who have purchased the online *BiW4Teens* program. This package contains everything a clinic needs to successfully launch the *BiW4Teens* program in the clinic.

Materials in the Clinic Resource Package are only to be used by the clinic who purchase the package. Under no circumstances are any parts of the program materials and resources to be sold for money or exchanged for other goods or services. The fee for the *BiW4Teens* Clinic Resource Package is \$195.00.

The Clinic Resource Package includes all of the following program materials and resources.

I] Clinic Materials Included:

1. *BiW4Teens Program Implementation Checklist*
2. *BiW4Teens Patient Referral Process*
3. *BiW Program Billing Codes* – lists ICD10 and procedure codes for clinic visits and phone consultation
4. *BiW4Teens EMR Template*
5. Forms used during clinic visits:
 - a. *Prescription for a Healthy Weight*
 - b. *BiW4Teens Clinic Brochure*
 - c. *BiW Health Habits Assessment Form*
 - d. *BiW4Teens Detailed Documentation Forms Packet* which includes:
 - i. Initial Contact
 - ii. Pre-Visit Chart Review
 - iii. Initial Visit
 - iv. Implementation Phase – Clinic Visit
 - v. Maintenance Phase – Clinic Visit
 - e. *BiW4Teens Patient Progress Log (Short)* – includes list of sessions completed and list of healthy habits
 - f. *BiW4Teens Patient Progress Log (Long)* – includes list of sessions completed and list of healthy habits plus learning objectives for each session
 - g. *HCP-Parent-Teen Program Commitment Contract*
 - h. *BiW4Teens Multi Patient Log*
 - i. *BiW Health Questionnaire Form*
6. Program promotion materials:
 - a. *BiW4Teens clinic poster*
 - b. *BiW4Teens news article template*
 - c. *“Make Your Next BiW4Teens Appointment” post card template*

II] Staff Training and Materials Included:

1. Four-part program orientation via webinar to include:
 - a. Overview of childhood obesity (health issues related to childhood obesity and key habits that impact a child’s weight)
 - b. Overview of *BiW4Teens* program components
 - c. Two program phases
 - d. How to talk to parents and youth about a touchy subject
 - e. Program outcomes and benefits
 - f. Steps to implementing a successful *BiW4Teens* program in the clinic
 - g. Program referral process for patients

- h. Facilitating a successful clinic visit
 - i. Importance of program incentive gifts
 - j. Using *BiW4Teens* documentation forms
 - k. Billing for sessions
2. *BiW4Teens Program Curriculum*
 3. *BiW4Teens Program Outline*
 4. *BiW4Teens Habit Explanation Cue Card*
 5. *BiW4Teens Program Introduction cue card*

NOTE – Participant materials (BiW4Teens Workbook and Videos) are not included with the Clinic Resource Package. Youth and their parents will need to be referred to the Positive Patterns for Life website to purchase the BiW4Teens workbook and program videos. The Prescription for a Healthy Weight or the BiW4Teens Program Brochure should be used when making this referral.

CLINIC INFORMATION AND FEES

The cost of the Clinic Resource Package is \$195.00. Upon receiving this application with the full payment of \$195.00, Positive Patterns for Life will send the clinic manager an email with instructions about how to access the secure website pages which contain the clinic resources and HCP training videos.

Clinic Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Fax Number: _____

Clinic Manager Name: _____

Office Phone: _____ Email: _____

Select Payment Method
<input type="checkbox"/> Purchased on the Positive Patterns for Life website – Upon completing the online purchase, email this completed application to: positivepatternsforlife@gmail.com OR you can mail it to the address listed to the below.
<input type="checkbox"/> Pay with company check, money order, or cashier check – Make checks payable to Positive Patterns for Life, LLC. Mail this completed application with payment to: <div style="text-align: center;"> Positive Patterns for Life, LLC P.O. Box 902 Guernsey, WY 82214 </div>

If you have any questions about how to complete this application, please email positivepatternsforlife@gmail.com or call 307-331-4256.