

# Ensuring a Welcome Environment for Patients with Obesity

Many patients with obesity refrain from seeking medical care because they feel [uncomfortable in a medical environment](#). In addition to anticipating the physical discomfort of the waiting area and exam room, patients may also fear judgment from the staff. All members of the staff, from receptionists to clinicians, should keep the following in mind while interacting with patients who have obesity.

## Bias and Stigma

Make sure that all staff members are prepared to treat patients of any size with respect and sensitivity. Some people still do not recognize obesity as a disease that requires treatment and may express judgement when they should be empathetic to patients' needs. It is also safe to assume that patients with obesity [have experienced bias in a medical environment before](#); your office should be where their fears are put to rest.

## Patients' Privacy During Routine Weight-Taking

Patients with obesity may be more concerned than other patients about privacy. For instance, a patient may be reluctant to have his or her weight taken in a public space, putting scales in private exam rooms may be preferable.

After asking the patient for permission to be weighed, staff should give patients the option of not seeing their weight. In addition, recording weight data with a neutral affect and nonjudgmental tone is equally important.

## Best Practices for Treating Larger Patients

Certain routine medical procedures, such as [taking blood](#), may require different equipment or techniques for patients with obesity. Staff should be trained accordingly so the patients feel equally accommodated and comfortable. Equipment and supplies should also be readily available. Staff may also set a patient's mind at ease by reminding them that weight is not the only factor that may affect how a routine medical procedure is conducted. Regularly provide [training opportunities and materials](#) to staff so any new developments in treatment are incorporated seamlessly.

## Use Language Designed to Build up Patients

Certain language may make patients feel self-conscious or even dehumanized. Be aware of the words used by office staff and, if necessary, recommend changes in the way the staff members address patients with obesity. Patients with obesity may have been made to feel guilty about their condition outside the medical office; inside it they should be made to feel worthy of receiving care and treatment.



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[The Obesity Society](#) provides materials for clinicians to display in their offices (posters, etc) that pledge to “Treat Obesity Seriously,” which can serve as support for patients and reminders for the staff.

## Acknowledge the Difficulty of Living with Obesity

There is a good chance that a patient who enters your office has been to several other offices after several attempts to lose weight. It is important for the staff to be sensitive to patients who have been unsuccessful thus far and recognize their previous efforts. Ensure patients that the medical staff is here to work with them to help them change their lifestyles and habits and begin a new course of treatment, even if it takes some time.

## Resources

<http://www.aafp.org/afp/2002/0101/p81.html>

[http://www.medscape.com/viewarticle/749440\\_2](http://www.medscape.com/viewarticle/749440_2)

[https://www.mayomedicallaboratories.com/media/education/phlebotomy\\_dvd/presentationcolor.pdf](https://www.mayomedicallaboratories.com/media/education/phlebotomy_dvd/presentationcolor.pdf)

<http://obesitymedicine.org/>

<http://www.obesity.org/publications/clinical-resources>

