### INFORMATION REQUIRED

**All Applicants:**
- Eating Disorder Form
- Mental Health Treatment Summary Form
- Review of functional status as documented in the Mental Health Treatment Summary.

**If Applicable:**
- Treatment summaries for all in-patient and out-patient treatment programs.
- Discharge summary for all psychiatric hospitalizations.
- Additional review of functional status, e.g., contact Volunteer Recruitment & Selection.
- Bone densitometry report.

**If Currently Undergoing Treatment with Psychotropic Medications:**
- Statement from prescribing physician addressing:
  - Diagnosis
  - Medication history, i.e., dates, doses, response, adverse effects.
  - Required monitoring over the next 3 years.

### CLEARANCE CRITERIA

<table>
<thead>
<tr>
<th>CLEARANCE CRITERIA</th>
<th>REVIEWER</th>
<th>GUIDANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Successfully treated for anorexia nervosa in a treatment program specializing in eating disorders.</td>
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<tr>
<td>2. Weight maintained at 75% of maximum ideal body weight for at least the past 3 years.</td>
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<tr>
<td>3. No episodes of abusive eating or weight control behaviors for at least the past 3 years.</td>
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<tr>
<td>4. No disturbances of body image for at least the past 3 years.</td>
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<tr>
<td>5. No physiologic signs or symptoms of malnutrition, e.g., amenorrhea, dehydration, laboratory abnormalities, excessive dental decay.</td>
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<tr>
<td>6. Functioning well socially and occupationally during the past 3 years (corresponds to a GAF of 75 or above).</td>
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<tr>
<td>7. Active phase of psychotherapy or counseling complete. Continuing counseling sessions for normative issues only.</td>
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<tr>
<td>8. No history of suicide attempt, gesture, or ideation with plan.</td>
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<tr>
<td>9. No history of coexisting psychiatric disorders (Axis I and Axis II).</td>
<td></td>
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<tr>
<td>10. No history of psychosis.</td>
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</tr>
</tbody>
</table>
ANOREXIA NERVOSA

Does not meet clearance criteria due to one or more of the following:
- Some impairment of functioning socially or occupationally during the past 3 years (corresponds to a GAF below 75).
- Active phase of psychotherapy or counseling not complete.
- Not stable on psychotropic medications for at least the past 1 year.

Does not meet clearance criteria due to one or more of the following:
- Episodes of abusive eating or weight control behaviors during the past 3 years.
- Disturbances of body image during the past 3 years.
- Not treated, or unsuccessfully treated, for anorexia nervosa.
- Weight not maintained at 75% of maximum ideal body weight during the past 3 years.
- Physiologic signs or symptoms of malnutrition, e.g., amenorrhea, dehydration, laboratory abnormalities, excessive dental decay.

Does not meet clearance criteria due to one or more of the following:
- History of suicide attempt, gesture, or ideation with plan.
- History of coexisting psychiatric disorders (Axis I and Axis II).
- History of psychosis.

DIAGNOSTIC CODES

307.1 Anorexia Nervosa
Cross Reference DSM - IV

NOTES AND INSTRUCTIONS FOR REVIEWERS

Reviewers to Consider:
- Current mental health evaluation, i.e., Mental Health Evaluation Form.
- Telephone interview with applicant.
- Telephone interview with applicant’s mental health provider or treating physician.
- Evaluation by an eating disorder specialist.

COMMENTS

Background: Anorexia Nervosa is an extremely difficult disorder to treat. It is associated with a high mortality rate due to the medical consequences of starvation, i.e., 6.8% at 10 years, 12.0% at 20 years, 16.0% at 30 years, and 20.0% at 50 years. Therefore, one fourth of these patients can be considered to have made a good psychological adjustment when followed to ages 20 through 50 years. The disease is also characterized by frequent relapses. There is no accepted definition of relapse in anorexia nervosa. Some studies define relapse by weight loss below the normal range associated with a recurrence of the other core symptoms of the disease, i.e., amenorrhea, body image distortion, and eating and weight control abnormalities, after a recovery characterized by the disappearance of these core symptoms and by weight maintenance in the normal range for at least 1 year. Other studies define relapse as first weight loss below normal at any time after the index hospitalization. In general, 35-40% of relapses occur “early”, i.e., during the first year after attaining a normal weight. If individuals maintain their weight in the normal range for at least 1 year their chance of remaining in the normal weight range improve considerably. The majority of patients with this disorder are females. Only 4% to 6% of the anorexia nervosa population are males. Poorer outcomes are associated with longer duration of illness, older age at onset, previous admissions to psychiatric hospitals, poor childhood social adjustment, premorbid personality difficulties, and disturbed relationships between patients and other family members.
ANOREXIA NERVOSA

Key Symptoms: The patient refuses to maintain a body weight at or above a minimally normal weight for age and height, e.g., weight loss leading to maintenance of body weight less than 85% of that expected. There is an intense fear of gaining weight or becoming fat. In postmenarcheal females, there is amenorrhea, i.e., the absence of at least 3 consecutive menstrual cycles.

Screening Height/Weight Table: 75% of maximum ideal body weight corresponds to 85% of average ideal body weight.

Body Mass Index (BMI): weight (kg) / height² (m²)

Medications/Therapy: This disorder often requires frequent psychiatric and medical hospitalizations. Individuals are often seen on a long-term basis. In addition to individual psychotherapy, selective serotonin reuptake inhibitors and antidepresants, are frequently used both in the treatment and maintenance phases of this disorder.

Literature review available.
BULIMIA NERVOSA
Includes Binge Eating Disorder

INFORMATION REQUIRED

All Applicants:
- Eating Disorder Form
- Mental Health Treatment Summary Form
- Review of functional status as documented in the Mental Health Treatment Summary.
- Review dental clearance.

If Applicable:
- Treatment summaries for all in-patient and out-patient treatment programs.
- Discharge summary for all psychiatric hospitalizations.
- Additional review of functional status, e.g., contact Volunteer Recruitment & Selection.

If Currently Undergoing Treatment with Psychotropic Medications:
- Statement from prescribing physician addressing:
  - Diagnosis
  - Medication history, i.e., dates, doses, response, adverse effects.
  - Required monitoring over the next 3 years.

CLEARANCE CRITERIA

1. Successfully treated for bulimia nervosa in a treatment program specializing in eating disorders.
2. No, or isolated, episodes of bulimic or weight-control behavior, e.g., self-induced vomiting, laxative use, excessive exercise, for at least the past 1 year.
3. Functioning well socially and occupationally during the past 1 year (corresponds to a GAF of 75 or above).
4. Active phase of psychotherapy or counseling complete. Continuing counseling sessions for normative issues only.
5. No history of suicidal ideation, gestures, or attempts.
6. No history of coexisting psychiatric disorders (Axis I and Axis II).
7. No history of psychosis.
8. Dental clearance complete.

Meets clearance criteria 1 - 8, AND
- No use of psychotropic medications for at least the past 6 months.

<table>
<thead>
<tr>
<th>RN</th>
<th>CLEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>RN</td>
<td>CLEAR WITH RESTRICTION</td>
</tr>
<tr>
<td>PCMO FOLLOW-UP</td>
<td></td>
</tr>
<tr>
<td>Monitor stability pm.</td>
<td></td>
</tr>
<tr>
<td>Avoid melphane.</td>
<td></td>
</tr>
</tbody>
</table>

If on psychotropic medication, stable for at least the past 6 months.

| RN | CLEAR WITH RESTRICTION |
| PCMO FOLLOW-UP |
| Monitor stability pm. |

(continued on next page)

(continued on next page)
Does not meet clearance criteria due to one or more of the following:

- Episodes of bulimic or weight-control behavior, e.g., self-induced vomiting, laxative use, excessive exercise, within the past 1 year.
- Some impairment of functioning socially or occupationally during the past 1 year (corresponds to a GAF below 75).
- Active phase of psychotherapy or counseling not complete.
- Not stable on psychotropic medications for at least the past 6 months.
- Dental clearance not complete.

Does not meet clearance criteria due to one or more of the following:

- Not treated, or unsuccessfully treated, for bulimia nervosa.
- History of suicide attempt, gesture, or ideation with plan.
- History of coexisting psychiatric disorders (Axis I and Axis II).
- History of psychosis.

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**DIAGNOSTIC CODES**

<table>
<thead>
<tr>
<th>Code</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>307.51</td>
<td>Bulimia Nervosa</td>
</tr>
<tr>
<td>307.50</td>
<td>Binge Eating Disorder</td>
</tr>
</tbody>
</table>

Cross Reference DSM - IV

**NOTES AND INSTRUCTIONS FOR REVIEWERS**

Reviewers to Consider:

- Current mental health evaluation, i.e., Mental Health Evaluation Form.
- Telephone interview with applicant.
- Telephone interview with applicant's mental health provider or treating physician.
- Evaluation by an eating disorder specialist.
Medications/Therapy: Psychotherapy includes both individual and group psychotherapy. Therapy is frequently long-term and may require ongoing maintenance therapy. Medications, particularly selective serotonin reuptake inhibitors and tricyclic antidepressants, are frequently used in both the treatment and maintenance phases of this disorder.

Literature review available.
**INFORMATION REQUIRED**

All Applicants:
- Eating Disorder Form
- Review of functional status as documented in the Mental Health Treatment Summary.

If Applicable:
- Treatment summaries for all in-patient and out-patient treatment programs.
- Discharge summary for all psychiatric hospitalizations.
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If Currently Undergoing Treatment with Psychotropic Medications:
- Statement from prescribing physician addressing:
  - Diagnosis
  - Medication history, i.e., dates, doses, response, adverse effects.
  - Required monitoring over the next 3 years.

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**CLEARANCE CRITERIA**

Applicant presents with a history of one of the following disorders:

<table>
<thead>
<tr>
<th>1. Eating Disorders Not Otherwise Specified</th>
<th>MHA</th>
<th>Risk varies - assess based on detailed history.</th>
</tr>
</thead>
</table>

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**NOTE**: This section is to be reviewed only if the applicant presents with an eating disorder that is not otherwise specified.

The diagnosis of Eating Disorders Not Otherwise Specified is used when an individual does not meet the criteria for anorexia nervosa or bulimia nervosa but still exhibits signs of an eating disorder.

Examples include:
1. For females, all the criteria for anorexia nervosa are met except that the individual has regular menses.
2. For females, all the criteria for anorexia nervosa are met except that the individual's weight is in the normal range.
3. All the criteria for bulimia nervosa are met except that the binge eating and inappropriate compensatory mechanisms occur at a frequency of less than twice a week or for a period of less than 3 months.
4. The regular use of inappropriate compensatory behaviors, such as vomiting or laxative abuse, in the absence of excessive eating.
5. Repeatedly chewing and spitting, but not swallowing, large amounts of food.

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Effective 2/4/2004