

# Bariatric Psychological Evaluation

## Patient Information

Name:

Date of Birth:

Contact Information:

Referring Physician:

## Surgical Information

Type of Bariatric Surgery Considered:

Date of Surgery (if scheduled):

## Mental Health Assessment

### 1. Clinical Interview

Reason for Seeking Bariatric Surgery:

Previous Attempts at Weight Loss (methods, duration, outcomes):

Current Eating Behaviors (including any instances of binge eating, restrictions, etc.):

History of Mental Health Disorders:

Current Mental Health Status:

Medications (including any psychotropic medications):

## **2. Psychological Testing**

Tests Administered (e.g., BDI for depression, EDE-Q for eating disorders):

Key Findings:

## **3. Assessment of Eating Disorders**

Indications of Eating Disorders (Anorexia, Bulimia, Binge-Eating Disorder):

Impact on Daily Life and Functioning:

#### **4. Substance Abuse Assessment**

History of Substance Use/Abuse:

Impact on Lifestyle and Surgery:

#### **5. Emotional and Psychological Factors**

Emotional Health Evaluation (current stressors, mood disorders):

Coping Mechanisms:

Support Systems (family, friends, support groups):

#### **Readiness for Surgery**

Understanding of Bariatric Surgery:

Expectations from Surgery (weight loss goals, perceived lifestyle changes):

Motivation for Surgery:

Capacity for Adhering to Post-Surgery Recommendations:

### **Psychological Risks**

Identification of Psychological Risks (e.g., likelihood of non-compliance, potential for post-surgery depression):

Strategies for Mitigation:

## Recommendations

Suitability for Surgery:

Recommended Interventions (pre and post-surgery):

- Mental Health Counseling:

- Nutritional Counseling:

- Physical Activity Guidance:

Follow-Up Plan:

## Evaluator's Information

Evaluator's Name:

Signature:

Date of Evaluation: