

GP Referral Assessment Questionnaire

Name		Weight (kg)			
NHI		Height(m)			
Age		BMI(kg/m²)			
Gender					
Referrer					
Inclusion Criteria	Y	N		Y	N
BMI > 40 or BMI >35 plus comorbidities			Failed non-surgical attempts at weight loss for more than 2 years		
Obesity > 5 years			Understanding of and motivated for surgery		
Weight <200kg or BMI <55			Accepts long term to follow-up		
Non-smoker (Non -smoking for 6 months)					
PLEASE DO NOT SEND THE PATIENT IF THEY HAVE THE FOLLOWING:					
Weight >200kg or BMI over 55 (can be negotiable, case by case)			Brain injury/Prader Willi		
Is a smoker of cigarettes and/or other substances currently/within the past 6 months			Significant respiratory disease other than OSA		
Pulmonary hypertension			Steroid dependent disease		
Established cirrhosis/ Portal hypertension			Any condition requiring wafarinisation		
Dilated cardio myopathy			Unstable psychiatric disease		
Renal failure other than micro-albuminuria			Crohns disease		
History of malignancy (other than low risk E.G SCC)			Abdominal radiotherapy		
Personality disorder			Recurrent peptic ulcer disease		
Additional information:					
Previous abdominal surgery: Yes/No. Operation:					
Major active medical co-morbidities:					

