

**GEORGE WOODMAN, MD/MIDSOUTH BARIATRICS  
PHYSICIAN SUPERVISED DIET RECORD (Fax to (901) 869-2009)**

Supervised by (print) \_\_\_\_\_

Patient \_\_\_\_\_ Date \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Blood Pressure \_\_\_\_\_ / \_\_\_\_\_ HR \_\_\_\_\_

**DIET:**

\_\_\_\_\_ Low calorie (1000-1200 cal)      \_\_\_\_\_ Very low cal (800 cal)      \_\_\_\_\_ Diabetic diet

\_\_\_\_\_ Weight Watchers      \_\_\_\_\_ Jenny Craig      \_\_\_\_\_ Low Fat diet

\_\_\_\_\_ Low Carbohydrate diet      \_\_\_\_\_ South Beach      \_\_\_\_\_ Protein Diet

\_\_\_\_\_ Nutri-Systems      \_\_\_\_\_ Medifast      \_\_\_\_\_ Optifast

\_\_\_\_\_ Other \_\_\_\_\_

**PHARMACOLOGICAL THERAPY:**

\_\_\_\_\_ Phentermine      \_\_\_\_\_ Adipex      \_\_\_\_\_ Fastin      \_\_\_\_\_ Redux

\_\_\_\_\_ GLP-1 Agonist \_\_\_\_\_ Other \_\_\_\_\_

**EXERCISE PROGRAM:**

\_\_\_\_\_ Aerobic      How often: \_\_\_\_\_ (min/day)

\_\_\_\_\_ Water aerobics      \_\_\_\_\_ (days/week)

\_\_\_\_\_ Strengthening

\_\_\_\_\_ Walking

\_\_\_\_\_ Other: \_\_\_\_\_

**ONGOING SUPPORT:**

\_\_\_\_\_ Patient encouraged to continue working on diet and exercise

\_\_\_\_\_ Patient encouraged to attend support groups meetings

\_\_\_\_\_ Patient reminded that nutritional and psychological counseling are available

This patient has seen me for dietary instruction, exercise counseling, pharmacological therapy, and/or behavior modification therapy, and is following the guidance to the best of my knowledge.

**NP/DOCTOR SIGNATURE:** \_\_\_\_\_