



Government of **Western Australia**
South Metropolitan Health Service



Kara Maar

Specialist Community Eating Disorders Service

GP information



Cockburn Health & Community Facility, 11 Wentworth Parade, Success 6164

Peel Health Hub, 91 Allnutt Street, Mandurah 6210

Email: SMHS.KaraMaar@health.wa.gov.au

Phone: 6392 1700 | Fax: 6392 1799

southmetropolitan.health.wa.gov.au

Dear Doctor,

Thank you for reading this information because you or another service has referred, or are considering referring, a patient under your care to Kara Maar.

About Kara Maar

Kara Maar, the SMHS Specialist Community Eating Disorder Service (SCEDS), provides multidisciplinary specialist assessment (including Consultant Psychiatry) and treatment for individuals aged 16 and over with signs and symptoms that may indicate an eating disorder, delivering evidence-based care at the right time and in the right location.

Kara Maar provides specific eating disorder services to consumers under a shared care model with referring GPs, and with other community mental health teams where appropriate.

Referring to Kara Maar

Eligibility criteria

For referral to Kara Maar, consumers must be:

- Aged 16 years and older,
- Living in South Metropolitan Health Service or WACHS-Link regional areas (Southern Wheatbelt, Goldfields, South-West, and Great Southern regional areas), and
- Show signs and symptoms that may indicate an eating disorder.

How to refer patients to Kara Maar

Referrals can be sent to SMHS.KaraMaar.Triage@health.wa.gov.au or via fax, 6392 1799, ensuring all required information is included:

- Referral Form,
- Physical Examination Form,
- GP Medical Monitoring Form,
- ECG (<7 days ago), **AND**
- Bloods
 - (Amylase, B12/Folate, FBC, Iron Studies, Prolactin, TFTs, U/E, LFT, calcium, Mg, Phosphate, LH/FSH, Estrogen, Testosterone, SHBG).

Contact the Kara Maar Triage for all referral enquiries on **08 6392 1700** between 0830 and 1600, Monday to Friday.

Please refer to [Appendix 1: Escalation Chart](#) for consumers requiring urgent support.

Role of referring GPs

GPs are requested to provide ongoing medical care to their patient. This typically involves **weekly to fortnightly** appointments and should include the following:

- Weekly/fortnightly **medical monitoring form** (see end of document) to be emailed to Kara Maar following each visit
- Completion of **physical examination form** (one-off requirement at referral), depending on age (see end of document)
- Consideration of the need for escalation of the patient's physical and mental health care needs according to WAEDOCS criteria and mental health risk (see **Appendix 1: Escalation Chart**). <https://ceed.org.au/wp-content/uploads/2020/04/Medical-Monitoring-in-Eating-Disorders-Summary-Chart.pdf>

GPs play an essential role in prevention, identification, diagnosis, and the medical management of eating disorders.

As a GP you can:

- Recognise / follow-up on warning signs of eating disorders
- Proactively screen at-risk groups
- Assess, diagnose, and medically manage eating disorder presentations
- Refer to eating disorder specific mental health treatment (including NGOs, private and public health) if necessary, as well as dietitians/other health professionals if needed
- Prevent eating disorders through early intervention and patient education.

On the following pages we have included various resources to support you in managing patients with eating disorders. Refer to [Appendix 4](#) for a list of GP training opportunities.

Important considerations before making a referral to Kara Maar

- Kara Maar is not an acute service and patients at immediate risk due to physical instability or acute severe psychiatric symptoms should be referred to other services as part of their initial management (refer to [Appendix 1: Escalation Chart](#) and [Appendix 2: WAEDOCS criteria](#)).
- Please consider the patient's and their family's/support person's preferences, current service providers involved, and other service providers for eating disorders (refer to [Appendix 3](#)) as part of your decision-making process.
- We encourage GPs to complete a Medicare Eating Disorder Treatment and Management Plan which enables access to Medicare-based private services in the community.
- The Kara Maar service is inclusive to family and support people, so please ensure the support person/s is included in the referral process.

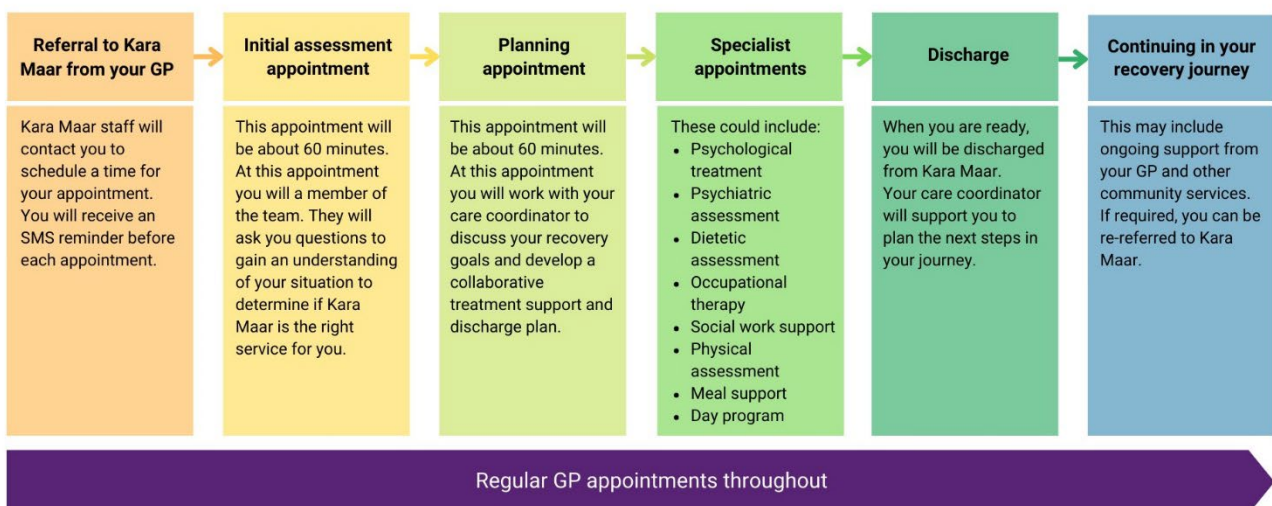
Kara Maar waitlist

- If there is no capacity for immediate care coordinator allocation, the patient is placed on a waitlist
- Waitlisted patients are NOT considered active with the service and therefore are not under the clinical governance of Kara Maar
- Kara Maar provides information and educational resources to patients and their supports and will contact the patient regularly while on the waitlist
- Ongoing GP involvement and updates to Kara Maar from the GP regarding physical examination findings is important to inform waitlist priority
- Once there is capacity for care coordinator allocation, contact will be established to book in an initial assessment.

Patient Treatment Journey



Treatment Journey



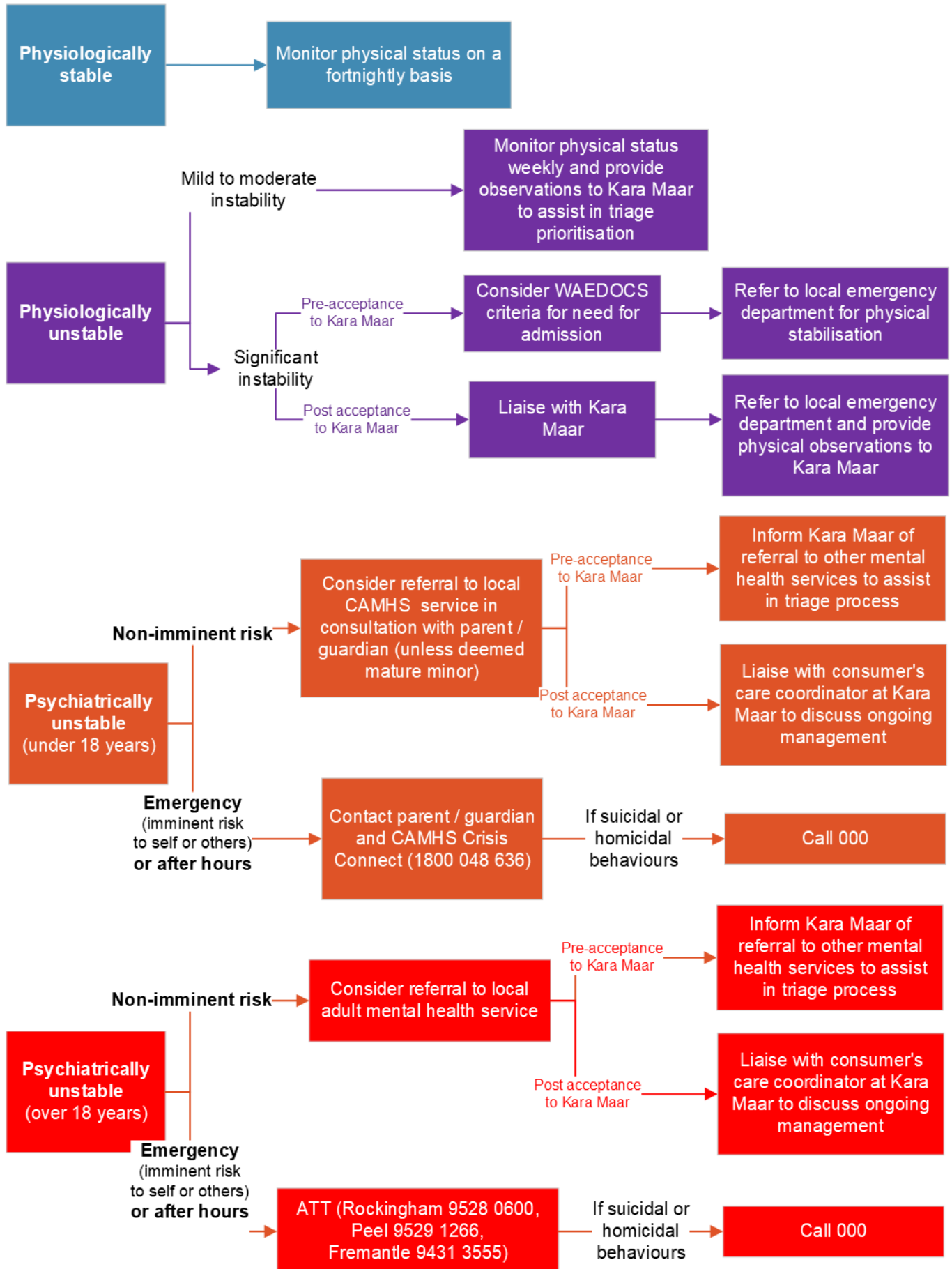
Crisis Contacts

In an emergency or crisis please dial 000 (triple zero).

Mental Health Emergency Response Line (MHERL)	Perth Metro Area 1300 555 788 Peel Region 1800 676 822 RuralLink WA 1800 552 002
Lifeline WA	131 114
CAMHS Crisis Connect (up to age 18)	1800 048 636
Assessment and Treatment Team (ATT) (over age 18)	Peel ATT, 8:30am to 10:00pm 9531 8080 Rockingham ATT, 8:30am to 10:00pm 9528 0600 Fremantle ATT, 8:00am to 8:00pm 9431 3555

[Find more mental health emergency service providers on the Healthy WA website.](#)

Appendix 1: Escalation Chart - management options for patients at increased mental or physical health risk



Appendix 2: Indicators for Admission – WAEDOCS

Criteria below are from the [WA Eating Disorders Outreach and Consultation Service \(WAEDOCS\)](#), adapted from the RANZCP (2014) and NSW (2014) Guidelines (4,5).

Note: RANZCP guidelines specify criteria for settings of care. WAEDOCS has decided to identify these indicators as general criteria for admission, given the potential for inaccuracy of weight at initial admission, risk of clinical deterioration on refeeding and the variability of medical support to mental health settings across WA. Patients who are not as unwell as indicated here may still require admission. If in doubt, consider liaison with WAEDOCS regarding appropriate setting of care.

If a consumer meets any of the following criteria, consider need for admission via an emergency department:

Rapid weight loss, low weight	Loss of >1 kg/week over several weeks OR Grossly inadequate nutritional intake (2 days OR BMI < 14kg/m ² (for ages 16-18: admit if >75%-85% ideal body weight, i.e., approximately 16kg/m ² for a 16 year old)
Purging	Daily (uncontrolled; sufficient to cause distress and/or medical instability)
Blood pressure	< 90mmHg systolic or postural blood pressure >10 mmHg drop (lying to standing)
Heart rate	=<40bpm (adolescents <50bpm) or >120bpm or postural tachycardia >20bpm (increase in >20bpm from lying to standing)
ECG	Any arrhythmia including QTc prolongation, nonspecific ST or T-wave changes including inversion or biphasic waves
Blood sugar	Below normal range / < 3.5mmol/L
Sodium	<130mmol/L
Potassium	Below normal range*
Magnesium	Below normal range*
Phosphate	Below normal range*
Albumin	Below normal range*
Liver enzymes	Mildly elevated
Neutrophils	<1.5 x 10 ⁹ /L
Temperature	<35.5C or cold/blue extremities
Psychiatric concerns	Significant psychiatric risk such as deliberate self-harm or suicidal ideation. Moderate-high agitation and/or distress.

* Clinicians should refer to their individual organisation's reference values

Appendix 3: Eating Disorder Services and Resources

The table below includes services, support, and resources for and supports, as well as online resources and information for GPs.

Around the Dinner Table Forum	<ul style="list-style-type: none"> Support for carers 	www.feast-ed.org/forum
Beyond Blue	<ul style="list-style-type: none"> Suicide prevention information and support 	www.beyondblue.org.au
Black Swan Health	<ul style="list-style-type: none"> Treatment Resources 	www.blackswanhealth.com.au/health-wellness/eating-disorder-treatment
Butterfly Foundation	<ul style="list-style-type: none"> Helpline Referral database Support groups 2-day course for carers 	1800 33 4673 www.butterfly.org.au
Carer Gateway	<ul style="list-style-type: none"> Support Resources Counselling 	1800 422 737 www.carergateway.gov.au
Carers WA	<ul style="list-style-type: none"> Support groups Resources Counselling 	1300 277 377 www.carerswa.asn.au
Centre for Clinical Intervention	<ul style="list-style-type: none"> Outpatient treatment Workbooks and information sheets 	www.cci.health.wa.gov.au/Treatment/Eating-Disorders-Program www.cci.health.wa.gov.au/Resources/Looking-After-Yourself/Disordered-Eating
Consumers of Mental Health WA (COMHWA)	<ul style="list-style-type: none"> Service navigation support helpline (Peer Pathways project) 	9477 2809 https://comhwa.org.au/programs/peer-pathways
Eating Disorders Families Australia	<ul style="list-style-type: none"> Support groups and forum Education seminars 	https://edfa.org.au
Eating Disorders Training Australia	<ul style="list-style-type: none"> Resources Workshops 	www.eatingdisorderstrainingaustralia.com.au
Eva Musby	<ul style="list-style-type: none"> Family-based treatment Online workshops Resources 	www.anorexiafamily.com.au
Feed Your Instinct	<ul style="list-style-type: none"> Resources 	www.feedyourinstinct.com.au
Headspace	<ul style="list-style-type: none"> Counselling (online, phone, face-to-face) for ages 12-25 	www.headspace.org.au
INSIDEOUT	<ul style="list-style-type: none"> Support Resources Service database 	www.insideoutinstitute.org.au
Luma	<ul style="list-style-type: none"> Body Esteem Program (in person and online groups available) Support person workshops Dietitian service 	6330 5400 https://luma.org.au/services/eating-disorders/ (previously called Women's Health & Family Services)

National Eating Disorders Collaboration (NEDC)	<ul style="list-style-type: none"> Resources Service locator 	www.nedc.com.au
Peel Mental Health Service Directory	<ul style="list-style-type: none"> Service directory (Peel) 	https://www.mycommunitydirectory.com.au/Download/File?token=3c119762-2e10-4af3-b876-604b86045395
The Royal Australian College of General Practitioners (RACGP)	<ul style="list-style-type: none"> DSM-5 criteria for Eating Disorder Diagnosis 	https://gplearning.racgp.org.au/Content/EDV/Eating_disorders_quick_guide.pdf
Recovery Record	<ul style="list-style-type: none"> Self-monitoring app 	Download on the App Store or Google Play
Swan Centre	<ul style="list-style-type: none"> Individual and group therapy Resources 	www.swancentre.com.au
Youth Focus	<ul style="list-style-type: none"> Counselling Group therapy Support Resources 	6266 4333 Email hello@youthfocus.com.au

Appendix 4: Training Opportunities and Education for GPs

WA Eating Disorders Outreach and Consultation Service (WAEDOCS)	<ul style="list-style-type: none"> Resources Various workshops (1 day each) 	www.nmhs.health.wa.gov.au/hospitals-and-services/mental-health/specialties/eating
Australia and New Zealand Academy for Eating Disorders (ANZAED)	<ul style="list-style-type: none"> Various webinars Credentialing 	www.anzaed.org.au/webinars-2-2/ https://connected.anzaed.org.au/
Centre for Clinical Intervention	Resources for clinicians	www.cci.health.wa.gov.au/Resources/For-Clinicians/Eating-Disorders
Eating Disorders Training Australia	Various workshops	www.eatingdisorderstrainingaustralia.com.au/workshops-%26-supervision
General Practice Mental Health Standards Collaboration (GPMHSC)	Sets the standards for and accredits education and training <ul style="list-style-type: none"> Training options Resources 	www.gpmhsc.org.au https://www.gpmhsc.org.au/resourcehub
National Eating Disorders Collaboration (NEDC)	<ul style="list-style-type: none"> Self-paced online course (4 hours) Resources 	www.nedc.com.au/professional-development/elearning/



FAMILY NAME

MRN

GIVEN NAMES

SEX ☐ MALE ☐ FEMALE

D.O.B. ____/____/____

M.O.

Service _____

ADDRESS

LOCATION

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

To be completed by a medical practitioner within 12 hours of admission. If a physical examination cannot be completed within 12 hours, the reason(s) must be clearly documented below & followed up with the treating team at reasonable intervals until the examination is completed.

Date: _____ Time: _____ Location: _____ People present: _____

Did the patient give consent to a physical examination? ☐ Yes ☐ No

Comments: _____

SYSTEM REVIEW (e.g. relevant positive or negative history or symptoms)

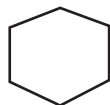
ORAL HEALTH (Consider whether an oral health check is required)

CARDIOVASCULAR (HS, JVP, Oedema, Veins, QT/QTc, ECG)

RESPIRATORY (Signs of Resp Distress, Ent, Sputum)



GASTROINTESTINAL (Jaundice/icterus, Bladder/bowel habit issues, Concern of GI bleed)



GENITOURINARY (Dysuria, Polyuria, Haematuria)

NEUROLOGICAL/MUSCULOSKELETAL

Pupils

Cranial nerves

Cerebellar signs

Extra pyramidal signs?

Medical Practitioner name:

Signature:

Designation:

Date:

Qualifications:

06/2019



FAMILY NAME

MRN

GIVEN NAMES

SEX ☐ MALE ☐ FEMALE

D.O.B. ____ / ____ / ____ M.O.

ADDRESS

LOCATION

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

Service _____

Mental Health
PHYSICAL
EXAMINATION

NEUROLOGICAL/MUSCULOSKELETAL (continued)

	Right	Left	Gait
Tone Upper Lower			
Power /5 Upper Lower			Is the Abnormal Involuntary Movement Scale (AIMS) test required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reflexes Triceps Biceps Patellar Ankle Plantar			MUSCULOSKELETAL
Coordination Upper Lower			Other comments
Sensation Upper Lower			

Endocrine (Include heat/cold intolerance, diabetes)

General Appearance and Observations (e.g. major distinguishing features or injuries, use of aids - walking frame)

Pulse		Height (m)	
BP	Lying	Weight (kgs)	
Temp		BMI (kgs/m ²)	
Resp		BGL (mmol/L)	
O ₂ Sats			
GCS ____ /15 (Eyes 1- 4, Voice 1-5, Motor 1-6)			
Urinalysis			
Urinary Drug Screen			

SUMMARY OF FINDINGS

Medical Practitioner name:

Signature:

Designation:

Date:

Qualifications:

Physical Examination completion time:

DO NOT WRITE IN MARGIN



FAMILY NAME

MRN

GIVEN NAMES

SEX ☐ MALE ☐ FEMALE

Service: _____

D.O.B. ____/____/____

M.O.

ADDRESS

Child & Adolescent Mental Health Service

PHYSICAL EXAMINATION

LOCATION

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

To be completed by a medical practitioner within 12 hours of admission.

Date:

Time:

Location:

People present:

GENERAL APPEARANCE AND OBSERVATIONS (e.g. major distinguishing features, self harm, injuries (inc. pressure injuries), use of aids. Use diagram if needed)

Height:

Weight (kg):

BMI (kg/m²):

Pulse rate:

Blood pressure:

Staff Name:

Signature:

Designation:

Date:

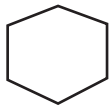
SYSTEM REVIEW (e.g. relevant positive or negative symptoms)

CARDIOVASCULAR

RESPIRATORY



GASTROINTESTINAL



NEUROLOGICAL

 (include the following, if indicated)

Consciousness

Nystagmus

Pupils

Cranial Nerves

Fundoscopy

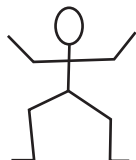
Head Circumference

Power

Sensation

Tone

Reflexes



Gait

Examining Medical Practitioner:

Signature:

Designation:

Date:

CAMHS PHYSICAL HEALTH ASSESSMENT



FAMILY NAME

MRN

GIVEN NAMES

SEX ☐ MALE ☐ FEMALE

SERVICE _____

D.O.B. ____ / ____ / ____

M.O.

ADDRESS

Child & Adolescent Mental Health Service

PHYSICAL EXAMINATION

LOCATION

COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE

RESULTS OF EXAMINATION

INVESTIGATIONS ORDERED

PHYSICAL HEALTH MANAGEMENT PLAN

Examining Medical Practitioner:

Signature:

Designation:

Date:



Government of **Western Australia**
South Metropolitan Health Service



Kara Maar
Specialist Community Eating Disorders Service

GP MEDICAL MONITORING FORM

Email: SMHS.KaraMaar@health.wa.gov.au

Phone: 6392 1700

To be completed at each GP visit – GP to have scanned and emailed to Kara Maar
Frequency of monitoring should be weekly or fortnightly depending on physical stability

Date		UMRN	
Name		DOB	

PARAMETERS FOR MONITORING

Weight (kg)		Height (cm)	
BMI (kg/m2)		Body temperature	
Standing BP		Standing HR	
Lying BP		Lying HR	

Other significant history and examination findings
e.g. current oral intake difficulties, bowel function, menstrual issues, respiratory rate, hydration status etc.

Management undertaken

Please attach bloods and ECG reports

Refer to CEED Medical Monitoring in Eating Disorders Summary Chart for indications for medical admission

GP signature or stamp