

Continuing Professional Development Program

Patient record audit tool: Bulimia Nervosa in adults



The Royal Australian & New Zealand College of Psychiatrists



The RANZCP clinical practice guidelines for the treatment of eating disorders are available at www.ranzcp.org/guidelines

Audit Number (e.g. 1 of 5)	/	Date	
Management of adults with bulimia nervosa			
On initial assessment did you perform or liaise with the patient's General Practitioner to ensure detailed initial physical examinations are completed? (e.g. weight, height, pulse rate, blood pressure, calculation of BMI, serum biochemistry, random glucose, ECG for people with purging behaviours and/or significant weight changes etc. as required)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Did you perform or liaise with the patients GP to ensure detailed physical health review occurred at least annually?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Did you offer an individual psychological therapy as a first-line treatment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If yes, was this an individual eating-disorder focused, therapist led cognitive behavioural therapy, CBT-E?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If yes to CBT-E, were four stages completed over a 20 week period?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If no to CBT-E, was another form of CBT offered?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Was a pharmacological treatment used for this patient's eating disorder?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If yes, was it as an adjunct to psychological therapy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If a pharmacological treatment was undertaken, was a high dose fluoxetine or other selective serotonin reuptake inhibitors chosen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If your management differed from guideline recommendations: <ul style="list-style-type: none"> - Why? - Were these reasons clearly documented in the clinical notes? <i>Please continue overleaf if required.</i>			
Areas for improvement			
Plan for implementation of areas for improvement			
Comments / Recommendations			

Additional notes if required

The development of this audit tool is an iterative process and the RANZCP Committee for Evidence-Based Practice welcomes feedback on any aspect of this tool via policy@ranzcp.org

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