


OhioHealth CIN Resources

Morbid Obesity Resources May 2023

Medical and Surgical Weight Management

OhioHealth Medical and Surgical Weight Loss Services

At OhioHealth, our weight management program offers medical and surgical options to help you lose weight effectively and safely. We take a holistic approach to weight loss, giving you the support you need before, during and after your treatment to help you maintain a healthy weight for life.



Medical (Non-Surgical) Program

Our medically supervised program is designed for significant weight loss without surgery.

[LEARN MORE](#)



Surgical Program

Our surgical program uses advanced, minimally invasive techniques to achieve sustainable weight loss.

[LEARN MORE](#)

www.OhioHealth.com/Services/Weight-Management

OHIOHEALTH
Clinically Integrated
NETWORK

CIN Independent Practice – Medical Weight Management (Specialty)

Diabetes and Endocrinology of Central Ohio

7281 Sawmill Rd Ste 100
Dublin, OH 43016

[Get Directions](#)

P: (614) 764.0707 | F: (614) 764.1707

Pro Health Services, LLC

2975 Donnylane Blvd
Columbus, OH 43235

[Get Directions](#)

P: (614) 442.2600 | F: (614) 442.1600

Central Ohio Nutrition Center, Inc.

648 Taylor Rd
Gahanna, OH 43230

[Get Directions](#)

P: (614) 864.7225 | F: (614) 626.8335

Central Ohio Nutrition Center, Inc.

1904 Bethel Rd
Columbus, OH 43220

[Get Directions](#)

P: (614) 451.1910 | F: (614) 451.1960


Central Ohio Nutrition Center, Inc.

9039 Antares Ave Ste C
Columbus, OH 43240


[Get Directions](#)


P: (614) 847-6008 | F: (614) 847.6022


Additional CIN Practices Found at www.OhioHealthCIN.com Physician Search



Home

 CLINICIAN PORTAL

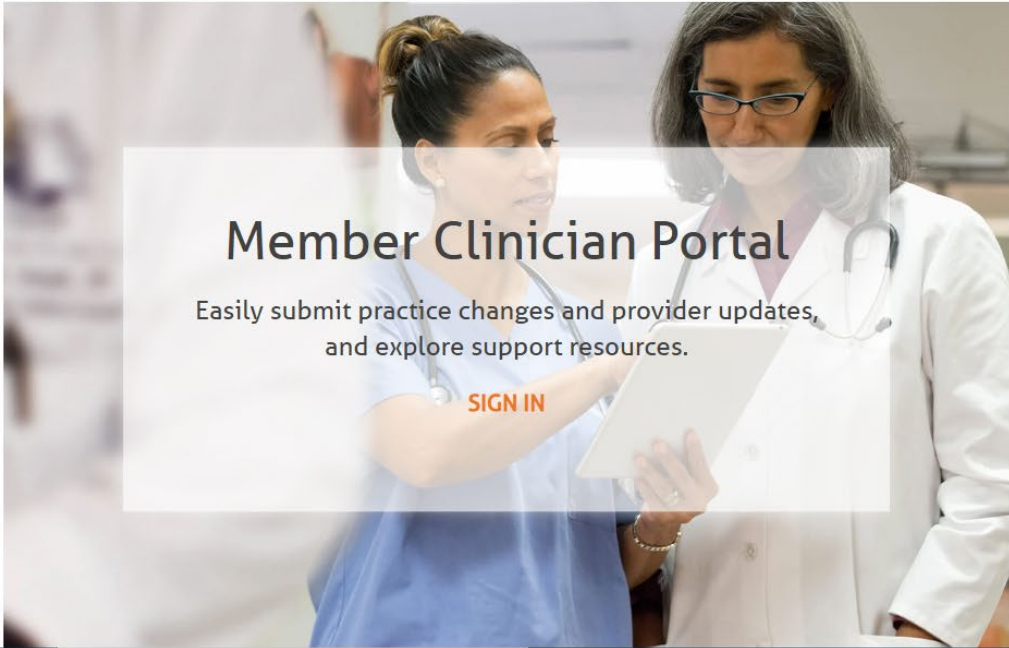
 (614) 566-0003

 CIN-Contact@OhioHealth.com

Member Benefits

Physician Search


Interest Form



Member Clinician Portal

Easily submit practice changes and provider updates, and explore support resources.

[SIGN IN](#)



Physician Search

Search for physicians in the network by availability, name, specialty, gender, address and distance.

[FIND PHYSICIANS](#)

Care Management Resources

Enterprise-Wide Care Management Team

NURSE CARE MANAGERS

Focus on high-risk patients in primary care offices, ED, urgent care and acute care settings. Develop care plans focused on disease management and proactive care to close care gaps

HEALTH COACHES

Solution focused goal setting to help patients establish and sustain healthy behaviors

UTILIZATION REVIEW NURSES

Payer based clinical reviews and claim based management to ensure patients receive the right care, in the right place

SOCIAL WORKERS

Psychosocial assessments target resource linkage and supports to help patients remain in their homes. Complex discharge planning to ensure safe transitions

COMMUNITY HEALTH WORKERS

Partner with patients to address social determinant of health needs using inclusive, community-based approach

REGISTERED DIETITIANS

Focus on patients with diabetes nutritional needs, educates, and assists with goal setting to reduce risks and improve overall. Care Management dietitians currently work with patients who have diabetes



Dietician Resources

- Available for CIN patients only (based on patient payor)
- Must be ordered by Primary Care
 - Available to patients with A1C>9
 - Can be placed in OH Link, or directly to care management through provider meetings or In Basket
 - N2V practices: bring list of patients on diabetes registry to providers and ask for updated A1C if not completed recently

Health Coaches

- Available for CIN patients only (based on patient payor)
- Must be ordered by Primary Care
 - Available to patients with A1C>9
 - Can be placed in OH Link, or directly to care management through provider meetings or In Basket

Pharmacy Resources

Pharmacy Resource

For full updated list, click on link

Weight Loss Medication Summary with Doses

Class	Medication	Dosing	Comments
GLP-1 receptor agonists	Liraglutide (diabetes, weight loss)	Initial: 0.6 mg once daily subQ for 1 week Increase by 0.6 mg at weekly intervals to a target 3 mg once daily	<ul style="list-style-type: none">• ADEs: nausea (decreases with continued use), diarrhea, vomiting, constipation, increased resting heart rate, risk for pancreatitis, injection site reactions• Boxed warning: risk of thyroid C-cell tumors• Contraindications: personal or family history of medullary thyroid carcinoma, multiple endocrine neoplasia type 2, pregnancy• Caution: severe renal impairment, hepatic impairment• Clinical pearls: patients who do not tolerate a dose increase, consider delaying dose• Duration: consider discontinuation if weight loss is <5% of baseline after 3 months
	Semaglutide (diabetes, weight loss)	Week 1-4: 0.25 mg subQ once weekly Week 5-8: 0.5 mg subQ once weekly Week 9-12: 1 mg subQ once weekly Week 13-16: 1.7 mg subQ once weekly Week 17+: 2.4 mg subQ once weekly	
Lipase inhibitor	Orlistat	Orlistat: 120 mg 3 times daily by mouth with each main meal containing fat, during or up to 1 hour after meal Orlistat (OTC): 60 mg 3 times daily with each main meal containing fat	<ul style="list-style-type: none">• ADEs: oily spotting, flatus with discharge, fecal urgency, abdominal pain, steatorrhea, risk of oxalate stone formation and nephropathy, rare hepatic failure, cholelithiasis, AKI, chronic decline in renal function• Contraindications: pregnancy, malabsorption syndromes, cholestasis• Clinical pearls: interference with fat-soluble vitamins (administer multivitamin at bedtime), cyclosporine, thyroid hormone, anti-epileptics
Medications	Phentermine-topiramate C-IV controlled substance	Initial: 3.75 mg/23 mg once daily by mouth for 14 days, then increase to 7.5 mg/46 mg once daily	<ul style="list-style-type: none">• ADEs: insomnia, dry mouth, paresthesia, dysgeusia• Contraindications: pregnancy, glaucoma, hyperthyroidism, MAOI use• REMS program due to teratogenicity: Patients of reproductive potential should take a pregnancy test initially and every month while using, and use effective contraception• Caution: cardiovascular disease• Duration: if at least 3% of baseline body weight loss has not been achieved at 12 weeks, gradually taper off OR escalate to 11.25 mg/69 mg once daily for 14 days, then to a max of 15 mg/92 mg once daily• If at least 5% of baseline body weight has not been lost after 12 weeks on max dose, gradually taper over ~1 week

Thank You

- If you are aware of additional resources in your region, please let us know and we will continue to update this resource list.
- Please email us at CIN@OhioHealth.com