

Health Improvement Profile

[HIP] – Female

Patient ID _____ Other information _____ Date of birth (age) _____
 Ethnic Classification _____ Weight _____ Height _____ Date _____

Parameter	Level	Green	Red	Recommended action for red group
BMI		18.50-24.99 ¹	< 18.50 ¹ ≥ 25.00* ¹	<input type="checkbox"/> BMI < 18.50 – refer for further investigations <input type="checkbox"/> BMI ≥ 25.00 – advice and support on diet and exercise, referral to local weight/exercise management programme, consider medication review ²
Waist Circumference		< 80cm ^{†3}	≥80cm ^{†3}	<input type="checkbox"/> Advice and support on diet and exercise, referral to local weight/exercise management programme, consider medication review ²
Pulse		60 – 100bpm ⁴	<60 bpm/> 100bpm	<input type="checkbox"/> ECG should be performed ⁴
Blood Pressure		<140/90 ⁵	≥140/90 ⁵	<input type="checkbox"/> Advice on weight loss (if overweight) and increased activity, reduction in alcohol intake, improved diet and smoking cessation ⁵ <input type="checkbox"/> Refer to GP for further investigations ⁵
Temperature		36-37.5°C ⁶	<36 °C ⁷ >37.5°C ⁷	<input type="checkbox"/> Abnormally high and accompanied by fluctuating BP and/or dystonia consider neuroleptic malignant syndrome <input type="checkbox"/> Report to RMO, refer for further investigations ⁶
Liver function (in last 3 months)		≤ 3 months	> 3 months	<input type="checkbox"/> Ensure that up-to-date LFTs are conducted <input type="checkbox"/> Abnormal – refer for further investigations ⁸ <input type="checkbox"/> Slightly abnormal (> 2 times ULN) – repeat tests in 6 months' time, check alcohol intake, diabetes control and weight loss ⁸ <input type="checkbox"/> Consider medication review ⁹
Lipid Levels⁹		TC < 5.1 mmol/L LDL – C < 4.1 mmol/L HDL – C > 1.3 mmol/L TG < 2.2 mmol/L ²	TC ≥ 6.2 mmol/L LDL – C ≥ 4.1 mmol/L HDL – C < 1.3 mmol/L or TG ≥ 2.2 mmol/L ²	<input type="checkbox"/> Refer to GP for appropriate treatment ²
Glucose		< 6.0 mmol/L ^{†5} <48 mmol/mol (between 48-58 if has diabetes) ¹¹	≥ 6.0 mmol/L ^{†5} ≥ 48 mmol/mol (between 48-58 if has diabetes) ¹¹	<input type="checkbox"/> Check for symptoms of diabetes ² <input type="checkbox"/> Test for urine ketones if symptoms are present ² <input type="checkbox"/> Refer for further investigations and treatment ²
Cervical smear		≤ 3 years (aged 25-64) ≤ 5 years (aged 50-64) ¹²	> 3 years (aged 25-64) ¹² > 5 years (aged 50-64) ¹²	<input type="checkbox"/> Refer to GP or specialist practice nurse ¹¹
Teeth		≤ 12 months ¹³	≥ 2 years ¹³	<input type="checkbox"/> Encourage regular visits to community dentist ¹³
Eyes		< 2 years ¹⁴	> 2 years ¹⁴	<input type="checkbox"/> Prompt to self refer/refer to optometrist if no eye exam in last 2 years
Feet		Self-check occasionally	Never check	<input type="checkbox"/> Advice on keeping feet healthy ¹⁵ <input type="checkbox"/> Elderly patients/those with diabetes – refer to chiropodist ¹⁵ <input type="checkbox"/> If any presenting signs/symptoms – refer to chiropodist
Breast		Self-check monthly / routine breast screenings	Never check	<input type="checkbox"/> Advice on self-examination ¹⁶ <input type="checkbox"/> Patients 50-70 years refer for breast screening (repeat every 3 years) ¹⁶ <input type="checkbox"/> Breast abnormalities – refer for further investigations ¹⁷
Menstrual cycle		Regular 28 day ovulation cycle (range:24-35 days) ¹⁸	Irregular/Absent/Reduced/Excessive ¹⁹	<input type="checkbox"/> Refer for further investigations
Urine		1-2 litres/day ²⁰	< 1litre/day ²⁰ > 2litres/day ²¹	<input type="checkbox"/> Assess for signs of dehydration ²⁰ <input type="checkbox"/> Assess for symptoms of polyuria ²¹ <input type="checkbox"/> Check for any urine frequency/incontinence issues <input type="checkbox"/> Encourage fluids and implement fluid balance chart to evaluate
Bowels		No constipation / diarrhoea No excessive urgency/ straining/need for laxatives ²²	Diarrhoea, constipation, excessive urgency, straining, laxative use ²²	<input type="checkbox"/> Encourage fluids <input type="checkbox"/> Check for gastrointestinal symptoms <input type="checkbox"/> Check for any bowel urgency/incontinence issues <input type="checkbox"/> Refer for further investigations
Sleep		7 – 8 hours ²³	< 3 hours ²³ > 8 hours ²³	<input type="checkbox"/> Clarify sleep problem <input type="checkbox"/> Provide education on good sleep hygiene and benefits of a sleep diary <input type="checkbox"/> Consider medication review <input type="checkbox"/> Refer if relapse is suspected (refer to Risk and Relapse Plan and take action accordingly)
Smoking status		Non smoker	Passive smoker / smoker	<input type="checkbox"/> Advice that all smoking is associated with significant health risks ²⁴ <input type="checkbox"/> Refer to NHS Stop Smoking Services ^{24††}
Exercise		30 minutes a day	None	<input type="checkbox"/> Recommend 30 minutes of activity 5 days a week ²⁵ <input type="checkbox"/> Follow up on a 3-6 monthly period ²⁵ <input type="checkbox"/> Refer to exercise referral scheme if required ²⁵
Alcohol intake		2-3 units/day ^{†‡26}	>3 units/day ²⁶	<input type="checkbox"/> Offer recommendations on sensible daily alcohol intake ²⁶ (guide to alcohol units ²⁷)
Diet: literacy 5 a day, fat, salt, carbohydrate intake⁸		5 fruit/veg a day ^{§§28} ≤ 70g***a day ²⁹ ≤6g salt a day ³⁰ ≤230g a day ²⁹	≤ 2 fruit/veg a day ²⁸ ≥ 70g fat a day ²⁹ ≥6g salt a day ³⁰ ≥230g a day ²⁹	<input type="checkbox"/> Offer recommendations on reduction of health risks with healthy eating ²⁸ <input type="checkbox"/> Agree and implement a plan with the patient (and carers if appropriate)
Diet: function		Able to cook and shop Access to cooking facilities	Unable to cook or shop No access to cooking facilities	<input type="checkbox"/> Agree and implement a plan with the patient (and carers if appropriate) <input type="checkbox"/> Address potential barriers to accessing and eating fruit/vegetables ²⁸ <input type="checkbox"/> May include referral to other members of the MDT e.g. occupational therapist for meal planning, shopping and cooking skills
Fluid intake		1-2 litres/day ³¹	< 1litre/day ³¹ > 3 litres/day ³²	<input type="checkbox"/> < 1 litre/day – check for signs of dehydration ³¹ <input type="checkbox"/> Offer advice on increasing fluid intake ³¹ <input type="checkbox"/> > 3 litres/day – check for signs of polydipsia ³² <input type="checkbox"/> Implement a fluid balance chart <input type="checkbox"/> Refer for electrolyte assessment if initial intervention unsuccessful
Caffeine intake⁹		200-500 mg/day ^{27†††}	≥ 600mg/day ³³	<input type="checkbox"/> Check for signs of caffeineism or caffeine toxicity (> 1000 mg/day) ³³ <input type="checkbox"/> Offer advice to gradually reduce caffeine intake and limit withdrawal effects ³³
Cannabis use		Never	Occasional/Regular	<input type="checkbox"/> Implement health behaviour interventions and evaluate <input type="checkbox"/> Work with support of dual diagnosis worker/service <input type="checkbox"/> Systemically evaluate action e.g. using a Drug Use Scale
Safe sex		Always	Inconsistently/Never	<input type="checkbox"/> Identify if patient is in high risk group for STIs ³⁴ <input type="checkbox"/> Identify if patient is engaging in behaviours that increase risk of STIs ³⁴ <input type="checkbox"/> Provide sexual health advice <input type="checkbox"/> If STI suspected refer to GP or sexual health practice nurse ³⁴
Sexual satisfaction		Satisfied	Dissatisfied	<input type="checkbox"/> Perform systemic assessment (e.g. Arizona Sexual Experience Scale) of the health parameter <input type="checkbox"/> Refer for gynaecological investigations/laboratory assessments ³⁵

¹Where results fall between red and green ranges, increase frequency of monitoring and review. ² Overweight=BMI>23.00 in individuals of South Asian origin. [†] BMI for Europids – refer to ethnic-specific values where required. [§]†††Oral glucose tolerance test. Fasting plasma glucose. Ø glycosylated haemoglobin. ‡Random venous plasma glucose. †††Warning – careful planning/medication review is required if smoking cessation planned. MHN to identify this need.³³††Pregnant women should avoid drinking alcohol, if they do choose to drink, they should not drink more than 1-2 units once or twice a week. ^{§§}Five portions of a variety of fruit and vegetables. ^{***}A portion of food high in saturated fat or trans fat (e.g. meat products, hard cheese, butter/lard, pastry, cakes / biscuits, cream). Total fat considered high if more than 20g fat per 100g. ^{†††}Average caffeine content – 1 cup of coffee = 75-100mg; 1 cup of tea = 50mg; 1 can of cola = 40mg; 1 energy drink = 90mg; bar of plain chocolate = 50mg; bar of milk chocolate = 25mg. ³⁴ BMI – body mass index, ECG – electrocardiogram, HDL-C – high density lipoprotein – cholesterol, LDL-C – low density lipoprotein – cholesterol, STI – sexually transmitted infection, TC – total cholesterol, TG triglycerides, ULN – upper limit of normal.

Other blood tests to consider: Prolactin, Urea and electrolytes and calcium, Thyroid function test, Full blood count, B12 and folate, Lithium levels, Vitamin D

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