Weight Management Program

By your side for fitter families.

“Get Up & Go!” is a free, ten-week weight management program for children and their parents, in partnership with the YMCA of Dallas, which includes locations in Dallas and Collin counties. This program increases families’ knowledge and skills to improve healthy behaviors, and is designed to create awareness and understanding of how lifestyle choices affect health.

Our Services

• Families will meet weekly for 1 ½ hours
• Classes are offered in English and Spanish for ages 6-14
• Each class is facilitated by YMCA employees and features nutrition education, physical activity and goal setting
• Parents are encouraged to bring the entire family to avoid a child feeling singled out from his/her siblings
• Healthy snacks are served during each class to introduce children to new nutritious foods

Referral Criteria

• Requires a referral signed by a primary care physician, a physician’s assistant or nurse practitioner under the supervision of a primary care physician, or a specialist with knowledge of child’s overall health
• BMI over the 85th percentile with no comorbidities or with well managed comorbidities
• Child must be accompanied by a parent/guardian

How to Enroll

• Physicians must complete the referral form and fax it to 214-456-0194
• A welcome letter will be mailed to the family once the referral has been processed, then a member of the Weight Management Team will contact the family for enrollment into the program once a class is available
• Wait times may vary due to the number of referrals per location
• For additional questions, please call 214-456-6312 or email getup&go@childrens.com
GET UP & GO WEIGHT MANAGEMENT PROVIDER REFERRAL FORM
PLEASE COMPLETE THIS FORM AND FAX TO: 214-456-0194

CHILD’S NAME PROVIDER NAME AND CLINIC NAME
DATE OF BIRTH PROVIDER PHONE
CHILD’S STREET ADDRESS PROVIDER EMAIL
ADDRESS LINE 2 PROVIDER FAX
CITY/STATE/ZIP PARENT/GUARDIAN NAME
PARENT/GUARDIAN PHONE NUMBER RELATIONSHIP TO CHILD
GROUP NUMBER, MEMBER ID

Select desired program below. (Select both if needed)

☐ Weight Management ☐ Type 2 Diabetes Prevention

Select this program if child with developmental differences meets enrollment criteria below:

☐ Weight Management Program for Children with Developmental Differences (CWDD)

Enrollment Criteria for CWDD:

• Child must have the ability to communicate basic wants/needs verbally
• Child must be comfortable participating in a group setting with peers
• Child must be able to participate in low impact physical activity
• Child must be accompanied by at least one parent or guardian
• Child must be referred by a healthcare provider or a specialist familiar with the child’s overall health

By signing this form, I understand that physical activity and exercise are a part of the Get and Go Weight Management programs. A physical examination has been completed and the patient listed has been cleared to participate.

REFERRAL DISCUSSED WITH PARENT/GUARDIAN?
☐ Yes, referral was discussed and parent/guardian agreed. ☐ No, referral has not yet been discussed with parent/guardian.

REFERRING PROVIDER:
__________________________________________________________
PRINT SIGNATURE DATE

ADDITIONAL COMMENTS:
__________________________________________________________

PROGRAM CONTACT INFORMATION
Weight Management 214-456-6312
Weight Management for CWDD 214-456-2362
Weight Management for Bariatrics 214-456-1150
Diabetes Prevention Program – 214-456-2362

Applicable to all Programs

Gender ____________________________
Weight (lbs.) ______________________
Height (inches) _____________________
BMI Percentile _____________________
Existing Comorbidities ______________
______________________________

PLEASE FAX FORM TO: 214-456-0194