

A photograph of two women sitting on grey steps in front of a white door with a brass handle. The woman on the left has long dark hair and is wearing a black polka-dot top. The woman on the right has red hair, wears red-rimmed glasses and a black dress, and has her arm around the first woman's shoulder. They are both smiling. A large blue and lime green graphic shape is on the left side of the image.

ALL ABOUT EATING DISORDERS TREATMENT

Dear Parents, Family Members, and Friends,

Nearly 30 million people will develop an eating disorder in their lifetime, yet few will receive the treatment they need. These are complex illnesses that often occur alongside other mental health concerns and can lead to years of suffering for those impacted. Eating disorders can also become life-threatening and have the second highest mortality rate of all mental health conditions.

By reading this booklet, you are taking an important step toward recovery for yourself or your loved one. The treatment landscape may be unfamiliar to you, and we hope this information and our companion booklet *All About Eating Disorders* help guide you and answer any questions you may have.

Whether you are seeking treatment for yourself or supporting a loved one, we recognize that finding the right treatment for an eating disorder often takes courage and patience. It may take a few attempts to find the right fit for you or your family.

For additional information, please visit nationaleatingdisorders.org, where you will find trusted resources and stories from individuals, professionals, and families navigating recovery.

With hope,



Doreen S. Marshall, PhD
Chief Executive Officer
National Eating Disorders Association

Your generosity makes it possible for NEDA to provide free resources to those in need. Please support our work:
bit.ly/4IIZKJH



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LEARNING ABOUT TREATMENT

What to Expect from Treatment

Eating disorder care begins with an evaluation to provide a diagnosis and recommendations for treatment. Treating an eating disorder generally involves a combination of psychological and nutritional counseling, along with medical and psychiatric care and monitoring. Treatment recommendations will vary depending on the type of eating disorder a person is diagnosed with. To learn more about the types of eating disorders visit: nationaleatingdisorders.org/what-are-eating-disorders.

Generally, beginning treatment as soon as eating disorder symptoms are detected is more effective and supports a shorter treatment duration. While the recovery path can take time, it's important to remember that there is hope, as individuals with long-standing eating disorders can and do recover.

Although each eating disorder is unique, eating disorder treatment generally addresses the following factors in roughly this order:

1. **Correcting life-threatening medical and psychiatric symptoms**
2. **Interrupting eating disorder behaviors (binge eating, purging, food restriction, excessive exercise, etc.)**
3. **Restoring weight for those whose eating disorder behavior has resulted in weight loss or lack of progression of weight in growing children and adolescents**
4. **Establishing consistent, sustainable eating patterns with nutritional rehabilitation**
5. **Challenging unhelpful and unhealthy eating disorder and eating disorder-related thoughts and behaviors**
6. **Developing coping strategies that support recovery**
7. **Addressing ongoing medical and mental health issues**
8. **Establishing a plan to prevent relapse**

“While the recovery path can take time, it’s important to remember that there is hope, as individuals with long-standing eating disorders can and do recover.”



Types of Treatment

OUTPATIENT SERVICES (OP) are delivered by one or more of the following providers:

Therapists who provide mental health counseling

Psychiatrists who provide psychiatric evaluations and prescribe medications

Medical providers who perform medical evaluations and ongoing medical monitoring

Dietitians/Nutritionists who plan food and nutrition programs and promote positive eating habits

In order to receive outpatient services, an individual must be medically stable, not require daily medical monitoring, be psychiatrically stable, and able to apply skills learned in sessions at home to make progress in recovery and function in normal social, educational, or work situations.

Note: While eating disorder support groups are not a replacement for professional help, they can complement treatment by providing additional recovery support.

TREATMENT PROGRAMS

The programs below are a higher level of care than outpatient treatment:

Type of Program	Typical Admission Criteria*	Services Provided
Intensive Outpatient Speciality Eating Disorder Programs (IOP)	<ul style="list-style-type: none"> • Medically stable and does not require daily medical monitoring • Psychiatrically stable and able to function in typical social, educational, or work situations, and able to apply skills learned in treatment to continue to make progress in recovery 	Treatment typically involves group and individual therapy sessions, along with meal support, for a few hours several times a week.
Partial Hospital Speciality Eating Disorder Programs (PHP)	<ul style="list-style-type: none"> • Medically stable, but the eating disorder impairs functioning without immediate risk, and the patient needs frequent health assessments • Psychiatrically stable, but needs frequent assessment of mental well-being, is unable to function well in typical social, educational, or work situations, and engages in frequent eating disorder behaviors 	Treatment typically involves patients going to the facility for the entire day for treatment and daily meals prior to returning home at night.
Residential Treatment Centers (RTC)	<ul style="list-style-type: none"> • Medically stable and does not require acute medical intervention • Psychiatrically compromised • Symptoms of eating disorder have not responded to, or are too frequent, to be a candidate for partial hospital or outpatient treatment 	Treatment typically involves living at the facility and 24-hour care, however, the individual must be medically stable.
Inpatient Treatment (IP) or Hospitalization	<ul style="list-style-type: none"> • Medically compromised requiring daily monitoring often determined by: unstable vital signs, lab findings, and/or complications due to coexisting medical problems • Psychiatrically compromised as determined by rapidly worsening symptoms, demonstrating suicidality or safety risk, and is unable to participate in developing a viable safety plan 	Treatment typically involves living at the facility and receiving 24-hour medical and psychiatric monitoring in a hospital setting.

*Admissions criteria can vary so it is best to contact each treatment program about their specific policy.

For more information on types of treatment visit:

faynutrition.com/post/eating-disorder-treatment-types-of-therapy-options

Initial Diagnosis and Assessment Process

These steps are intended for use in a nonemergency situation. If the situation is a medical or psychiatric emergency and the person is at risk of suicide or is medically unstable, call 911 or go to the nearest emergency room.

The following assessments are recommended as the first steps toward diagnosis and will help determine the level of care needed. There is no single recommended order for completing these assessments. Rather, you can start with whichever professional has more eating disorder specific training and experience that is accessible to you. This is more likely to be a therapist, but look for someone with a CEDS—certified eating disorder specialist. Medical providers can have this designation too, but there are not as many available.

PATIENT ASSESSMENT

In order to diagnose an eating disorder and determine the best course of action, a clinician will need to ask the patient, and when possible, their loved ones the following types of questions:

- ✓ Patient history, including screening questions about eating patterns
- ✓ Determination of medical, nutritional, psychological, spiritual, and social functioning (if possible, an eating disorder expert should assess the mental health of your child)
- ✓ Attitudes towards food, eating, exercise, and appearance
- ✓ Family history of eating disorder or other psychiatric disorder, including alcohol and substance use disorders
- ✓ Personal and family history of medical illnesses
- ✓ Assessment of other mental health conditions, such as depression, anxiety, trauma, OCD, and/or ADHD



MEDICAL EXAM

Eating disorders are frequently accompanied by various medical issues that can result from malnourishment, over-exercise, binge eating, and/or purging. This makes an evaluation by a physician a necessary part of eating disorder treatment. A medical provider will typically evaluate the following:

- ✓ Physical examination including growth chart assessment for children and adolescents, cardiovascular and peripheral vascular function, lung exam, abdominal exam, neurologic exam, skin health, hair loss, and evidence of self-injurious behavior
- ✓ Measurement of body temperature and pulse
- ✓ Orthostatic blood pressure and pulse
- ✓ Weight status focused on changes in weight over time
- ✓ Laboratory and imaging tests (see below)
- ✓ Dental exam
- ✓ Establishment of diagnosis and recommendations for appropriate level of care

LABORATORY TESTING

A variety of laboratory tests and blood work may be needed to determine the correct eating disorder diagnosis and assess the appropriate level of care for an affected individual. The laboratory tests will evaluate the following types of factors:

- ✓ Blood sugar levels
- ✓ Electrolyte levels, to determine the presence and severity of dehydration, especially if someone is purging
- ✓ Liver and kidney functioning
- ✓ Urine analysis and toxicology, if indicated
- ✓ Electrocardiogram (ECG), which ensures the heart is beating properly

“Eating disorders are frequently accompanied by various medical issues that can result from malnourishment, over-exercise, binge eating, and/or purging.”

THE TESTS, IN MORE DETAIL

Complete Blood Count (CBC):

This analyzes the three main types of blood cells circulating in your blood (red blood cells, white blood cells, and platelets). It can detect anemia, immune cell dysfunction, and signs of infection.

Comprehensive Metabolic Profile (CMP):

The CMP measures a variety of factors related to overall health, including:

- BLOOD GLUCOSE
- ELECTROLYTES (SODIUM, POTASSIUM, AND CHLORIDE)
- CARBON DIOXIDE (BICARBONATE)
- BLOOD UREA NITROGEN (A MEASURE OF KIDNEY FUNCTION)
- CREATININE AND CREATININE CLEARANCE (A MEASURE OF KIDNEY FUNCTION)
- LIVER ENZYMES (TO MEASURE LIVER FUNCTION)
- ASPARTATE TRANSAMINASE (AST)
- ALKALINE PHOSPHATASE (ALP)
- ALANINE AMINOTRANSFERASE (ALT)
- TOTAL BILIRUBIN (TO MEASURE LIVER FUNCTION)
- SERUM MAGNESIUM AND PHOSPHATE
Both these chemicals play a role in regulating metabolism and heartbeat.
- ELECTROCARDIOGRAM
This test uses electrical signals from the heart to determine how well it's beating and if there are any arrhythmias.
- URINALYSIS
This can determine the presence of ketones (which are detected when the body doesn't have enough fuel) and the urine specific gravity, which can assess dehydration and fluid status.

You can share this list of eating disorder laboratory tests with your medical provider:

<https://www.nationaleatingdisorders.org/wp-content/uploads/2025/06/MedicalTests-1.pdf>

SPECIAL CIRCUMSTANCES

In situations where the diagnosis is uncertain, such as if there is a possibility there might be a brain tumor, gastrointestinal issue, or autoimmune problem, the following tests may be recommended:

- ✓ Erythrocyte sedimentation rate
- ✓ Radiographic studies (computed tomography or magnetic resonance imaging of the brain or upper/lower gastrointestinal system)
- ✓ For individuals with persistent malnourishment regardless of weight status, especially females who sustain amenorrhea, a work-up should include a Dual Energy X-ray Absorptiometry (DEXA) to assess bone mineral density
- ✓ Depending on clinical presentation, urine pregnancy, luteinizing and follicle stimulating hormone, testosterone, estrogen and progesterone, prolactin may be tested



Medical Emergency Symptoms

Eating disorders of all kinds often have significant medical complications.

The following are some signs that may indicate a serious problem requiring medical attention:

- ✓ Experiencing confused thinking or not making sense when speaking
- ✓ Slurred speech of unknown cause
- ✓ Experiencing delusions (false beliefs) or hallucinations (hearing or seeing things that aren't there)
- ✓ Experiencing suicidal ideation
- ✓ Feeling disoriented; not knowing what the day, location, or their name is
- ✓ Having blurred vision
- ✓ Experiencing dizziness, lightheadedness, or passing out
- ✓ Feeling too weak to walk or collapsing
- ✓ Loss of balance and coordination
- ✓ Tingling in the hands or feet
- ✓ Having a seizure
- ✓ Experiencing pain in the lower legs
- ✓ Swelling in the lower legs
- ✓ Having chest pain or trouble breathing
- ✓ Having an irregular heartbeat or very low heartbeat (less than 50 beats per minute), or very rapid heartbeat (greater than 100 beats per minute)
- ✓ Having cold or clammy skin indicating a low body temperature (less than 35 degrees Celsius/95 degrees Fahrenheit)
- ✓ Having severe abdominal pain
- ✓ Nausea with uncontrolled vomiting
- ✓ Observing blood in bowel movements, urine, or vomit
- ✓ Not having a bowel movement in 7 days
- ✓ Excessive thirst and excessive urination

While we cannot provide medical guidance, if your loved one is experiencing any of these symptoms, we recommend seeking a medical evaluation to determine if more immediate care is needed. It is important to inform the medical professional about these symptoms and note that they may be related to an eating disorder.

COMMUNICATING WITH PROVIDERS

Questions to Ask Treatment Providers

- | | |
|--|---|
| <input type="checkbox"/> What is your experience and how long have you been treating eating disorders? | <input type="checkbox"/> How will you work with other treatment providers, such as medical providers, who may need to provide care? |
| <input type="checkbox"/> What type of license do you have? What are your training credentials? Do you belong to any professional eating disorder organizations? | <input type="checkbox"/> Will you work with my workplace/school? How often do you communicate with them? |
| <input type="checkbox"/> How would you describe your treatment style? What psychotherapeutic approaches and tools do you use? | <input type="checkbox"/> Do you work with a psychiatric provider if medication seems indicated or do I find one on my own? |
| <input type="checkbox"/> What is your appointment availability? Do you offer evening or early morning appointments? How long does each counseling session last? How many will there be and how often? When is payment due? | <input type="checkbox"/> Which, if any, insurance plans do you participate in? Will you bill my carrier directly (if your visits are covered)? Do you deal directly with the insurer or do I need to do that? |
| <input type="checkbox"/> Do you stay up to date on the latest research and treatment recommendations for eating disorders? | <input type="checkbox"/> What is your fee structure if I don't have insurance coverage, or if I lose coverage during treatment? Do you have a sliding scale fee? |
| <input type="checkbox"/> Do you treat co-occurring mental health conditions such as depression or anxiety? | <input type="checkbox"/> How do you involve family members or friends? |
| <input type="checkbox"/> Do you require ongoing medical information (labs, PCP visit, EKG, etc.)? Will a medical evaluation be needed before treatment begins? | <input type="checkbox"/> Approximately how long will the treatment process take? When will we know it's time to stop treatment? |
| <input type="checkbox"/> What are the measurable criteria you use to assess how well treatment is working? Can you give me a few examples? Do you or your facility have a quality improvement program in place, or regularly assess the outcome of the treatment provided? | <input type="checkbox"/> What is your availability in an emergency? If you are not available, what are the alternatives? |



Questions to Ask when Seeking a Treatment Center

Deciding to seek specialized care at an eating disorder treatment center is a significant step in the recovery journey. As a parent or caregiver, navigating through the various options can feel overwhelming. To help you make an informed decision, consider these key areas and questions when evaluating treatment centers:

TREATMENT CENTER/ORGANIZATION

When exploring treatment center options, it's essential to understand the organization's mission, values, and overall approach to care. Ask about the intake and admissions processes, insurance coverage, payment expectations, and safety and security practices. Here are some example questions to help guide these discussions:

☐ Does your center accept my insurance and are you able to provide me with a good faith estimate?

☐ Does your center provide financial assistance?

☐ What levels of care does your center offer (inpatient, residential, PHP, IOP)? Can you provide me with details of each and how they differ?

☐ What is the admission criteria for your center?

☐ Will you talk with my insurance company before we arrive to determine eligibility for benefits?

☐ If I withdraw my child from treatment earlier than recommended, will this impact my coverage?

☐ When is payment due? Are you able to work with me on a payment plan?

TREATMENT APPROACHES AND PROVIDERS

There are several evidence-based treatment approaches for eating disorder care. It's important to ask which approach the center follows and whether it aligns with your loved one's needs. Since eating disorders are best managed by a multidisciplinary team, you'll also want to understand the roles and expertise of each team member. Reading the treatment center's mission, vision, and value statements on their website can provide you with insight into their treatment and care philosophy. Here are some key questions you can ask about the center's treatment model and providers:

- | | |
|---|---|
| <input type="checkbox"/> How do you observe or help facilitate observing our cultural practices? | <input type="checkbox"/> When is the treatment plan completed and when/how is this communicated to the parent and patient? |
| <input type="checkbox"/> What types of professionals participate on the care team? What are their credentials/licensure and role? | <input type="checkbox"/> How many hours of treatment are provided? Can you provide a 7-day week, detailed daily schedule? |
| <input type="checkbox"/> Which professional serves as team leader (or primary point of contact)? | <input type="checkbox"/> Will there be family sessions? |
| <input type="checkbox"/> What is the patient-staff ratio during groups and meals? | <input type="checkbox"/> What is your nutrition strategy and approach? |
| <input type="checkbox"/> What staff are available around the clock and which are on duty 24 hours? | <input type="checkbox"/> What is your criteria to determine discharge? How far in advance do you begin to plan for this and how is this communicated to parents and outpatient providers? |
| <input type="checkbox"/> What is the rate of turnover (staff resigning) and how is that communicated to parents and patients? | <input type="checkbox"/> What does follow up care look like? |
| <input type="checkbox"/> How soon is a full intake assessment completed and who is involved? | |

“It’s important to ask which approach the center follows and whether it aligns with your loved one’s needs.”

FAMILY AND CAREGIVER INVOLVEMENT

Best practices for eating disorder treatment emphasize the importance of involving parents, caregivers, and other support systems. Family participation can significantly impact the success of treatment. It's essential to understand how the treatment center incorporates family involvement into their approach. Here are some questions to guide your discussions with the treatment center:

- | | |
|--|---|
| <input type="checkbox"/> Is the location convenient for your loved one and their support system to actively participate in treatment? | <input type="checkbox"/> What are the contact guidelines between our family and our loved one during treatment? |
| <input type="checkbox"/> If the location is too far for in-person family participation, what alternatives are available (e.g., virtual meetings, phone calls)? | <input type="checkbox"/> How often and in what way will I receive updates from the treatment team? |
| <input type="checkbox"/> What is expected of our family during our loved one's stay? | <input type="checkbox"/> Who should I contact if I have questions about my loved one's care? |
| <input type="checkbox"/> How are caregivers involved in care planning for our loved one? | <input type="checkbox"/> What happens if my child requests to leave treatment against medical advice (AMA)? |
| <input type="checkbox"/> What are the visiting guidelines for family or friends? | |



COLLABORATION WITH OUTPATIENT TREATMENT TEAM

If your loved one enters a treatment center after working with an outpatient treatment team, it's important to understand how the center will collaborate with your outpatient providers throughout the treatment process. Outpatient team members often have valuable insights and history that can greatly benefit the center's treatment team. Be sure to complete the necessary Release of Information (ROI) forms to allow seamless communication between both teams. You can also request regular updates on how the center is coordinating with your outpatient team.

The transition back to outpatient care after treatment at a center can be challenging. Learning how the center will support you and your loved one during this time is essential. Here are some questions to guide you:

☐ Will the center help us find an outpatient team if one wasn't in place before admission?

☐ How will the center transfer critical information about my loved one's care to the outpatient team?

☐ Will the center ensure that all outpatient appointments are scheduled before discharge?

☐ What kind of discharge instructions will the family receive to maintain continuity in the treatment plan during the transition?

☐ What written materials will I receive detailing the treatment my loved one received?

FINAL TIPS:

- ✓ **Visit Centers:** Whenever possible, visit potential treatment centers to get a firsthand feel of the environment and meet the staff.
- ✓ **Seek Recommendations:** Consult with healthcare professionals or support groups for recommendations on reputable centers.
- ✓ **Trust Your Instincts:** Choose a center where you feel comfortable and confident in their approach to care.

By considering these areas and asking the right questions, you can make a well-informed decision that best supports your loved one's journey to recovery.

How to Communicate with Medical Providers and Advocate for Your Child

Discussing an eating disorder with a medical provider can be overwhelming. The following tips will help you prepare for a medical provider's appointment and make sure you're ready to provide medical staff with all relevant information and advocate for your child's treatment needs:

HOW TO PREPARE FOR A MEDICAL APPOINTMENT:

- ✓ **Write down all the symptoms** that your child is experiencing and how frequently they occur, including all eating disorder symptoms as well as any general health and mental health concerns that may be related. You can print out a symptom checklist to bring to the appointment (see Appendix C). To see a full list of all the eating disorders and their symptoms, visit: nationaleatingdisorders.org/warning-signs-and-symptoms.
- ✓ **Make a list of all the questions** you'd like to ask during the appointment and organize them in order of importance. For example, "Can you provide a referral to an eating disorder specialist in the area?" "What kind of experience do you have treating patients with eating disorders?" "If my child's symptoms worsen before our next appointment should I take them to the ER?"
- ✓ **Print out educational materials** to take to the medical provider to help inform them about eating disorder symptoms, common myths, and the evaluation and assessment process. You can download and print our flyers here: nationaleatingdisorders.org/shareable-resources. You can also print or share the links to these guidelines from the Academy for Eating Disorders and the American Psychiatric Association on the standards of care for eating disorders: aedweb.org/resources/publications/medical-care-standards psychiatryonline.org/doi/book/10.1176/appi.books.9780890424865.
- ✓ **Seek permission to accompany your child** to the appointment if they are over the age of 18. If they are okay with you joining them, ask how you can best support them during the appointment. Perhaps they want moral support and help taking notes while they take the lead speaking with the medical provider, or maybe they would like you to ask questions and advocate on their behalf.
- ✓ **Trust your instincts** when deciding whether to discuss your concerns privately with the medical provider or in front of your child if they are a minor. If you decide to talk with the medical provider while your child is present, it may be helpful to let them know ahead of time what you'll be discussing.

"Trust your instincts when deciding whether to discuss your concerns privately with the medical provider or in front of your child if they are a minor."



HOW TO ADVOCATE FOR YOUR CHILD DURING A MEDICAL APPOINTMENT:

The following tips can help you advocate for your child when meeting with a medical provider about eating disorder concerns:

- ✓ **Arrive early** for the appointment so you have extra time to organize your thoughts and take out any printed materials you've brought. Breathe deeply and try to stay calm.
- ✓ **Inform the medical provider** that you believe your child may have an eating disorder and that you are concerned about their physical and mental health. Be specific about your concerns. Read aloud or share a printed copy of all the eating disorder symptoms your child is experiencing, as well as any additional health concerns and how often they are occurring. You can print a symptom checklist to bring to the appointment (see Appendix C).
- ✓ **Provide basic facts about eating disorders** to dispel common myths, or share these flyers: nationaleatingdisorders.org/shareable-resources. You can also print or share the links to these guidelines from the Academy for Eating Disorders and the American Psychiatric Association on the standards of care for eating disorders: aedweb.org/resources/publications/medical-care-standards psychiatryonline.org/doi/book/10.1176/appi.books.9780890424865.
- ✓ **Make sure the medical provider is aware of the recommended laboratory testing** for eating disorders, and confirm which tests they plan to order. You can print and share the list with the medical provider (see Appendix D).
- ✓ **Take notes during the appointment.** It can be difficult to remember everything discussed afterwards, so it's helpful to bring a notepad or use a note-taking app on your phone. These notes can also be useful for follow-up appointments and when coordinating care with other providers.

- ✓ **Address any myths directly.** Sometimes medical providers are not well-informed about eating disorders and may unintentionally perpetuate harmful stereotypes or dismiss concerns due to a lack of knowledge. For example, if a medical provider dismisses your concerns because your child is in a larger body despite showing symptoms of a restrictive eating disorder, you might say: *“That’s actually a very common and harmful misconception. The fact is, most people with eating disorders are not underweight. Research shows that individuals at ‘normal’ or higher weights can experience serious, life-threatening health consequences due to an eating disorder. I’d be happy to share some information about this after the appointment if you’re interested in learning more.”*
- ✓ **Call out diet culture and weight stigma.** Health care professionals can often make negative comments about a person’s weight or respond positively to weight loss, restrictive eating, or dieting. These messages can increase the risk of negative body image and disordered eating, so it’s important to speak up. You might say something like: *“Negative comments about body size and suggestions to lose weight can reinforce body image issues and disordered eating. Please focus on my child’s overall health rather than their weight.”*
- ✓ **Ask follow-up questions** if you’re unclear about what the medical provider said. It’s also okay to disagree with the medical provider and voice any concerns you have about their response or recommended treatment plan. While it’s completely valid to feel emotional,

especially when it seems like you’re not being heard and your child is suffering, try to speak as calmly and logically as possible to help advocate effectively.

- ✓ **Get a second opinion.** If the medical provider continues to dismiss your concerns or you disagree with their treatment recommendations, it may be time to find a new provider. Your child deserves a weight-inclusive medical professional who is either knowledgeable about eating disorders or open to learning how to best support your loved one’s recovery.
- ✓ **Review your notes** before the appointment ends, and confirm the medical provider’s plan and recommended next steps to ensure you’re both on the same page.
- ✓ **Ask for referrals.** If your child is not currently working with a therapist or nutritionist trained in eating disorders, ask the medical provider if they can refer you to a specialist in your area. You can also search for eating disorder professionals here: nationaleatingdisorders.org/find-treatment.
- ✓ **Debrief with a support person.** After the appointment, set aside time to talk privately with someone you trust about what happened and how you’re feeling. This process can be overwhelming and confusing, and you deserve to have support. You can also find information about support groups for caregivers here: nationaleatingdisorders.org/resources-for-loved-ones.



FINDING TREATMENT

How to Find Treatment

Finding the right treatment provider can be a challenging process that takes time. It may take several attempts to find the right provider for you and your loved one. We recognize that many people face barriers to accessing care. Below are some resources to help guide you through this process.

TREATMENT LISTINGS

Here is a directory you can use to find eating disorder treatment options in your area or online: nationaleatingdisorders.org/find-treatment.

INSURANCE ISSUES

Many insurance companies have mental health benefits (also known as behavioral health benefits) under a separate umbrella from their physical health benefits. The passage of mental health parity means that, legally, mental health must be covered on par with physical health. However, the separation can still exist, and behavioral health coverage may even be contracted out to a separate company under the supervision of the insurer. This creates a confusing patchwork array of coverage and rules that can make obtaining proper care difficult.

Here are some resources which may be helpful if you are facing barriers to accessing behavioral health insurance benefits or a claim has been denied:

- **Project HEAL** is a national nonprofit that is focused on creating equitable access to eating disorder treatment. They provide information about navigating insurance issues that may help you throughout this process: theprojectheal.org.
- **Here is a list of sample letters** that can be used in various situations where you may need to communicate with insurance companies. They originate from real-world experiences of numerous families and were developed and used by individuals facing similar situations: nationaleatingdisorders.org/insurance-sample-letters.

ADDITIONAL SUPPORT OPTIONS

There are many reasons people seek out additional support beyond treatment. If finances are preventing you or your loved one from obtaining treatment for an eating disorder, these free and low cost support options offer ways to connect with others and provide tools to promote recovery. These can also be a source of additional support between treatment sessions.

Please note that these options do not replace professional treatment. We are listing them as additional support options to supplement recovery or maintenance: nationaleatingdisorders.org/free-low-cost-support.

“Free and low-cost support options offer ways to connect with others and provide tools to promote recovery.”





WORKING WITH SCHOOLS

How to Communicate with Your Child's School and Advocate for Their Needs

Eating disorders can have a profound impact on a child's school performance and many children with eating disorders require accommodations in school to support both their recovery and educational needs. It's therefore important to understand how to advocate for any necessary accommodations your child may need.

The first step in advocating for your child is to inform the school about your child's eating disorder and what accommodations are necessary to support their learning and recovery. This may start as an informal discussion with the teacher, school counselor, or social worker. Another option can be to send a letter of introduction to your child's teacher, school counselor, social worker, and/or principal. Letters can be an effective way to communicate with your child's school as they provide a written record of your concerns, the suggestions that have been discussed, and any requests you have made in the past. This can help prevent miscommunication that may arise from verbal conversations alone and make it easier to follow up if concerns are not addressed. There is a sample letter of introduction in appendix E.

If your child's school is not willing to make necessary accommodations or the changes that have been made do not fully address your concerns, it may be time to request a formal 504 plan. A 504 plan is a section of the Rehabilitation Act of 1973 that requires schools to provide students



who have physical or mental impairments, such as eating disorders, with the support they need to receive an appropriate education equal to their peers. Every school district will have its own procedures and policies on the eligibility and process for obtaining a 504 plan, however, the formal request usually must be made in writing. You can ask your child's teacher, the school counselor, or social worker where to find a copy of the school district's guidelines for 504 plans as well as who to send the request to.

When making a formal request for a 504 plan, it's important to have paperwork confirming your child's diagnosis as well as any other documentation that may show they are eligible to receive accommodations. This documentation can include relevant medical records, psychological evaluations, academic records, and any personal observations of your child's difficulties in school.

It can also be helpful to have a specific list of suggested accommodations from your child's treatment provider or care team. These accommodations may include: mealtime support; exemption from physical education or other activities as needed; excused absences for treatment appointments; access to class notes for missed days; medical monitoring by the school nurse; exemption from height, weight, and BMI screenings; and being excused from class content or assignments related to weight, body size, nutrition, cooking, or calorie counting. You should also clarify the expected communication from the school and identify who should be involved. A sample letter for requesting a formal 504 plan can be found in Appendix F.

School Resources

- Section 504 Protections for Students with Eating Disorders by Department of Education ed.gov/sites/ed/files/about/offices/list/ocr/docs/ocr-factsheet-eating-disorders-202409
- The Individuals with Disabilities Education Act (IDEA) — Parent and Families Resources: sites.ed.gov/idea/parents-families
- National Disability Rights Network: ndrn.org
- The National Center for College Students with Disabilities (NCCSD): nccsd.ici.umn.edu
- Students with Disabilities Preparing for Postsecondary Education | U.S. Department of Education: ed.gov/higher-education/students-with-disabilities-preparing-for-postsecondary-education
- Higher Education | U.S. Department of Education: ed.gov/higher-education
- Center on Parent Information and Resources — This organization is funded through the U.S. Department of Education, Office of Special Education Programs and has a list of centers that can help parents advocate for children with disabilities: parentcenterhub.org/find-your-center
- Opting out of mandatory BMI weigh-ins: berealusa.org/wp-content/uploads/2023/03/BMI-Screenings-Opt-Out-from-parent-1.pdf

APPENDIX

A: How to Advocate During a Medical Appointment

<https://www.nationaleatingdisorders.org/wp-content/uploads/2025/06/AdvocateMedicalAppt.pdf>

B: How to Prepare for a Medical Appointment

<https://www.nationaleatingdisorders.org/wp-content/uploads/2025/06/How-toPrepare.pdf>

C: Signs and Symptoms Checklist for a Medical Appointment

<https://www.nationaleatingdisorders.org/wp-content/uploads/2025/05/SignsChecklist.pdf>

D: Suggested Medical Testing for Eating Disorders

<https://www.nationaleatingdisorders.org/wp-content/uploads/2025/06/MedicalTests-1.pdf>

E: Sample Letter of Introduction

[nationaleatingdisorders.org/wp-content/uploads/2025/02/Sample-Letter-Intro-to-School.pdf](https://www.nationaleatingdisorders.org/wp-content/uploads/2025/02/Sample-Letter-Intro-to-School.pdf)

F: Sample Letter Requesting a 504 Plan

[nationaleatingdisorders.org/wp-content/uploads/2025/02/Sample-Letter-Requesting-504-Plan.pdf](https://www.nationaleatingdisorders.org/wp-content/uploads/2025/02/Sample-Letter-Requesting-504-Plan.pdf)



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