

# OUTPATIENT PEDIATRIC ARFID PROGRAM

## THE MARY FREE BED ARFID TEAM

When you refer a patient to our program, they will be evaluated by one of our speech-language pathologists or occupational therapists, along with our program dietitian who will determine whether the patient would benefit from a psychological evaluation with our licensed clinical psychologist.

## TREATMENT

Our program follows a family-based cognitive behavioral therapy for avoidant/restrictive food intake disorder (CBT-AR) approach. We treat all presentations of ARFID, including lack of interest in eating or food, fear of aversive consequences, and food selectivity due to sensory sensitivity. We prioritize treatment for our highest-risk patients (e.g., those with fear of choking, rapid weight loss, low BMI, etc.).

The patient will be seen by a feeding therapist twice weekly. Psychology sessions will occur on a weekly to biweekly basis, and dietitian services will be provided as needed throughout their time in the program.

## TREATMENT GOALS

Our primary treatment goals include:

- Achieving or maintaining a healthy weight
- Correcting any nutritional deficiencies
- Increasing diet variety to include foods from each of the five basic food groups
- Increasing patient ability to eat in various social environments

## PROGRAM INCLUSION CRITERIA

- Age 5 - 15 years
- Restrictive eating related to sensory aversions, fear of choking or limited interest in food
- No more than mild cognitive impairment
- Families dedicated to improving their child's diet by being involved in therapy appointments and execution of home programming

# OUTPATIENT PEDIATRIC ARFID PROGRAM

*Continued*

## PROGRAM EXCLUSION CRITERIA\*

- Cannot have a concurrent or history of a non-ARFID eating disorder that is contributing to current difficulties with food (e.g., anorexia, bulimia).
- Feeding difficulties cannot be accounted for by another medical or psychiatric condition.
- If referring from a gastroenterologist, please ensure GI issues (such as active eosinophilic esophagitis) are ruled as the primary cause of the patient's feeding difficulties. Patients with active medical needs will be better served in our traditional feeding therapy program.
- Food aversions related to cultural food preferences.
- Reliance on oral nutrition supplements (e.g., PediaSure®, Kate Farms) as sole source of nutrition.
- Children with feeding tubes. **Please note, our regular feeding program continues to serve tube-fed children, regardless of ongoing medical needs.**

\* Our program will update referring providers of any changes in exclusion criteria.

## MAKE A REFERRAL

To refer a patient, please use the Mary Free Bed Grand Rapids Outpatient Services Referral Form. Specify "Mary Free Bed ARFID Program OT or SLP Eval and Treat" on the form. The evaluation notes will be faxed to the referring provider.

**Fax:** 616.840.9642

**Call Us:** For questions, reach out to our program dietitian at 616.840.8156.