## Appendix DS2

## **ANITT 'Traffic Light' System**

RED ZONE:	<ul> <li>Risk indicators and clinical profile suggest patient is at high risk of acute medical complications necessitating inpatient care. <i>All treatment therefore focused on weight gain to reduce risk and avoid admission.</i></li> <li>Monitoring required in Red Zone: <ul> <li>Bloods twice weekly (including Phosph/Ca2+/Magnesium)</li> <li>Core Temp twice weekly</li> <li>BP/Pulse twice weekly</li> <li>Weight once or twice weekly</li> </ul> </li> </ul>
AMBER ZONE:	<ul> <li>Risk indicators and clinical profile suggest patient is at some risk of acute medical complications necessitating inpatient care unless they can stabilise their physical state. <i>Treatment is balanced between focus on short-term risk and long-term issues</i>.</li> <li>Minimum monitoring required in Amber Zone: <ul> <li>Bloods 2 weekly</li> <li>Core Temp 2 weekly</li> <li>BP/Pulse 2 weekly</li> <li>Weight 1–2 weekly</li> </ul> </li> </ul>
GREEN ZONE:	Risk indicators and clinical profile suggest that although patient continues to be at risk from the chronic physical complications associated with Anorexia Nervosa at all weights, they do not currently present an acute physical risk. As such the <i>focus of treatment can be on any aspect of their life and functioning that they choose to work on with the team, not necessarily eating and weight gain.</i> Minimum monitoring required in Green Zone:

- Bloods 2–3 monthly
- Weight 2–3 monthly