

**Dear Health Provider,**

I understand your general procedures may include collecting weight data at every visit.

**As the research on weight science suggests, I find it health-promoting to avoid weighing myself unless it is absolutely medically necessary for my treatment.**

I understand weight may be helpful when determining anesthesia dosage, determining pediatric & some adult drug dosages, low weight anorexia treatment, tracking child growth trajectory, kidney failure, & a handful of other health scenarios. I will be happy to comply with being weighed in such medically necessary circumstances. I also understand weight is *not* necessary for routine check-ups, sore throats, or many other general visits.

**Unless my weight will impact today's treatment recommendations, I decline being weighed.**

If it is necessary, I would like:

\_\_\_ To be informed as to how the weight information will impact or inform my treatment

\_\_\_ To be weighed blind

\_\_\_ For it not to be written on the chart I carry to the front desk

**Thank you for respecting my refusal to be weighed during our sessions and thank you for providing me care.**

