Appendix to Vilde Aabel Skodvin, Samira Lekhal, Kristin Garpestad Kommedal, Beate Benestad, Hanna Flækøy Skjåkødegård, Yngvild Sørebø Danielsen, Sara-Rebekka Færø Linde, Mathieu Roelants, Jens Kristoffer Hertel, Jøran Hjelmesæth, Pétur Benedikt Júlíusson. Lifestyle intervention for children and adolescents with severe obesity – results after one year. Tidsskr Nor Lægeforen 2020; 140. doi: 10.4045/tidsskr.19.0682.

This appendix is a supplement to the article and has not undergone editorial revision.

Appendix Overview of treatment programmes at the Obesity Clinic, Haukeland University Hospital, Bergen and the Morbid Obesity Centre, South-Eastern Norway Regional Health Authority at Vestfold Hospital Trust, Tønsberg.

Time	Bergen	Tønsberg
Start	a	a
1 mo.	b c d	f
2 mo.		e*
3 mo.	e	g
6 mo.	e	é
9 mo.	e	h
12 mo.	a	a
15 mo.	e e	<u>é</u>
18 mo.	é	e
21 mo.	e e	e
24 mo.	a	<u>e</u>

	Patients are encouraged to attend monthly interim check-ups with a public health nurse, and to weigh themselves weekly at home.	Patients are encouraged to attend monthly follow-up locally with measuring and weighing. Inclusion in the Vestfold Child Obesity Register implies follow-up after five and ten years
		* As needed
a	Assessment (60 min. consultation) In Bergen doctor only, in Tønsberg both doctor and nurse specialist. Includes somatic examination (assessment of puberty, acanthosis nigiricans, striae, anthropometric measurements), blood tests and collection of completed questionnaire. Explanation of obesity as a disease, satiety regulation or other relevant topics. The ultimate goal of the therapy is to reduce the degree of obesity, either by maintaining a stable weight in combination with growth in height, or by weight reduction in adolescents who are in the process of completing their growth in height. The assessment attempts to identify individual lifestyle elements that are regarded as explanatory for the inappropriate weight development, and to implement sustainable behavioural modification intervention. In Bergen: review of <i>Vektbok</i> [Weight book]: Mapping of lifestyle and identification of treatment goals	
b	Conversation with clinical dietitian (45 min.). Patient's dietary history, or review of completed dietary record if relevant. Individual goals and measures concerning food drawn up in cooperation with the family. Dietary advice follows the guidelines of the Norwegian Directorate of Health and includes calorie reduction, portion control, mealtime rhythm, food quality (e.g. use of the <i>nøkkelhull</i> [keyhole] label on healthy products and the bread scale label on healthy bread types) and limitation of sugar and fat.	
C	Conversation with physiotherapist (45 min.). Conversation about everyday activity, organised activity and sleep. Where relevant, a 6-minute walking test. Individual goals and measures concerning activity drawn up in cooperation with the family. The patient is encouraged to avoid sitting still, to increase activity and to have good sleeping habits.	
d	Summarising conversation with nurse specialist (30 m individual treatment goals.	in.) 2 weeks after other assessment. Review of

<u>e</u>	Follow-up conversation with nurse specialist (30–45 min.). Anthropometric measurements. Assessment of how things have gone since the last meeting, including weight development. Problem solving if the family has not attained the goals, possibly set new goals in collaboration with the family. In Bergen: The need for further contact with a clinical dietitian or physiotherapist is reviewed regularly.
f	Follow-up conversation with nurse specialist. Anthropometric measurements. Survey of diet and proposals for dietary changes. Dietary advice follows the guidelines of the Norwegian Directorate of Health and includes calorie reduction, portion control, mealtime rhythm, food quality (e.g. use of the <i>nøkkelhull</i> [keyhole] label on healthy products and the bread scale label on healthy bread types) and limitation of sugar and fat.
g	Interactive group meeting (5.5 hours) with interdisciplinary team (clinical dietitian, nurse specialist, physiotherapist and doctor).
	Topics reviewed are diet, the parental role, food preparation, motivation and mastery of lifestyle modification, goals, physical activity.
h	Interactive group meeting (2.5 hours) with clinical dietitian and specialist nurse. Repeat of dietary advice.