AACE Checklist for Screening and Diagnosis of Weight-related Complications

	Basis for Screening and/or Diagnosis	Suggested Secondary Testing When Needed to Confirm Diagnosis, Stage Severity, or Guide Therapy
Prediabetes	Fasting glucose; A1C; 2-hour OGTT glucose	If fasting glucose is 100-125 mg/dL, a repeat elevated fasting glucose completes diagnosis of IFG; however, 2-hour OGTT should also be performed to exclude diabetes and IGT. Fasting and 2-hour OGTT should be performed if initial fasting glucose is normal and A1C is elevated, or in high-risk patients based on family history or metabolic syndrome.
Metabolic Syndrome	Waist circumference, blood pressure, fasting glucose, triglycerides, HDL-c	Initial evaluation completes diagnosis; use OGTT to test for IGT or diabetes.
Type 2 Diabetes	Fasting glucose; A1C; 2-hour OGTT glucose; symptoms of hyperglycemia	Overtly elevated (i.e., ≥200 mg/dL) or a repeat fasting glucose ≥126 mg/dL completes diagnosis. If fasting glucose and/or A1C is consistent with prediabetes, 2-hour OGTT should be performed to test for diabetes. A1C should be performed to help guide therapy.
Dyslipidemia	Lipid panel (total cholesterol, HDL-c, triglycerides, LDL-c, non-HDL-c)	Lipid panel completes diagnosis; lipoprotein subclasses, apoB100 may further define risk.
Hypertension	Sitting blood pressure	Repeat elevated blood pressure measurements to complete diagnosis; home blood pressure or ambulatory blood pressure monitoring may help complete testing.
Cardiovascular Disease	Physical exam; ROS; history and medical records	Additional testing based on findings and risk status (e.g., ankle-brachial index, stress testing, coronary artery calcium score and the MESA risk score calculator, arteriography, carotid ultrasound).
NAFLD / NASH	Physical exam; LFTs	Imaging (e.g., ultrasound, MRI, elastography) and/or liver biopsy needed to complete diagnosis.
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PCOS and Female Infertility	Physical exam; ROS; menstrual and reproductive history	Hormonal testing (e.g., androgen levels, SHBG, LH/FSH, estradiol), ovulation testing, imaging of ovaries, may be needed to complete diagnosis.
Male Hypogonadism	Physical exam; ROS	Hormonal testing (total and free testosterone, SHBG, LH/FSH, prolactin) as needed to complete diagnosis.
Obstructive Sleep Apnea	Physical exam; neck circumference; ROS	Polysomnography needed to complete diagnosis.
Asthma/Respiratory Disease	Physical exam; ROS	Chest X-ray and spirometry may be needed to complete diagnosis.
Osteoarthritis	Physical exam; ROS	Radiographic imaging may be needed to complete diagnosis.
Urinary Stress Incontinence	Physical exam; ROS	Urine culture, urodynamic testing may be needed to complete diagnosis.
GERD	Physical exam; ROS	Endoscopy, esophageal motility study may be needed to complete diagnosis.
Depression, Anxiety, Binge Eating Disorder, Stigmatization	History; ROS	Screening/diagnostic evaluation or questionnaires based on criteria in Diagnostic and Statistical Manual of Mental Disorders; referral to clinical psychologist or psychiatrist.
Disability	Physical exam; ROS	Functional testing may be helpful.

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