Outpatient Treatment of Eating Disorders

Early recognition of eating disorder symptoms and early intervention may prevent an eating disorder from becoming chronic. Students and families are encouraged to consider all treatment options, including inpatient and intensive outpatient programs with clinicians at home and/or in the Richmond area.

Students and their families considering outpatient treatment while enrolled at the University are encouraged to review the information below when deciding which treatment plan is best for an individual student. We encourage the decision be made in consultation with the student’s home treatment team, including physicians, psychologists, and nutritionists. Follow up with the home treatment team during school breaks is encouraged.

Students and families requesting more intensive medical and behavioral monitoring are encouraged to consider options at home or in the greater Richmond area with off-campus providers. The Student Health Center (SHC) and Counseling and Psychological Services (CAPS) are not open during semester breaks or summer sessions.

Weight Range
A student should be in a healthy range, considering past history, body composition, and family history. Weights less than 85% of an ideal body weight and a Body Mass Index below 18.5 are difficult to improve in the University outpatient setting. Weight monitoring alone is not treatment for an eating disorder. The University professionals monitoring students with eating disorders recommend a weight check every four weeks during the academic year. Follow up with the home treatment team during school breaks is encouraged. Students and families requesting more intensive medical and behavioral monitoring are encouraged to consider options at home or in the Richmond area with community providers off campus. The health center is not open during semester or summer breaks.

Physical Exam and Symptoms
Heart rate, blood pressure, temperature, cardiac function, and lab tests should be stable for monitoring in the University outpatient setting. Students are encouraged to follow up with their home treatment team during school breaks for lab tests, bone density scans, EKGs, echocardiograms, dental check-ups, and any other necessary testing.

Behaviors
Purging, binging, and caloric restriction should be minimal and not require intensive supervision. The University does not monitor meal intake, calorie counts, bathroom activities, or exercise levels.

Co-morbid Psychiatric Disorders and Substance Abuse
Students should be stable an in recovery from frequently co-existing conditions, such as anxiety, depression, obsessive compulsive disorder, suicidal thoughts and behaviors, and substance abuse. The University environment frequently makes it difficult for students not in recovery from these conditions to be successful managing their eating disorder.

Motivation to Change Eating Disorder Behaviors
Students are expected to cooperate with the treatment professionals and follow through with the recommended plan. The University does not remind students to keep their scheduled appointments. The dean’s office may contact the student and/or the family if others convey concern about the student.

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