STEP ONE: STARTING WELL AND DECIDING TO CHANGE
- Engaging the patient in treatment and change
- Establishing real-time self-monitoring
- Establishing collaborative in-session weighing
- Providing education
- Jointly creating the personal formulation
- Introducing a pattern of regular eating
- Thinking about addressing weight regain (in underweight patients)
- Involving parents

STEP TWO: ADDRESSING THE CHANGE
Focused CBT-E modules
- Underweight & Undereating (in underweight patients)
- Body Image
- Dietary Restraint
- Events and Mood Changes
- Setbacks & Mindsets
Broad CBT-E modules
- Clinical Perfectionism
- Core Low Self-Esteem
- Interpersonal Difficulties
- Mood Intolerance

REVIEW SESSIONS*
- Conducting a joint review of progress
- Identifying emerging barriers to change
- Reviewing the formulation
- Deciding whether to use the broad form of CBT-E
- Planning the rest of treatment

*One after Step One in non-underweight patients; every 4 weeks in underweight patients

STEP THREE: ENDING WELL
- Ensuring that progress is maintained
- Minimizing the risk of relapse

FIGURE 2.1. The CBT-E map for adolescents with eating disorders.