

DIABETES OFFICE VISIT FORM

Today's Date: _____

Patient Name: _____ Wght: _____ Age: _____ BMI: _____

Allergies: _____ Hght: _____ Sex: _____ Waist Circumference: _____

HPI/CC:	Home glucose reading:	Y N	Home glucose monitor
	Fast _____	Y N	Eye exam < 1 year ago
	Noon _____	Y N	Hypoglycemia
	Dinner _____	Y N	Examines feet
	Bedtime _____	Y N	Planning pregnancy
	2°PP _____	Y N	
	Flow Sheet	Y N / Reviewed / Updated	

Risk Factor:

Y N	HTN (BP >130/80)	Y N	Sedentary lifestyle	Y N	_____
Y N	Hyperlipidemia (LDL >100)	Y N	Stress	Y N	_____
Y N	Smoking/Tobacco use	Y N	Age (>40)	Y N	_____
Y N	Obesity (BMI >27)	Y N	Family HX DM	Y N	_____

PMH:

Y N	Stroke/TIA
Y N	Angina/MI/CAD
Y N	Nephropathy (Cr > 2.0)
Y N	Neuropathy
Y N	CHF
Y N	DKA
Y N	Hyperlipidemia
Y N	_____
Y N	_____

Medications: Med List Reviewed? Y N

Y N	Statin: _____	Y N	_____	Y N	_____
Y N	ACE/ARB: _____	Y N	_____	Y N	_____
Y N	ASA: _____	Y N	_____	Y N	_____
Y N	_____	Y N	_____	Y N	_____

Physical Exam: BP (Goal <130/80): ____/____ Pulse: ____ RR: ____ Temp: ____

AVG Home BP: ____/____

General Appearance	NI	Abn	Comment(s):	
Fundus	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Neck	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Thyroid	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Lungs (Effort/Percuss/Auscultate)	<input type="checkbox"/>	<input type="checkbox"/>	_____	
Heart (Rate/Rhythm/Murmur/JVD, S ₃ /S ₄)	<input type="checkbox"/>	<input type="checkbox"/>	_____	
	NI	Abn	NI	Abn
LE edema ...	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
Pulses	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
Carotid Pulses	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
Femoral Pulses	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
Pedal Pulses	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
Skin (foot)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Monofilament	Left	<input type="checkbox"/>	Right	<input type="checkbox"/>
		<input type="checkbox"/>		<input type="checkbox"/>

Target Organ Damage:

Y N	Proteinuria/Microalbuminuria
Y N	Retinopathy
Y N	Nephropathy (Cr > 2.0)
Y N	Neuropathy

Review of Systems:

Y N	Chest Pain
Y N	DIB
Y N	Claudication
Y N	HA
Y N	Numbness
Y N	Rash
Y N	Fatigue
Y N	Edema
Y N	_____
Y N	_____
Y N	_____
Y N	_____

Diagnostic Testing:

	NI	Abn	Ord	Value
UA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Microalbuminuria (yearly)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lipids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
LDL<100 (yearly)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Glucose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
HgBA_{1c} (1-4X/ yearly)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
BUN/Cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
LFT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Assessment/Plan:

<input type="checkbox"/> DM Type I	<input type="checkbox"/> End Organ Damage	<input type="checkbox"/> _____
<input type="checkbox"/> DM Type II	<input type="checkbox"/> HTN	<input type="checkbox"/> _____
<input type="checkbox"/> Impaired Fasting Glucose	<input type="checkbox"/> Hyperlipidemia	<input type="checkbox"/> _____

Med Change* Y N _____

New Meds* Y N _____

<input type="checkbox"/> Tobacco Cessation	<input type="checkbox"/> Glucometer _____	<input type="checkbox"/> Endo referral
<input type="checkbox"/> Diet/Nutrition	<input type="checkbox"/> DM Ed referral	<input type="checkbox"/> _____
<input type="checkbox"/> Exercise	<input type="checkbox"/> Influenza	Recheck:
<input type="checkbox"/> Foot care	<input type="checkbox"/> Pneumococcal vaccine	<input type="checkbox"/> 1 mos
<input type="checkbox"/> Diabetic goals	<input type="checkbox"/> dT/DTaP	<input type="checkbox"/> 3 mos
BP <130/80;	<input type="checkbox"/> Preconception counseling	<input type="checkbox"/> 4 mos
(LDL<100;	<input type="checkbox"/> Eye exam referral/digscope	<input type="checkbox"/> 6 mos
HgBA _{1c} <6.5)	<input type="checkbox"/> Nephrology referral	<input type="checkbox"/> Other _____

CONTINUED OVER

*Diuretics 1st line / BB(CAD) / ACE/ARB (CRF/CHF/DM)

Physician Signature:

Date:



July 2006

Management of Diabetes Mellitus

The following guideline applies to patients with type 1 and type 2 diabetes mellitus. It recommends specific interventions for periodic medical assessment, laboratory tests and education to guide effective patient self-management.

Eligible Population	Key Components	Recommendation and Level of Evidence	Frequency
Patients 18 - 75 years of age with type 1 or type 2 diabetes mellitus	Periodic assessment	Assessment should include: Weight, BMI ¹ <ul style="list-style-type: none"> Blood pressure [A] (adult target of < 130/80) Assess cardiovascular risks: <ul style="list-style-type: none"> Smoking, hypertension, dyslipidemia, sedentary lifestyle, obesity, stress, family history, age > 40 years, gender Comprehensive foot exam (including monofilament testing annually) [B] Screen for depression [D] Dilated eye exam by ophthalmologist or optometrist [B], or digiscope [B] 	At least annually and more frequently as needed
	Laboratory tests	Tests should include: <ul style="list-style-type: none"> A1C [D] Urine microalbumin measurement [D] Serum creatinine and calculated GFR [D] Fasting lipid profile 	A1C 2 - 4 times annually based on individual therapeutic goal ² ; other tests at least annually
	Education, counseling and risk factor modification	People with diabetes should receive medical care from a physician-coordinated team: <ul style="list-style-type: none"> Consider referral to diabetes educator if education not provided by physician or practice staff Education should include: <ul style="list-style-type: none"> Nutrition counseling, including role of weight in insulin resistance and importance of progress toward ideal body weight Role of self-monitoring of blood glucose in glycemic control [A] Cardiovascular risk reduction Smoking cessation intervention [B] and secondhand smoke avoidance [C] Regular physical activity [A] Self-care of feet [B] Preconception counseling [D] Encourage patients to receive dental care 	At diagnosis and as needed
	Medical recommendations	Care should focus on smoking, hypertension, lipids and glycemic control: <ul style="list-style-type: none"> Treatment of hypertension using up to 3 - 4 anti-hypertensive medications to achieve adult target of < 130 systolic [A] and < 80 diastolic [B] Prescription of ACE inhibitor or angiotensin receptor blocker (ARB) in patients with hypertension or albuminuria [A]³ Statin therapy for primary prevention against macrovascular complications in patients with diabetes who are > age 40 or who have an LDL-C >100 mg/dl [A]⁴ Management of cardiovascular risk factors Assurance of appropriate immunization status (tetanus, diphtheria, pertussis, influenza, pneumococcal vaccine) [C] Anti-platelet therapy [A]: low dose aspirin daily for primary prevention in those at increased cardiovascular risk with type 1 [C] and type 2 [A] diabetes, unless contraindicated⁵ 	At each visit until therapeutic goals are achieved

¹ BMI = weight (kg)/height squared (m²) or (pounds x 703)/inches²

² Develop or adjust the management plan to achieve normal or near-normal glycemia with an A1C goal of < 7%. Less stringent treatment goals may be appropriate for patients with a history of severe hypoglycemia, patients with limited life expectancies, very young children or older adults and individuals with comorbid conditions. More stringent treatment goals (i.e., a normal A1C < 6%) for individual patients and in pregnancy.

³ Consider referral of patients with serum creatinine value >2.0 mg/dl (adult value) or persistent albuminuria to nephrologist for evaluation.

⁴ Target LDL-C < 100 mg/dl [B]. For patients with overt CVD, a lower LDL-C goal of < 70 mg/dl is an option [B].

⁵ Aspirin therapy is not routinely recommended for patients under the age of 21 years because of the increased risk of Reye's syndrome.

Levels of Evidence for the most significant recommendations: A = randomized controlled trials; B = controlled trials, no randomization; C = observational studies; D = opinion of expert panel

This guideline represents core management steps. It is based on the 2003 Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (www.nhlbi.nih.gov). Individual patient considerations and advances in medical science may supersede or modify these recommendations.