## **Diabetes Minimum Practice Recommendations**



Name:

\_\_\_\_\_ ID# \_\_

Sex: M	F
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TEXAS DIABETES 4 7 27 06

	D.O.B.		Pub. # 45-12085
Exam/Test/Counseling Suggested Result Codes:	ile ered, N=Normal, A=Abnormal, E=Done Else	where, R=Referred	
1. Complete history & physical	Initial visit and at clinician's discretion (including risk factors, exercise & diet)	Date Result	
2. Diabetes Education*	Initial visit and at clinician's discretion	Date Result	
3. Medical Nutrition Therapy	Initial visit and at clinician's discretion	Date Result	
4. Exercise Counseling	Initial visit and at clinician's discretion	Date Result	
5. Psychosocial Counseling	Initial visit and at clinician's discretion	Date Result	
6. Lifestyle/Behavior Changes Counseling	Initial visit and at clinician's discretion Alcohol reduction	Date Result	
7. Weight/Height/BMI Adult Overweight=BMI 25–29.9 Adult Obesity=BMI ≥ 30	Every Visit	Date Result	
8. Blood Pressure Target: <130/80 mm Hg Target: <125/75 mm Hg if≥ 1g proteinuria	Every Visit	Date Result	
<b>9. Foot Inspection</b> Visual inspection for skin and nail lesions, calluses, infections	Every Visit	Date Result	
<b>10. Oral/Dental Inspection</b> Refer for dental care annually or as needed	Every Visit	Date Result	
11. Growth and Development (including height) in Children	Every Visit	Date Result	
<ul> <li>12. Aspirin/Antiplatelet Prophylaxis         <ul> <li>(if no contraindications)</li> <li>Type 1 or 2 ≥ age 30</li> </ul> </li> </ul>	Every Visit	Date Result	
<b>13.</b> A1c Target: ≤6.5%	Every 3–6 months	Date Result	
<b>14. Kidney evaluation</b> Estimate GFR (eGFR) & microalbumin determination (≥30mg = abnormal). Consider nephro/endocrine evaluation at Stage 3 CKD (eGFR <60); also consider PTH & Hgb if CKD Stage 3 If significant proteinuria; monitor serum creatinine every 3–6 months	Type 1: Annually beginning 5 years from diagnosis Type 2: Initial visit then annually	Date Result	
<b>15. Dilated funduscopic eye exam</b> By an ophthalmologist or therapeutic optometrist	Type I: Annually beginning 5 years from diagnosis Type 2: Initial, then annually	Date Result	
16. Oral/Dental Exam Refer to appropriate provider	Annually or as needed	Date Result	
17. Foot Exam Complete foot exam and neurologic assessment	Annually or as needed		
<b>18. Lipid Profile</b> Targets: LDL-C <100 mg/dL (CHD <70mg/dL) Triglycerides <150 mg/dL	Annually if at goal; otherwise every 3–6 months (> age 18)	Date Result	
19. Immunizations Influenza (Flu) Vaccine Td Vaccine Pneumococcal Vaccine Childhood Immunizations See web site	Annually Every 10 Years Initial; repeat per ACIP Per CDC Schedule (http://www.texasdiabetescouncil.org) for	Date Result	

a. Self-management skills (i.e. monitoring, sick day management b. Medications

c. Frequency of hypoglycemia d. High-risk behaviors (e.g. smoking, alcohol)

\*Diabetes Education should address: Accemia e. Adherence with self-care (self-management plan from the last visit, (i.e diet, medication use, exercise plan)

f. Assessment of complications g. Diabetes knowledge h. Follow-up of referrals