

## DIABETES STANDARDS OF CARE FLOW SHEET

<b>Patient Name:</b>		<b>Physician Name:</b>		
<b>Date of Birth:</b>		<b>Physician Phone:</b>		
<b>Member #:</b>				
<b>INTERVENTIONS</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>	<b>DATE</b>
<b>Blood pressure goals</b> • < 130/80 mm Hg • <125/75 with proteinuria				
<b>Weight</b> (lb or kg)				
<b>Height</b>				
<b>Visual foot inspection</b>				
<b>Lipid profile</b> (annual) <i>Goals:</i> Total Chol < 200 mg/dL				
Total cholesterol	mg/dL	mg/dL	mg/dL	mg/dL
<i>LDL &lt; 100 mg/dL</i> LDL	mg/dL	mg/dL	mg/dL	mg/dL
<i>HDL &gt; 40 mg/dL (men)</i> <i>HDL &gt; 50 mg/dL (women)</i> HDL	mg/dL	mg/dL	mg/dL	mg/dL
<i>TG &lt; 150 mg/dL</i> Triglycerides	mg/dL	mg/dL	mg/dL	mg/dL
<b>A1C Goal:</b> <7.0% <i>Metabolically controlled - every six months</i> <i>Not controlled, or change in therapy - every three months</i>				
<b>Microalbuminuria</b> (annual) • Microalbumin/Creatinine ratio, random spot <i>or</i> • 24-hour Cr. Clearance <i>or</i> • eGFR • Timed				
<b>Reno-protective Therapy</b> (ACE or ARB)				
<b>Aspirin therapy</b> 81-325mg per day, pts. over 40 and patients under 40 with documented CHD risk factors and diabetes				
<b>Sensory foot exam</b> (annual)				
<b>Dilated retinal exam</b> (annual)				
<b>Flu vaccine</b> (annual)				
<b>Pneumonia vaccine</b>				
<b>Preconception counseling</b>				
<b>Smoking cessation counseling</b>				
<b>Exercise program</b>				