

# 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				
<b>Weight</b> (lb or kg)				
<b>Height</b>				
<b>BMI and/or Waist Circumference</b>				
<b>Visual Foot Inspection</b> (each visit)				
<b>Lipid Profile Goals</b> (annual) Total Chol < 200 mg/dL	mg/dL	mg/dL	mg/dL	mg/dL
<b>LDL</b> LDL < 100 mg/dL (optional < 70 mg/dL)	mg/dL	mg/dL	mg/dL	mg/dL
<b>HDL</b> HDL > 40 mg/dL (male) HDL > 50 mg/dL (female)	mg/dL	mg/dL	mg/dL	mg/dL
<b>Triglycerides</b> TG < 150 mg/dL	mg/dL	mg/dL	mg/dL	mg/dL
<b>A1c Goal: &lt; 7.0%</b> Metabolically controlled - every six months Not controlled, or change in therapy - every three months				
<b>Kidney Function</b> eGFR, <i>or</i> 24-hour Cr. Clearance <i>or</i> Microalbumin/Creatinine ratio <i>or</i> Random spot urine				
<b>Reno-protective Therapy</b> ACE or ARB				
<b>Aspirin Therapy</b> If age > 40 yrs or high risk for CVD				
<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> 30 min all or most days of the week				

ADA Standards of Care for People with Diabetes, Diabetes Care, Vol.30, (Suppl. 1), 2007.