

Diabetes Care Guidelines/Flow Sheet



Name _____ MR # _____ D.O.B. _____
 Language _____ Race/Ethnicity _____

Clinical Priorities	Parameters	Frequency	Goal/ Recommendation	Date/ Results:	Date/ Results:	Date/ Results:	Date/ Results:
History, Physical and Emotional	Blood Pressure	Every Visit	<130/80 mm/Hg				
	Weight	Every Visit	BMI <25 kg/m ² ; reduce weight by 5%-10% if overweight				
	Foot exam	Every Visit	Inspect skin; teach protective foot behavior if sensation diminished				
	Foot exam-monofilament	Annually	Prevention of ulceration and amputations				
	Dilated Eye Exam	Annually	Retinopathy prevention				
	Dental	Bi-Annually	Assess oral symptoms/ refer to dentist				
	Depression	Annually	Assess for mood disorders; suggest support groups/counsel/referral				
	Medication Review (diabetes meds, statin, ACE/ARB and/or aspirin)	Every visit	Optimize glycemic control and for the primary or secondary prevention of CVD and/or management of HTN and hyperlipidemia; reconcile medication list; discuss adherence issues				
	Tobacco Status: _____ Never _____ Former _____ Current Quit Date: _____ If current smoker, refer to California Smokers' Helpline at 1-800-NO-BUTTS						
General Care	Periodic H&P/ Pap or Prostate	As indicated	Early detection of cervical and prostate cancer				
	Mammogram/ Chest X-Ray	Every 1 - 2 years	Early detection of breast cancer; screening to begin at age 40 or 50 [†]				
	Colorectal Cancer	After age 50	Early identification of colorectal cancer				
	EKG	As indicated	Detection of cardiac abnormalities				
Lab	A1C	Quarterly	<7% for most patients*				
	Albumin/Creatinine Ratio	Annually	Check spot urine for albumin and creatinine, calculate ratio $\geq 30 \mu\text{g alb/mg creatinine}$ is abnormal				
	Serum Creatinine for eGFR	Annually	Estimate glomerular filtration rate (GFR) to stage the level of chronic kidney disease (CKD)				
	LDL	Annually	< 100 mg/dL; <70 mg/dL (optional goal)				
	Triglycerides	Annually	<150 mg/dL				
	HDL	Annually	>40 mg/dL in men; > 50 mg/dL in women				
	Non-HDL	Annually	<130 mg/dL; <100 mg/dL (optional goal)				
	Total Cholesterol	Annually	< 200 mg/dL				
Vaccine	Flu Vaccine	Encourage vaccination annually upon availability of vaccine					
	Pneumovax	Revaccinate >65 years old if initial vaccine given >5 years ago and < 65 years old					
	Tetanus/ PPD	Vaccination against tetanus; determine exposure to TB					
	Tdap/ Pertussis	Vaccination against tetanus, diphtheria & pertussis					
Self Management			Goals	Patient Goals			
Self-Glucose Monitoring			Pt. to monitor glucose as necessary to minimize risk of hyper/hypo glycemic episodes; review and check patient log book for accuracy				
Physical Activity			150 minutes of moderate to vigorous exercise a week				
Nutrition			Advise weight reduction if BMI ≥ 25 ; refer to dietician/MNT				
Foot Exam			Review foot inspection instructions with patient				
Medication Management/Adherence			Discuss barriers/solutions to adherence; reconcile medication list				

[†] For women at average risk of breast cancer, the US Preventive Services Task Force recommends mammograms every 2 years beginning at age 50 while the American Cancer Society recommends yearly mammograms beginning at age 40.
 * More or less stringent A1c values may be appropriate dependent on individual history, risk factors and length of disease, among other considerations.
 Sources: [American Diabetes Association, Standards of Medical Care in Diabetes, 2011](#) and the American Association of Clinical Endocrinologists [Medical Guidelines for Developing a Diabetes Mellitus Comprehensive Care Plan, 2011](#)
 Notes: 1) Any application of these recommendations should be made in consideration of the needs, conditions and circumstances of each individual patient. 2) This flow sheet is included in the CMA Foundation's [Diabetes and Cardiovascular Disease Provider Reference Guide \(2nd ed.\), 2011](#)