

DIABETES EDUCATION REFERRAL

FAX to JRMC at **319/462-4689**

To better serve your patient, H&P/Progress Note/Current Med list/Labs if available, thank you.

Medicare requires lab values to support a new diagnosis of diabetes in order for them to pay for diabetes education. Must have: Fasting blood glucose ≥ 126 mg/dl on 2 separate days or 2 hour post-glucose challenge ≥ 200 mg/dl on 2 separate days or random glucose ≥ 200 mg/dl with symptoms of uncontrolled diabetes. If your patient has pre-diabetes, you may refer them to the pre-diabetes program which does not require a referral.

Fasting blood glucose date _____ glucose _____ and date _____ glucose _____
OR 2 hour glucose challenge date _____ glucose _____ and date _____ glucose _____
OR Random blood glucose date _____ glucose _____

List current labs or fax a copy of labs: Date of lab _____ A1c _____

Date of labs: _____ Cholesterol _____ LDL _____ HDL _____ Triglycerides _____

Patient Name _____ **DOB** _____
Phone: (H): _____ (W) _____ **Insurance Primary):** _____
Address: _____ **City** _____ **Zip** _____
Physician: _____ **Phone:** _____ **Fax** _____

DIAGNOSIS: Check all that apply

- Type 2 Diabetes-new diagnosis
- Type 2 Diabetes-established
- Type 1 Diabetes-new diagnosis
- Type 1 Diabetes-established

COMORBIDITIES Check all that apply

- Diabetes, Nephropathy
- Decreased Extremity Sensation
- Gastroparesis
- History of Gastric By-pass
- Other _____

PROGRAM/SERVICES REQUESTED: Check all that apply

- Basic Education - non-insulin
- Basic Education - on or starting insulin
- Uncontrolled BG levels/Self Management /Pattern Control
- Annual Review (list specific topics to be addressed)

SPECIAL NEEDS (requiring individual appointments): Check all that apply

- Severe Vision Limitation
- Severe Hearing Limitation
- Severe Language Limitation
- Physical/Mental Challenges (specify): _____

CURRENT DIABETES MEDICATIONS: None

- Oral DIABETES Agent(s) (include dose): _____
- Insulin (include dose): _____

MEDICATION ORDERS:

- Continue oral agents: _____
- D/C oral agents: _____ when? _____
- Change oral agent to (type, dose): _____
- Start Byetta/Victoza _____
- Start insulin as follows: _____

As the health care provider treating this beneficiary's diabetic condition, I certify that diabetes self-management training is needed under a comprehensive plan for this patient's diabetes care to ensure therapy compliance and/or to provide the necessary skills and knowledge to enable the patient to manage his/her condition.

PHYSICIAN SIGNATURE: _____ **Date:** _____

(Must be Physician's Signature)

<p>Adult 3-6 Sessions over 3 months, additional sessions based on individual needs; 9-12 hours of education GOAL: To assist the person with diabetes (not insulin-requiring) to improve glucose control by learning self-management skills (e.g. blood glucose monitoring, meal planning, increased activity) and risk reduction measures.</p> <ul style="list-style-type: none"> • Diagnosis of diabetes and treatment goals • Goal for A1c • Home blood glucose monitoring • Carbohydrate counting and label reading • Benefits of increased activity/exercise • Recognition and treatment of hypoglycemia • Problem solving high and low Blood glucose • Risk for heart disease • Need for lipid management • Setting behavioral goal • Guidelines for alcohol use • Importance of preventive care, diabetes and pregnancy • Diabetes Management During Short Term Illness 	<p>Self Management/Insulin Pattern Control 4-8 Sessions over 3 months — additional sessions for patients receiving instruction for self management insulin dose adjustments 6-10 hours of education GOAL: To assist the person with diabetes to improve glucose control by learning self-management skills related to insulin therapy.</p> <ul style="list-style-type: none"> • Insulin administration • Home blood glucose monitoring • Target Blood glucose and A1c goals • Problem solving high and low Blood glucose • Carbohydrate counting and label reading • Effect of exercise on Blood glucose • Diabetes Management During Short Term Illness • Recognition and treatment of hypoglycemia • Importance of preventive care • Setting behavioral goal • Basics of pattern control
<p>Adult Basic Education (On or starting insulin) 3-6 Sessions over 3 months, additional sessions based on individual needs. 8-15 hours of education GOAL: To assist the person with diabetes (insulin-requiring) to improve glucose control by learning management skills (e.g. blood glucose monitoring meal planning increased activity) and risk reduction measures.</p> <ul style="list-style-type: none"> • Diagnosis of diabetes and treatment goals • Goal for A1c • Urine ketone determinations • Carbohydrate counting and label reading • Benefits of increased activity/exercise • Recognition and treatment of hypoglycemia Problem solving high and low Blood glucose • Setting behavioral goal • Guidelines for alcohol use If appropriate • Importance of preventive care reducing risk of long term complications diabetes and pregnancy • Family and individual psychosocial support • Diabetes Management During Short Term Illness • Insulin administration • Basics of pattern control 	<p>Annual Review 1-2 sessions, 2 hours of education GOAL: Assist the patient to improve blood glucose control and reduce risk of long-term complications. Content delivered based on individual assessment of current patient needs and physician referral.</p>
	<p>Diabetes Self Management Training revised 9/2013</p>