

Diabetes Minimum Practice Recommendations for Children and Adults



Name: _____ ID#: _____ D.O.B.: _____ Sex: M F

Exam/Test/Counseling Schedule

Suggested Result Codes: O=Ordered, N=Normal, A=Abnormal, E=Done Elsewhere, R=Referred

Complete History & Physical	Initial visit and at clinician's discretion (including risk factors, exercise & diet)	Date							
Family history	Annually	Date							
Education and Counseling									
Diabetes education ¹	Initial visit, annually and at clinician's discretion	Date							
Medical Nutrition Therapy	Initial visit, annually and at clinician's discretion	Date							
Exercise counseling	Initial visit and at clinician's discretion	Date							
Depression Screening²	Initial visit and at clinician's discretion	Date							
Sexual Function (male/female)	Initial visit and at clinician's discretion	Date							
Lifestyle/Behavior									
Smoking cessation	Initial visit and at clinician's discretion	Date							
Alcohol reduction	Initial visit and at clinician's discretion	Date							
Physical Examination									
Blood pressure Target: <130/80 mm Hg or individualized based on comorbidities	Every visit	Date Result							
Weight/Height/Waist Circumference	Every visit (Height / waist circumference annually)	Date Result							
BMI Adult Overweight=BMI 25–29.9 Adult Obesity=BMI ≥ 30	Every visit	Date Result							
Foot Exam • Visual inspection for skin and nail lesions, calluses, infections, deformities • Monofilament / 128 Hz tuning fork • Pedal pulses	Every visit Annually or as needed Annually or as needed	Date Results							
Oral/Dental inspection Refer for dental care every 6 months	Every visit	Date Result							
Dilated Fundoscopic Eye Exam (ophthalmology or optometry)	Annually or as indicated by eye specialist	Date Result							
Laboratory Studies									
A1c ³	Every 3-6 months	Date Result							
Kidney • BUN/Creatinine • eGFR • Urine MicroAlb:Cr ratio • iPTH ⁴	Annually or every 3-6 months if abnormal Annually or every 3-6 months if abnormal Initial visit, then annually As indicated if CKD stage 3+	Date Result							
Liver • AST (SGOT) / ALT (SGPT)	Annually or every 3-6 months if abnormal	Date Result							
Lipid Profile • Triglycerides • HDL • LDL	Annually if at goal; otherwise every 3–6 months (> age 18)	Date Result							
TSH	Annually or as needed	Date/Result							
Vitamin D (25-OH-Vit D)	As indicated	Date/Result							
Testosterone / PSA	At clinician's discretion	Date/Result							
Other		Date/Result							
Cancer Screening									
Pap-pelvic ⁵	When sexually active and every 1-5 yrs to age 65	Date/Result							
Mammogram	Age 40 and every 1-3 yrs	Date/Result							
DRE	Annual age 40-50 to age 75	Date/Result							
Colonoscopy	Age 50, repeat 10-20 yrs if no risk factors	Date/Result							
Immunizations⁶									
Influenza vaccine	Annually	Date							
Pneumococcal vaccine	Age <65; Repeat ≥ 65 (at least 5 yrs apart)	Date							
Tdap	Every 10 yrs	Date							
Shingles vaccine	One time at age 60	Date							
Hepatitis A	2 doses	Date							
Hepatitis B	3 doses	Date							
Child & Adolescent									
Immunizations	Refer to CDC Guidelines	Date							
Growth & Development ⁷	Every visit	Date							

¹ Diabetes education should address self-care behaviors including healthy eating, being active, monitoring, taking medication, problem solving, reducing risks and healthy coping. (From the American Association of Diabetes Educators 7 Self-Care Behaviors™ framework found at <http://www.diabeteseducator.org/ProfessionalResources/AADE7/>)

² Patient Health Questionnaire-2 (PHQ2, depression screen) and Patient Health Questionnaire-9 (PHQ9, depression diagnosis)

³ **Intensify management if:** Absent/stable cardiovascular disease, mild-moderate microvascular complications, intact hypoglycemia awareness, infrequent hypoglycemic episodes, recently diagnosed diabetes. **Less intensive management if:** Evidence of advanced or poorly controlled cardiovascular and/or microvascular complications, hypoglycemia unawareness, vulnerable patient (ie, impaired cognition, dementia, fall history).

⁴ Consider Nephrology or Endocrinology evaluation if CKD stage 3, proteinuria, elevated iPTH

⁵ Screening for Cervical Cancer: U.S. Preventive Services Task Force Recommendation Statement. *Ann Intern Med.* 2012;156:

⁶ Refer to CDC guidelines at <http://www.cdc.gov/vaccines/schedules/easy-to-read/index.html> for updates

⁷ Use WHO charts for years 0-2 and CDC charts for 2+ years age