

## STANDING ORDERS DIABETES MELLITUS – Type II

The following orders are in place for all patients with diabetes, under the name of the primary care provider, unless otherwise specified. The lab or clinic staff may order the following, under the name of the patient's primary care provider.

<b>LABORATORY TESTS</b>  <b>ICD Codes:</b>  <b>250.00 unless otherwise specified</b>	HbA1C at least 1 times a year or every 3 months if last A1C over 7 Fasting Lipid profile every 1 year or every six months if LDL over 100 Urine Microalbumin/Creatinine ratio every 1 year Creatinine every 1 year
<b>IMMUNIZATIONS</b>	Flu Shot (Influenza) every 1 year Tdap once, if patient < 65 years and Td every 10 years thereafter Pneumococcal Vaccine 1 time dose Revaccinate Pneumococcal Vaccine 1 time if the patient is: > 65 years old and if the 1 <sup>st</sup> dose was given at < 65 years and greater than 5 years ago
<b>REFERRALS</b>	Eye exam every 1 year (optometry, eye van, retinal camera or ophthalmology, depending on availability) Diabetes or nutrition education visit (offer every 1 year, if poor glycemic control)
<b>SELF MANAGEMENT GOAL SETTING &amp; SUPPORT</b>	Set Self-Management Goal (SMG) with patient at each visit and record on registry Health Coach call back for 2 to 3 weeks to review and refine self management goal
<b>DIABETIC SUPPLIES</b>	Order test-strip refills for patients through the pharmacy and in the clinic as prescribed by their primary provider, for patients who have been seen at least once in the last year (Type II diabetics – max 100/90 days unless pregnant or other justification for frequent testing). Test strips: Use _____ Disp# _____
<b>OTHER</b>	Update registry form and enter data Diabetes education material offered Discuss smoking cessation if indicated

<b>PCP name:</b>		
<b>Staff Name:</b>	<b>Staff Signature:</b>	<b>Date:</b>