

Patient Label/Stamp

Endocrinology Clinic

Fax: 504.903.1605

Fax this form with the Endocrinology master referral form when requesting an appointment.

Appendix: DIABETES MELLITUS

Indications for Specialty Care Referral

- All newly diagnosed diabetics and those who need a refresher course or who have not had education in > 2 years and are not at goal (Hgb A1C \leq 7) should be referred to Diabetes Education.
- Diabetics requiring intensive management (i.e. poorly controlled diabetics and those requiring one-on-one review for fine-tuning of medications, carbohydrate understanding, insulin start-up, pump therapy, and medication adjustment) should be referred to Diabetes Education.
- Patients with stable diabetes at goal (Hgb A1C \leq 7) should be managed by their primary care provider with referral to the Endocrinology Clinic reserved for specific problems in diabetes management.
- **Insulin pump patients will be followed on a routine basis in the Endocrinology Clinic to meet Centers for Medicare & Medicaid Services (CMS) criteria for continued pump management.**
- Significant Hypoglycemia

The following are required for referral. If not available in CLIQ please send copies of results with patient: Current within 6 months: CMP, fasting lipid panel, & Hemoglobin A1C; Current within one year: CBC; Spot urine for micro albumin/creatinine ratio; documented date of last eye exam: ___/___/___ or referral to Ophthalmology if exam has not been performed or is not scheduled; completed Comprehensive Foot Exam form.

	Result:	Lab Range:	Date:
Hemoglobin A 1 C	_____	___ - ___	___/___/___
Fasting Lipid Profile:			___/___/___
Cholesterol	_____	___ - ___	
HDL	_____	___ - ___	
LDL	_____	___ - ___	
Triglycerides	_____	___ - ___	
Serum CMP:			___/___/___
Sodium	_____	___ - ___	
Potassium	_____	___ - ___	
Chloride	_____	___ - ___	
CO2	_____	___ - ___	
BUN	_____	___ - ___	
Creatinine	_____	___ - ___	
Glucose	_____	___ - ___	
AST	_____	___ - ___	
ALT	_____	___ - ___	
Alk. Phos.	_____	___ - ___	
Calcium	_____	___ - ___	
T. Bilirubin	_____	___ - ___	
Albumin	_____	___ - ___	