

# Protocols for INITIAL DIABETES VISIT

## **NURSING will:**

Pull forms from plastic sleeve for clinic appointments with diabetic patients (Clinical, Lifestyle, PHQ9, Exercise Recs)  
Do \*\*\*Vitals and enter on clinical form: date, height, weight and blood pressure  
Ask patient to complete lifestyle survey and PHQ9 survey (patient to give completed forms to provider)  
Place clinical form and exercise recommendation form on top of chart for provider



## **PROVIDER will:**

Score PHQ-9 and provide appropriate follow-up recommendations  
**Ask if patient would like to enroll in the Full Circle Program**  
If appropriate: Order labs for diabetes check-up  
**If time allows:** Complete BOTH sides of Clinical Form; complete Exercise Recommendations; review Lifestyle Survey  
**If inadequate time:** Ask patient to schedule a diabetes appt to complete diabetes check-up (Clinical Form, Exercise Recommendations)

## **If patient is NOT interested, PROVIDER will:**

Indicate NO interest and date on Clinical Form  
Chart and date reasons for lack of interest  
Put DM forms on top of chart for filing by Medical Records

## **If patient IS interested, PROVIDER will:**

Indicate YES interest and date on clinical form  
Inform patient that case manager will contact for enrollment  
Put DM forms on top of chart  
Place chart in case manager mailbox  
Place signed diabetic labs in case manager mailbox



## **CASE MANAGER will:**

File DM forms behind DM Tab in chart  
Start Full Circle Diabetes Program folder for patient  
Copy lifestyle survey, PHQ9 and exercise recs for folder  
Copy clinical form for folder  
Enter pertinent data into diabetes registry  
Place file in IN-PROGRESS cabinet  
With incoming lab data, update clinical form  
Contact interested patient to complete consent and intake

# Protocols for FOLLOW-UP DIABETES VISITS

**\*\*\*NOTE: Case Manager will re-insert clinical form and lifestyle survey into plastic sleeves the month that a patient is due for their quarterly diabetes check-ups\*\*\***

## **NURSING will:**

Check plastic sleeve for clinical form and lifestyle survey for diabetic patients  
Do \*\*\*Vitals and enter on clinical form: date, height, weight, and blood pressure  
Ask diabetic patient to complete lifestyle survey (patient to give completed survey to provider)  
Note: clinical form should indicate that the PHQ9 and exercise recommendations were previously completed (only needed once per year)  
Place clinical form on top of chart for provider

## **PROVIDER will:**

If appropriate: Order labs for diabetes check-up  
**If time allows:** Complete FRONT of Clinical Form; Update BACK of Clinical Form only if new co-morbidities; Review Lifestyle Survey  
**If inadequate time:** Ask patient to schedule a diabetes appt to complete diabetes quarterly check-up (Clinical Form)  
As indicated, follow-up on PHQ9 and exercise recommendations  
Note whether patient is enrolled in Full Circle Program

## **If patient is NOT enrolled, PROVIDER will:**

Put completed DM forms on top of chart for filing by Medical Records

## **If patient IS enrolled, PROVIDER will:**

Put completed DM forms on top of chart  
Place chart in case manager mailbox  
Place signed diabetic labs in case manager mailbox

## **CASE MANAGER will:**

File DM forms behind DM Tab in chart  
Start quarterly update file for patient  
Copy lifestyle survey for file  
If indicated, copy PHQ9 & exercise recommendations for file  
Copy clinical form for file  
Enter pertinent data into diabetes registry  
Place file in QUARTERLY UPDATES cabinet  
With incoming lab data, update clinical form