



Lennox & Addington County  
General Hospital

Napanee Area  
Community Health Centre

**FAX COMPLETED FORM TO:  
613-354-6024**

## DIABETES EDUCATION PROGRAM REFERRAL FORM

### GENERAL INFORMATION:

Client Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day/ Month/Year

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ HC#: \_\_\_\_\_

Address: \_\_\_\_\_

Physician/RNEC: \_\_\_\_\_ Physician/RNEC Phone: \_\_\_\_\_

Date of Referral: \_\_\_\_\_ Physician/RNEC Fax: \_\_\_\_\_

### DIABETES HISTORY AND LAB DATA:

Diabetes Diagnosis:  Type 1  Type 2  IGT  IFG Date of DX: \_\_\_\_\_

FBG _____ mmol/L	Total CHOL _____ mmol/L
RBS/PC _____ mmol/L	LDL _____ mmol/L
HbA1C _____ %	HDL _____ mmol/L
OGTT _____ mmol/L	TC/HDL _____ mmol/L
ACR _____ mg/mmol	TG _____ mmol/L
eGFR _____ mL/min	BP _____ mmHg
Other(s) _____	

### PRESENT DIABETES MEDICATION:

### OTHER MEDICATIONS:

Medication:	Dosage	Time	Medication:	Dosage	Time

### PREVIOUS MEDICAL HISTORY:

### PSYCHOSOCIAL RISK FACTORS:

MI  CVA

CHF  Renal Disease

Neuropathy  Retinopathy

Hypertension  Hypothyroid

Other \_\_\_\_\_

Depression  Financial Issues

Alcoholism  Visual Deficit

Chronic Anxiety  Hearing Deficit

Illiteracy  Not suitable for  
Group Education

Other \_\_\_\_\_

**DIABETES EDUCATION**

**MANAGEMENT OF DIABETES:**

- Basic Level Management Plan includes education on the following:
- Meal Plan, Exercise & Lifestyle
  - Complications & Management of Diabetes
  - Foot Assessment and intervention as indicated
  - Random blood glucose for meter correlation (where available)

**INSULIN MANAGEMENT:**

- Insulin to be initiated as an outpatient
- All Oral Hypoglycemic Agents are to be stopped 24 hours before starting Insulin
- Oral Hypoglycemic Agent(s) to be continued as follows:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Prescribed Insulin	Dosage	Time	Prescribed Insulin	Dosage	Time

- I authorize the Diabetes Nurse Educator to adjust insulin according to the Insulin Adjustment Protocol or Medical Directive approved by the provider agency.<sup>[1]</sup>

Physician/RNEC Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PATIENT'S PREFERENCE - DIABETES EDUCATION SERVICE LOCATION**

- Napanee (Hospital)     Deseronto     Tamworth     Northbrook
- Napanee (Health Center- Downtown)     Amherstview     Other \_\_\_\_\_

**DEP OFFICE USE ONLY**

***Priority:***

- Patient contacted for an appointment and declined service.*

*Reason given:* \_\_\_\_\_

\_\_\_\_\_

*DEP Staff Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

[1] Lennox & Addington County's Diabetes Education Service provider agencies are Lennox & Addington County General Hospital and Napanee Area Community Health Centre.