

Diabetes Patient Care Sample Flow Sheet



Patient Name:		Type of Diabetes: ☐ T1 ☐ T2 ☐ Other	Date of Birth:	Date of Diagnosis:
RISK FACTORS, CO-MORBIDITIES			SELF-MANAGEMENT	
☐ Hypertension ☐ Coronary Artery Disease ☐ Dyslipidemia ☐ Peripheral Artery Disease ☐ Chronic Kidney Disease ☐ Polycystic Ovarian Syndrome ☐ Erectile Dysfunction ☐ Mental Health Diagnosis ☐ Foot Disease ☐ Smoking _____ (date stopped) ☐ Alcohol: _____ (assessed/discussed)			Patient goals: Possible barriers to self-management: Diabetes self-management education: ☐ Weight management Ht: Target Wt: Target BMI: ☐ Physical activity (aerobic 150 min/week; resistance 2-3 times/week): ☐ Glucose meter / lab comparison ☐ Patient care plan (pregnancy planning / driving license):	
VACCINATIONS				
Flu (annual) Date: Pneumococcus Date:				

VISITS (EVERY 3 TO 6 MONTHS)						
Date	BP	Weight	AIC Target ≤7% or -----	Notes (Goals, clinical status)	Hypo-glycemia	Antihyperglycemic agents / CV protection agents (ACEi / ARB / Stain / ASA)
Review SMBG records. Target: pre-prandial 4-7 mmol/L; 2-hour post-prandial 5-10 mmol/L (5-8 mmol/L if AIC not at target)						

SCREEN FOR DIABETES COMPLICATIONS ANNUALLY OR AS INDICATED										
Nephropathy			Neuropathy					Retinopathy		
Date	ACR	eGFR	• Check feet for lesions and sensation (10g monofilament or 128 Hz tuning fork) • Check for pain, ED, GI symptoms Date: Findings: Date: Findings: Date: Findings:					Annual eye exam:		
								Date:		
								Date:		
								Ophthalmologist/ Optometrist:		
For vascular protection: ☐ Statins if ≥ 40 yrs OR > 30 yrs and > 15 yrs duration OR end organ damage ☐ ACEi/AR ≥ if ≥ 55 yrs OR end organ damage (even in the absence of hypertension)			Lipids targets: If indicated to treat LDL_C _< 2 mmol/L					CAD Assessment		
			Date	Medication	LDL-C	HDL-C	TG	Non-HDL-C	Apo B	ECG:
										Stress ECG:
										Other:

