

Diabetes Optimal Care Cardiovascular Risk Reduction (DOC-CARE) EHR "MY CHART"

Patient Name: _____ DOB: _____ MR#: _____

Personalized Patient Centered Goals	Current	3 Months Ago	6 Months Ago	9 Months Ago	12 Months Ago
HbA1C <8 or <7 (uncomplicated DM) Patient-centered approach					
LDL <70 (for very high risk) or <100 (for all) Non-HDL <100 or <130 for very high risk or all, respectively If statin intolerance or can't reach above goal, aim for 30%-40% reduction from baseline Advanced lipid testing (selective patients)					
Blood Pressure <140/90 for all <130/80 may be optimal Minimum is more than 12 mm of SBP reduction from baseline					
Smoking Status If Yes, Ask/Assess/Assist/Arrange					
Aspirin Use Optional for primary prevention Essential for secondary prevention if not contraindicated.					
Weight/BMI/Waist Circumference					

Other Suggested Tools:

- Diabetes lab protocol Q3-6 months A1c, FLP every year or more (point of care A1c, lipids will be helpful) BMP, LFTs, TSH, Vitamin D level, etc.
- Urine for microalbumin (if elevated, look for other causes, treat and repeat)
- Monofilament foot exam (Semmes-Weinstein 5.07/10 gms), tuning fork 128-cps to assess vibration Q1 year
- Dilated eye exam Q1 year
- Dental exam early
- Diabetes medical nutrition by RD Q1 year or more
- Diabetes medical education by teaching nurse Q1 year or more
- Immunizations (Influenza, Hep B series, update Tdap, and polyvalent pneumococcal vaccine)

Godishala LM, et al. *Lipid Spin*. 2013;11:10.