

The Diabetes Specialty Clinic has established the following standardized criteria for referrals. To avoid delay in appointment scheduling, please ensure that all supporting information for the pre-determined outcome and/or condition is included with the Outpatient Referral Form **prior** to requesting the referral. Please mark the appropriate box(s) as indicated.

<u>CRITERIA FOR DIABETIC CLINIC DM TYPE I REFERRALS:</u> The Diabetes Specialty Clinic evaluates and treats patients with a hemoglobin A1C of 8% or greater despite multiple drug therapy, all young adults with DM TYPE I and pregnancy with DM. It is encouraged that all patients be referred to Diabetic Education class.

The results of the studies must be included with the referral request.

REQUESTED WORK-UP:

Α.	the last three (3) months and submit results with the referral request.
	1. Hemoglobin A1C
	2. □ Lipid Panel
	3. □ TSH

4. □ Chem Panel5. □ Spot Urine Microalbumin/Creatinine ratio

B. The Diabetes Education Referrals can be faxed to (909) 580-1634. The patient will be contacted by the Diabetes Education Department to schedule an appointment.