HELPING YOURSELF TO HEALTH

SMALL STEPS ARE THE START.

Point-of-Care Prediabetes Identification

METHOD 1:

If patient is age ≥18 and does not have diabetes, provide self-screening test (YMCA's Diabetes Prevention Program Eligibility Checklist). If self-screening test reveals risk, proceed to next step

Review medical record to determine if BMI ≥25 (≥22 if Asian) or history of GDM*

NO

If no: Patient does not currently meet program eligibility requirements

YES

Determine if a HbA1C, FPG or OGTT was performed in the past 12 month

NO

Order one of the tests below:
- Hemoglobin A1C (HbA1C)
- Fasting plasma glucose (FPG)
- Oral glucose tolerance test (OGTT)

RESULTS

YES

Diagnostic test	Normal	Prediabetes	Diabetes
Hba1C(%)	<5.7	5.7–6.4	≥6.5
Fasting plasma glucose (mg/dl)	<100	100–125	≥126
Oral glucose tolerance test (mg/dl)	<140	140–199	≥200

Normal	Prediabetes	Diabetes
Encourage patient to mantain a healthy lifestyle. Continue with exam/consult. Retest within three years of last negative test.	Refer to diabetes prevention program, myhealthyvt.org. Consider retesting annually to check for diabetes onset.	Confirm diagnosis retest if necessary. Counsel patient re: diagnosis. Initiate therapy.

Communicate with your local diabetes program.

Contact patient and troubleshoot issues with enrollment or participation.
At the next visit, ask patient about progress and encourage continued participation in the program.

Adapted from: New York Sate Department of Health. New York State Diabetes Prevention Program (NYS DDP) prediabetes identification and intervention algorithm. New York: NY Department of Health; 2012.

* GDM stands for gestational diabetes mellitus

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Referring Patients to a Diabetes Prevention Program

METHOD 1:

- Point-of-care identification and referral
- Download and display the patient handout
- Download and print the practice and patient resources included in this guide in advance of patient visits, so your office can have them available in the waiting room or during consult.

Measure

Step 1 — During check-in: If age ≥18 and patient does not have diabetes, give him/her the YMCA's "Can I Participate" form included in this toolkit. After patient completes the test and returns it, insert completed test in the paper chart or note risk score in the electronic medical record (EMR). Screening test can also be mailed to patient along with other pre-visit materials.

Step 2 — During rooming/vitals: Calculate the patient's body-mass index. Most EMRs can calculate BMI automatically. Review the patient's diabetes risk score and, if elevated (9 or higher), flag for possible referral.

Step 3 — During exam/consult: Follow the point-of-care prediabetes identification algorithm to determine if patient has prediabetes. If the blood test results do not indicate prediabetes:

Encourage the patient to maintain healthy lifestyle choices. Continue with exam/ consult.

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Act

A. If the patient screens positive for prediabetes and has BMI <25 (<22 if Asian):

- Introduce the topic of prediabetes by briefly explaining what it is and its relation to diabetes (use the handout "So you have prediabetes. Now what?"). Review the patient's own risk factors.
- Emphasize the importance of prevention, including healthy eating, increased physical activity, and the elimination of risky drinking and tobacco use.

B. If the patient screens positive for prediabetes and has BMI ≥25 (≥22 if Asian):

- Follow the step "A" above, discuss the value of participating in a diabetes prevention program, and determine the patient's willingness to let you refer him/her to a program.
- If the patient agrees, notify the Health Service Area's Regional Coordinator or call the YMCA at 802-652-8196.
- If patient declines, offer him/her a program handout with the website myhealthyvt.org and reevaluate risk factors at next clinic visit.

Step 4 — Referral to diabetes prevention program: Most diabetes prevention programs are configured to receive referrals via conventional fax (over a phone line) or secure email. Complete the referral form and submit to a program as follows: 802-652-8191 (secure fax) or email securely to ymcadpp@gbymca.org.

A. If using a paper referral form, as available in this toolkit, send via fax (over a phone line) or scan and email.

B. If the referral form is embedded in your EMR, either fax (over a phone line) or email using the EMR.

Physicians and other health care providers should also use their independent judgment when referring to a diabetes prevention program.

Partner

Step 5 — Follow-up with patient: Contact patient and troubleshoot issues with enrollment or participation. At the next visit, ask patient about progress and encourage continued participation in the program.