



**NEW FOR 2009!**

# New Mexico Adult Diabetes Practice Guideline

<b>Every visit</b>	
Take interval history	• Review glucose testing log, hypoglycemic episodes, and tobacco use
Measure blood pressure	• BP goal is <130/80 mmHg
Obtain weight	• Weigh and calculate BMI. Consider measuring waist circumference
Perform interval foot exam	• Inspect skin for signs of pressure areas and breakdown
Advise, review, adjust and/or administer medications	<ul style="list-style-type: none"> <li>• Glucose lowering medications</li> <li>• HTN therapy includes ACEI/ARB; diuretic type based on GFR*</li> <li>• ACEI/ARB for nephropathy</li> <li>• Lipid lowering drugs as needed</li> <li>• Aspirin prophylaxis, age &gt;40 or with CVD risk factors -weigh risk/benefit</li> <li>• Vaccines - Influenza &amp; Pneumococcal</li> </ul>
<b>Quarterly to semi-annually</b>	
Test A1C	Goal A1C <7% appropriate in general. Lower A1C may be appropriate for selected patients, as long as significant hypoglycemia is avoided. Setting an A1C goal >7% may be preferable for patients with advanced diabetes complications, CVD, co-morbidities, reduced life span, or significant hypoglycemia*
<b>At least once each year</b>	
Review patient knowledge of nutrition and self-management	<ul style="list-style-type: none"> <li>• Provide or refer: training in self-management, nutrition, physical activity</li> <li>• Counsel on importance of scheduling regular dental exams</li> </ul>
<b>Annually</b>	
Perform complete foot assessment	• Inspect, check pulses, conduct monofilament exam
Perform nephropathy screening	<ul style="list-style-type: none"> <li>• For patients without known nephropathy, screen for microalbuminuria Normal: &lt; 30 mcg of albumin per mg creatinine</li> <li>• Measure serum creatinine to estimate GFR</li> <li>• If nephropathy present, treat and monitor, or refer to nephrology</li> </ul>
Obtain lipid profile	<ul style="list-style-type: none"> <li>• Primary goal: LDL &lt; 100 mg/dl. LDL &lt; 70 mg/dl if CVD or high risk</li> <li>• Desirable: HDL &gt; 40 mg/dl* Triglycerides &lt; 150 mg/dl</li> </ul>
Arrange retinal eye exam	• Dilated retinal exam by eye care professional*

This guideline is based on the recommendations of the American Diabetes Association and summarizes core care elements appropriate to most adults with diabetes. This guideline should not be construed as representing standards of care nor a substitute for individualized evaluation and treatment based on clinical circumstances. This guideline was developed by *New Mexico Health Care Takes On Diabetes*, a non-profit corporation comprising a broad coalition of New Mexico diabetes care professionals, New Mexico Health Plans, the New Mexico Department of Health and the New Mexico Medical Review Association.

\*See [www.nmtod.com](http://www.nmtod.com) or [www.diabetes.org](http://www.diabetes.org) for definitions and additional details.

Copyright 2009 by New Mexico Health Care Takes On Diabetes. Permission for use may be obtained at 505.796.9121. These materials were developed under a contract with the State of New Mexico, Department of Public Health, Division of Public Health.

Albuquerque Area Indian Health Service American Diabetes Association American Diabetes Association, New Mexico and El Paso Area  
 American Heart/American Stroke Association—New Mexico Blue Cross and Blue Shield of New Mexico Lovelace Clinic Foundation Lovelace Health Plan  
 Lovelace Insurance Company Lovelace Health System Molina Healthcare of New Mexico New Mexico Academy of Family Physician New Mexico Academy of Ophthalmology  
 New Mexico Association for Home and Hospice Care New Mexico Chapter, American College of Physicians New Mexico Dental Association New Mexico Department of Health  
 New Mexico Diabetes Advisory Council New Mexico Dietetic Association New Mexico Hispanic Medical Association New Mexico Hospital and Health Systems Association  
 New Mexico Human Services Department, Medical Assistance Division New Mexico Medical Review Association New Mexico Medical Society New Mexico Optometric Association  
 New Mexico Podiatric Medical Association New Mexico Primary Care Association New Mexico Public Health Association New Mexico VA Health Care System  
 Presbyterian Health Care Services Presbyterian Insurance Company UnitedHealthcare—New Mexico  
 University of New Mexico Health Sciences Center Zia New Mexico Association of Diabetes Educators (ZADE)

Molina Healthcare Clinical Quality Improvement Committee (CQIC) Review / Approval Date: 6/05, 4/06, 10/07, 11/08. Quality Improvement Committee (QIC) Review Approval Date: 4/09  
 All CPGs are routinely reviewed at least every two years. Reviews will occur more frequently when new scientific evidence or national standards are published before the two-year review date. Refer to the Molina Healthcare Website at [www.molinahealthcare.com](http://www.molinahealthcare.com) for the most up to date information on this CPG.