

REMINDER: BRING THIS CARD WITH YOU TO ALL DOCTOR APPOINTMENTS

Checkpoints	ACE Standards		Patient Goals*	Date	Date	Date	Date	Date	Date
	Goal	How Often							
Blood Pressure	< 130/80	Every Visit							
Foot Exam		Every Visit							
Weight/BMI	BMI < 25	Every Visit							
A1C	≤ 6.5%	Quarterly							
Eye Exam (Dilated)	None, NPDR, PDR, ME, Other. Physician to fill-in.	Yearly		Laser Y N	Laser Y N	Laser Y N	Laser Y N	Laser Y N	Laser Y N
HDL	> 40 mg/dl	Yearly							
LDL Cholesterol	< 70 mg/dl	Yearly							
Triglycerides	< 150 mg/dl	Yearly							
Urine Test (Microalbumin)		Yearly							
Diabetes Education	Annual Refresher	As Needed							
Nutritional Counseling	Annual Refresher	As Needed							
Self Monitoring Blood Glucose	B <110 , A <140 mg/dl	As Needed							

*Goals are based on current ACE guidelines or from current available evidence for each risk factor. Check with your physician to select your appropriate goals.

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