Appendix F

Checklist for Diabetic Visit

**DIABETIC CHECKLIST**

\_\_\_\_\_ Labs ordered per standing orders

\_\_\_\_\_ Foot exam on each visit

\_\_\_\_\_ Last eye exam documented

\_\_\_\_   BMI documented

\_\_\_\_\_ Blood pressure documented

\_\_\_\_\_ Tobacco HX documented

\_\_\_\_\_ Diabetic Report Card printed

\_\_\_\_\_ Referral for nutritional Telemed

**Completion Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**