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# The Atlantic Provinces Medical Peer Review



## MANAGEMENT OF SPECIFIC DISEASE ENTITIES

### Endocrinology/Family Medicine/Internal Medicine # 5

#### TYPE II DIABETES MELLITUS

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It is important to note that these guidelines are meant to be of assistance to assessors in making observations. They should not be taken as standards of any of the Atlantic Provinces Licensing Authorities.

##### Screening:

- all patients over age 40 should be screened via FBG every three years
- more frequent screening for patients with risk factors: 1<sup>st</sup> degree relatives with DM; member of high risk population (Aboriginals); history of impaired glucose tolerance; vascular disease; history of gestational DM; hypertension; dyslipidemia; obesity

##### Therapies:

- referral to dietician or diabetic education centre
- treat to accepted target levels of A1C's; A1C monitoring every three months
- appropriate use of medications ( Metformin in contraindicated in renal impairment)
- patient self-monitoring of blood glucose recommended
- regular ophthalmology referral
- annual urine test for micro-albuminuria

##### Complications monitoring:

- retinopathy: loss of vision; nephropathy: renal failure
- neuropathy: any neurologic symptoms or signs
- lower limb complications: foot sores or amputations

	N/A	E	S	D
Documentation of appropriate screening is evident.				
Appropriate therapies and referrals are being used.				
Patients are actively involved in their own care.				

COMMENTS: \_\_\_\_\_

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