Ambulatory Referral to Duke Adult Diabetes Education Program

Select desired clinic location: Duke Hospital Endocrine Clinic 1A (Durham)Brier Creek Endocrine Clinic (Raleigh)			
Patient Information: Name	DOB _	MRN	J.
Diagnosis:	DMGestational DM		
Reason for Referral /Provid	der Comments:		
Identify Barriers to group 6	education education		
No barriers >>>>>Identified barriers >>>Low Literacy	• —		Mental Health issue
Requires oxygen	Language barrier	Eating disorder	Learning disabled
			Iother
*GROUP CLASSES:			
• Diabe	tes Getting Savvy Class (#202 tes Nutrition and Carb Count Diabetes/PCOS (#20425)	=	
**INDIVIDUAL CONSULTS:			
· · · · · · · · · · · · · · · · · · ·	nsive Diabetes Education Prourse Education (#199) PLUS		-
Appointment with NURSE EDUCATOR (RN)		Appointment with DIETITIAN EDUCATOR (RD)	
□ Diabetes Nurse Education (#199) Select reason for visit below: Newly Diagnosed Diabetes Recent diabetes related hospitalization Insulin Instruction Frequent hypoglycemia Diabetes & Pregnancy Change in diabetes treatment plan Other		□ Nutrition Education (#304) Select reason for visit below: Diabetes Meal Plan / Carb Counting Insulin to Carb Ratio Reactive Hypoglycemia Gastroparesis with diabetes Celiac Disease with diabetes Renal Disease with diabetes Elevated lipids with diabetes Diabetes & Pregnancy Gestational Diabetes Other	
Referring Provider (print/s	ign)		_
	completed on (date):		

Please fax referral to Duke University's Endocrine appointment Hub: 919-479-2661