Pre-Diabetes Clinic DecisionPath 2/04

Diagnostic Criteria for Pre-Diabetes and Diabetes
Pre-Diabetes (Pre-DM)- fasting plasma glucose 100-125 mg/dL and/or 2-hr OGTT value 140-199 mg/dL
Diabetes (DM)- fasting plasma glucose ≥ 126 mg/dL and/or 2 hr OGTT value ≥ 200 mg/dL and/or casual plasma glucose ≥ 200 mg/dl with symptoms of diabetes

Patient screened for Pre-Diabetes or Diabetes using capillary blood glucose

Is capillary blood glucose value ≥120 mg/dL? (or ≥110 if fasting > 8 hrs)

NO → Repeat screening for Pre-Diabetes and/or diabetes annually; consider screening for other components of Dysmetabolic Syndrome X: dyslipidemia, HTN, microalbuminuria, insulin resistance, acanthosis nigricans, PCOS, hyperuricemia
See *SDM Detection and Treatment Quick Guide*

YES

Refer Patient for laboratory fasting plasma glucose (FPG)

Is laboratory FPG value ≥100 mg/dL?

NO → Repeat screening for Pre-Diabetes and/or diabetes annually; consider screening for other components of Dysmetabolic Syndrome X: dyslipidemia, HTN, microalbuminuria, insulin resistance, acanthosis nigricans, PCOS, hyperuricemia See *SDM Detection and Treatment Quick Guide*

YES

If FPG ≥126 mg/dL - confirm diagnosis of diabetes with subsequent FPG
see SDM Detection and Treatment Quick Guide
If FPG 100-125 mg/dL - diagnosis of Pre-Diabetes (Pre-DM)

Start Medical Nutrition Therapy for Pre-Diabetes
1. Provider Assessment - assess for fitness level, CVD pharmacotherapy and dysmetabolic syndrome
2. Referral to RD - provide food plan and nutrition education
3. Referral to Fitness Coordinator - provide activity/ exercise planning and education
4. Referral to RN/Educator - provide self management education (SMBG, medication)

***Metformin Precautions and Contraindications**
- Pregnancy and lactation
- Risk of lactic acidosis in patients with:
  - Renal disease (serum creatinine >1.4 mg/dL)
  - Liver dysfunction
  - Alcohol abuse, binge drinking
  - Acute or chronic metabolic acidosis
  - Acute cardiovascular or pulmonary disease
  - In patients >80 years old unless creatinine clearance demonstrates renal function not impaired
- Patients with CHF who require pharmacologic treatment
- Intravenous radiographic contrast agents

Side effects:
Usually dose related and self-limited.
Common - diarrhea, nausea, and abdominal discomfort; Occasional - metallic taste

Are any of the following criteria met: BMI >35 kg/m^2; Age <45; FPG 110-125 mg/dL?

NO → Are 2 of any of the following criteria met: BMI 30-35kg/m^2; Age 45-60; FPG 95-109mg/dL?

YES → Consider offering Metformin Therapy

NO → Continue Medical Nutrition Therapy; Follow-up - Provider, RN, RD within 6 months

YES

Offer Metformin Therapy
1. Review contraindications for Metformin*
2. Starting Dose - 850 mg qd
3. Final dose - increase dose in 1-2 weeks to 850 mg bid based on tolerability
3. Follow-up - Provider, RN, RD within 6 months

Customize for Bemidji Area IHS - Staged Diabetes Management™ - International Diabetes Center