

My Diabetes Information Report

The report on page 2 has items of information about your diabetes.

Each item is a measure or test and has a description explaining what it is. It shows the latest result over the last 15 months. Ideally they should be less than 12 months old. If a test hasn't been done or is out of date, please get it done as soon as possible. You may not be getting the correct care or treatment if out of date information is used.

It then gives you the guidance based on your results so you can work out if the situation is "Good", "Borderline" or "Of Concern". You may already be aware of this and you may already be on the correct treatment plan. In any case, judge whether you understand what the result means and whether you need to do something about it.

If you are still not clear about the result, or feel action is needed, see your GP team for advice - ask for a routine appointment (not urgent) with your GP surgery.

My Diabetes Plan

Having worked through your information in "My Information" and having come to your own view about each item of diabetes care, please look at "My Plan".

Again there are a number of sections. Decide where you stand on each of them - mark down if it is "Good", "Borderline" or "Of Concern".

Decide where you would like to be. For example - what level of diabetes glucose control or blood pressure control are you aiming for? Always think of what is best for you in your situation. Then think about what you might need to do to get there and try and make a plan. Use this plan to improve your diabetes care. Feel free to use it with your diabetes team to help them understand your worries and your needs.

You may have other items of concern - please make a list of them as needed. There is space for you to make further notes and comments if you wish.

Definitions

Good = the result is satisfactory and acceptable with no need to worry. Lower risk.

Borderline = should be better and adjustments need to be made. Medium risk

Of Concern = in definite need of improvement and further testing and must be kept under close review. Higher risk.

Patient Name & Address

Dear Patient Name DOB 1/1/1900; Hosp No. A123456; NHS No.123 456 7891

My Diabetes, My Information, My Plan

We are writing to you on behalf of local NHS services delivering diabetes care in Wolverhampton.

This letter has important information about your diabetes.

Please use it to understand your diabetes and what you may need to do or to change in order to improve your health.

You can also use it when you see your GP or practice nurse, the hospital diabetes service or other health professionals. Please feel free to ask them questions about things that concern you or that you don't understand. You can work through this report with them. Use it to raise any concerns or questions you have. You and your health care team will find this helpful in making the best plan for your health care, a plan that will more suit your needs.

That's why this is called "My Diabetes, My Information, My Plan".

On the following pages you will find:

- **Guidance notes (back page).**
- "My Diabetes Information" - a report covering all of your diabetes results and examinations (page 2).
- "My Diabetes Plan" - a plan maker to help you to assess or judge your own diabetes care and make a plan of action if it's needed (page 3).

If you do not have diabetes or you feel this letter should not have been sent to you, please kindly let us know by phoning on **01902 695629**.

My Diabetes Information Report

Symbols: “<” means “less than” and “>” means “more than”

The levels that are in keeping with “Good” or “Of Concern” are shown

Measure or Result (Good, Of Concern)	Value	Clinical Comment	What is it?
Weight	73.4	See BMI	Measure of weight in kilograms
BMI (<25, >30)	32	Of concern	Weight in relation to height
Blood pressure (<140, >160)	167	Of concern	Blood pressure (top number).
Cholesterol or Chol to HDL ratio (<4.5, >5.5)	5.6	Borderline	Blood test of cholesterol or cholesterol corrected for “good” HDL cholesterol if known
Smoker (Non-smoker)	No	Good	Question of smoking status
Blood vessel circulation risk Primary / Secondary	Primary	Good	Circulation risk. Primary means no circulation illness. Secondary means heart, stroke, leg or foot circulation problems.
Primary Risk Score (<15%, >30%) Framingham	24%	Borderline	Calculation of blood vessel circulation risk over 10 years.
Eye Exam	No Changes	Good	Test for diabetes changes at the back of the eye by photography.
ACR (< 3.5, >10)	15.7	Of concern	Urine protein test for early diabetes changes in kidneys.
Creatinine (<120, >150)	138	Of concern	Blood test of kidney function.
Foot exam	Low risk	Good	Test for nerve or circulation damage.
HbA1c DCCT (< 7.5%, >8.5%)	7.2	Good	Blood test of long term diabetes or “Sugar” control.
HbA1c IFCC (< 58, >69)	55	Good	Same as above but using new units of measure (as above).

My Diabetes Plan

My opinion Where do I stand? Circle your status in each box	My Feelings Where do I want to be?	My Plan What steps should I take?
My Lifestyle (Diet, exercise, smoking) Good, Borderline, Of Concern		
My BMI (Weight) Good, Borderline, Of Concern		
My Blood Pressure Good, Borderline, Of Concern		
My Cholesterol Good, Borderline, Of Concern		
My Circulation Risk Good, Borderline, Of Concern		
My Eyes Good, Borderline, Of Concern		
My Kidneys Good, Borderline, Of Concern		
My Feet Good, Borderline, Of Concern		
My HbA1c (sugar control) Good, Borderline, Of Concern		
My Hypo Risk (risk of low blood sugars) Low, Medium, High		
My Medication Good, Borderline, Of Concern		
My Diabetes Know how Good, Borderline, Of Concern		
My Well-being Good, Borderline, Of Concern		
Other:		
Other:		
My Comments:		