



FACTS THAT CONCERN YOUR DIABETES CARE

At Upper Peninsula Health Plan we believe that having routine care will help to prevent problems. At your next visit talk to your doctor about the items below* and *together fill in the dates* to help you keep track. **Please save this letter and take it with you.**

A **HbA1c lab test** done about every three months to check your blood sugar control.

Due next: _____;

A **lipid panel lab test** including the 'bad' (**LDL**) and the "good" (**HDL**) cholesterol, and the level of fat (**triglycerides**), done at least once a year.

Due next: _____;

A **dilated eye exam** done, *by either an ophthalmologist or an optometrist*, once a year.

Due next: _____;

A **urinalysis or microalbuminuria lab test** may be done yearly to check for kidney disease. Ask your doctor if these tests are needed.

Due next: _____;

• ***NEXT DIABETIC CHECK-UP DUE:*** _____.

We ask that, at your doctor's visits, you be prepared to:

- **Take your shoes and socks off** for a foot exam,
- Discuss the issues of **pneumonia vaccination, flu shots, and aspirin use.**
- Discuss **dietary** and **exercise needs.**
- Bring your **blood sugar diary and glucose monitoring equipment** with you.
- Review your **medications** and any **need for more supplies.**

If you use tobacco, please make every effort to quit. Talk to your doctor about how you are doing with this.

Your doctor may want you to follow different guidelines. Discuss these issues with *your* doctor!

Please don't put this matter off. If you have not had routine diabetic care, please schedule a visit now. We urge *you* to take an active part by keeping track of when you need care.

Prevention is the best medicine!

*Based on recommendations from the American Diabetic Association and Michigan Association of Health Plans.