

# SAMPLE PRESCRIPTION FORM

## DIABETES TOPICS

### *Intro/Anatomy*

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- Introduction
- Healthy Insulin Function

### *Diagnosis*

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|--|---|---|---|
| <input type="checkbox"/> Introduction          | <input type="checkbox"/> Hyperglycemia                    | <input type="checkbox"/> Foot Problems        | <input type="checkbox"/> Cellulitis                         |
| <input type="checkbox"/> Type I Diabetes       | <input type="checkbox"/> Hyperosmolar Nonketotic Syndrome | <input type="checkbox"/> Infections           | <input type="checkbox"/> Diabetic Dermopathy                |
| <input type="checkbox"/> Type II Diabetes      | <input type="checkbox"/> Hypoglycemia                     | <input type="checkbox"/> Kidney Disease       | <input type="checkbox"/> Fungal Infections                  |
| <input type="checkbox"/> Gestational Diabetes  | <input type="checkbox"/> Bladder Problems                 | <input type="checkbox"/> Neuropathy           | <input type="checkbox"/> Necrobiosis Lipoidica Diabeticorum |
| <input type="checkbox"/> Secondary Diabetes    | <input type="checkbox"/> Cardiovascular Disease           | <input type="checkbox"/> Periodontal Disease  | <input type="checkbox"/> Xanthomas                          |
| <input type="checkbox"/> Diabetic Ketoacidosis | <input type="checkbox"/> Erectile Dysfunction             | <input type="checkbox"/> Acanthosis Nigricans |   |
| <input type="checkbox"/> Hyperglycemia         | <input type="checkbox"/> Eye Disease                      |   |   |

### *Diagnostic Tests*

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- Glucose Tests
- Hemoglobin A1C

### *Treatment Options*

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|---|--|---|---|
| <input type="checkbox"/> Introduction         | <input type="checkbox"/> Self-Injection Procedure: Single Dose | <input type="checkbox"/> Biguanides         | <input type="checkbox"/> Treatment for Erectile Dysfunction |
| <input type="checkbox"/> Insulin Introduction | <input type="checkbox"/> Self-Injection Procedure: Mixed Dose  | <input type="checkbox"/> Meglitinides       | <input type="checkbox"/> Treatments for Nephropathy         |
| <input type="checkbox"/> Injection Devices    | <input type="checkbox"/> Medications Introduction              | <input type="checkbox"/> Sulfonylureas      | <input type="checkbox"/> Treatments for Neuropathy          |
| <input type="checkbox"/> Insulin Pumps        | <input type="checkbox"/> Alpha-Glucosidase Inhibitors          | <input type="checkbox"/> Thiazolidinediones | <input type="checkbox"/> Treatment for Retinopathy          |

### *Prevention & Lifestyle Modification*

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|--|--|---|--|
| <i>Diet</i>                            | <input type="checkbox"/> Emotions                      | <input type="checkbox"/> Ketone Testing | <input type="checkbox"/> Traveling with Diabetes |
| <input type="checkbox"/> Diet          | <input type="checkbox"/> Exercise                      | <input type="checkbox"/> Losing Weight  | <input type="checkbox"/> Women and Diabetes      |
| <input type="checkbox"/> Eating Out    | <input type="checkbox"/> Foot Care                     | <input type="checkbox"/> Skin Care      |  |
| <input type="checkbox"/> Meal Planning | <input type="checkbox"/> Intensive Diabetic Management |   |  |
| <input type="checkbox"/> When to Eat   |  |   |  |

### *Conclusions & Surveys*

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|-------------------------------------|--------------------------------|--------------------------------|--|
| <input type="checkbox"/> Conclusion | <input type="checkbox"/> SF-12 | <input type="checkbox"/> SF-36 | <input type="checkbox"/> Test Your Knowledge |
|-------------------------------------|--------------------------------|--------------------------------|--|

