**Checkpoints** | **AACE Standards** | **Patient Goals** | **Date** | **Date** | **Date** | **Date** | **Date** | **Date** | **Date**
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**Goal** | **How Often** | **Blood Pressure** | $< 130/80$ | Every Visit |  |  |  |  |  |  
**Foot Exam** |  | Every Visit |  |  |  |  |  |  |  |  
**Weight/BMI** | BMI $< 25$ | Every Visit |  |  |  |  |  |  |  |  
**A1C** | $\leq 6.5\%$ | Quarterly |  |  |  |  |  |  |  |  
**Eye Exam (Dilated)** | None, NPDR, PDR, ME, Other, Physician to fill-in. | Yearly | Laser Y N | Laser Y N | Laser Y N | Laser Y N | Laser Y N | Laser Y N | Laser Y N |  
**HDL** | $> 40$ mg/dl | Yearly |  |  |  |  |  |  |  |  
**LDL Cholesterol** | $< 70$ mg/dl | Yearly |  |  |  |  |  |  |  |  
**Triglycerides** | $< 150$ mg/dl | Yearly |  |  |  |  |  |  |  |  
**Urine Test (Microalbumin)** |  | Yearly |  |  |  |  |  |  |  |  
**Diabetes Education** | Annual Refresher | As Needed |  |  |  |  |  |  |  |  
**Nutritional Counseling** | Annual Refresher | As Needed |  |  |  |  |  |  |  |  
**Self Monitoring Blood Glucose** | B $< 110$ , A $< 140$ mg/dl | As Needed |  |  |  |  |  |  |  |  

*Goals are based on current AACE guidelines or from current available evidence for each risk factor. Check with your physician to select your appropriate goals.*
DEFINITIONS AND EXPLANATIONS

**A1C**: Blood test that measures how well your blood sugar has been controlled over the previous few months.

**BMI (Body Mass Index)**: A number that shows body weight adjusted for height. Visit www.powerofprevention.com to calculate your BMI.

**Eye Exam**: Have your eye doctor complete this section.

- **P** = Proliferative
- **NP** = Non-Proliferative
- **ME** = Macular Edema
- **DR** = Diabetic Retinopathy

**Foot Exam**: Check your feet daily and show your doctor any areas of concern, like sores that don’t heal.

**Self Monitoring Blood Glucose**: Main method for checking your blood sugar at any one time.

- **B** = Before eating (pre-prandial)
- **A** = After eating (two-hour post-prandial)

**Yearly**: At least once a year or more often if determined by your physician.

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**DIABETES PASSPORT**

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