Cardiometabolic teleECHO™ Clinic

Patient Recommendation Form

Presentation Date: sept 21 , 2022   **Presenter name:** Jessica Karp, MD

Presenter Facility Healthpoint

- **Case Recap 40 y/o female with uncontrolled DM (a1c 10.2) BMI 38 (weight 98kg) and hyperlipidemia in setting of hx of iron deficiency anemia. Pt has sig frustration with diabetes and sometimes lapses of health care and challenges with nutrition in setting of being a manager at fast food restaurant. She also has symptoms of hypoglycemia with sugars in120's but limited current glycemic data (Pending CGM)**
-

    - Metformin 1000mg BID
    - Glipizide 10mg BID
    - Empagliflozin 25mg daily
    - Liraglutide 1.8mg daily
    - Glargine 40 units daily
    - atorvastatin 40 mg

Case Recommendations:

- Normalize and validate patient's feelings of being "tired and angry" about taking medications. These reactions are understandable and expected for a person with diabetes.

- Have patient complete Diabetes Distress Scale. This will allow you and your patient have a better understanding of what particular areas of living with and managing T2D are psychologically demanding for her. This can open a dialogue between you both in understanding her perspectives, extent/quality of support around health behavior changes from family members, and identifying areas in which to intervene (e.g., goal setting).

- Learn more about her history with T2D, what were her reactions to the diagnosis, and learn more about her attitude towards having T2D, especially given familial history, including belief that a parent died of T2D. There could be aspects of helplessness and hopelessness there that is influencing her diabetes self-management.

- Recommend the book, Diabetes Burnout: What to do When You Can't Take It Anymore by William Polonsky, Ph.D., CDCES. The organization Taking Control of Your Diabetes (TCOYD: www.tcoyd.org) is also another great resource.

- Educate patient on sensations of hypoglycemia versus the three Levels of Hypoglycemia. Ask her questions re hypoglycemia anxiety to determine if that is contributing to her having higher BGs (e.g., is she wishing to avoid those "bad" feelings she has had with BGs at 120 mg/dl?).

- Educate patient on hyperglycemia symptoms and how it might be contributing to her energy level.

- Highlight and reinforce what the patient is doing well at now in terms of safe diabetes self-management. Review with patient what she had been successful at doing prior to 2018 re diet and exercise to identify possible starting points for this patient on possible health behavior changes. Identify what has changed or what are the barriers for her now. When setting goals and how to integrate into to her daily life, keep in mind that she has a variable work schedule given she is a fast-food restaurant manager. Keep in mind that expectations and goals of both the patient and yourself are realistic given the number of stressors she is experiencing. This goes for diabetes self-care and weight management goals.

- Consider using SMART format to create goals. See below for additional information.

- Continue to monitor for depression and anxiety. Refer to behavioral health services, accordingly. Please see Kate Davis, MSW, LICSW's recommendations.

- Finally, the type of words/phrases used regarding patients with diabetes and diabetes management has an impact. Please consider reading the article, "The Use of Language in Diabetes Care and Education" to inform yourself on the evolution towards patient-centric terms.

Getting the Most Out of Your Appointment

- Review patient's progress in safe diabetes self -management since last appointment.

- Identify challenges patient has had with safe diabetes self -management since last appointment

- Identify goals the patient can work towards to improve self-management

SMART Goals	
Specific	Set a concrete, clearly defined goal with specific points of success
Measurable	Define the evidence that will be used to show progress. Goals should have a quantifiable outcome or "success metric" so you and the patient know, with certainty, if the goal has been achieved
Achievable	Determine whether the goal can be reasonably accomplished within a defined time frame
Relevant	Identify how the goal aligns with patient's values and long-term objectives
TimeBased	Set a realistic end date for the goal

UW Medicine
DEPARTMENT OF PSYCHIATRY
AND BEHAVIORAL SCIENCES

CONFIDENTIAL – DO NOT

-