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| 1. EFFECTIVE DATE:
 | March 1, 2019 |
| 1. PURPOSE
 | To establish guidelines for ordering and documenting hemoglobin A1C within the patient record for patients with an established Diabetes diagnosis being seen in the Ambulatory Medical Practices. |
| 1. STANDING ORDER
 | Perform Hemoglobin A1c testing for all patients who meet criteria. |
| 1. SCOPE
 | For the UMG Medical Office Practices and the John Dempsey Hospital Medical Office Practices.  |
| 1. AUTHORIZED USERS
 | All clinical staff who have demonstrated competency. |
| 1. CRITERIA
 | Patient has;* Established diagnosis of diabetes mellitus.
* A1c has not been performed in the last 3 months.
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| 1. MATERIALS NEEDED
 | Sterile LancetStandardized instrumentProcedure gloves2 x 2 gauzeAlcohol prep swabAdhesive bandage |
| 1. PROCEDURE
 | 1. Confirm the patient meets the standing order criteria.
2. The clinical staff performs the finger stick hemoglobin A1c using the standardized equipment per manufacturer’s instructions.
3. Initiate the order for Hemoglobin A1c, in the patients record, using the diagnosis code **E10.9 (type 1 Diabetes**) or **E11.9 (type 2 Diabetes)**
4. Record the finger stick Hemoglobin A1c results in the patient record.
5. Practitioner will authenticate the order following review of results.
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| 1. ATTACHMENTS
 | None |
| 1. REFERENCES
 | None |
| 1. SEARCH WINDOW
 | Diabetes, HB A1c |
| 1. COMMITTEE APPROVALS
 | Clinical Council \_\_\_October 23, 2018\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date)Medical Board \_\_\_November 7, 2018\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Date) |
| 1. FINAL APPROVAL:
 | 1.Denis Lafreniere 3/8/2019Denis Lafreniere, MD, FACS DateProfessor and Chief, Division of OtolaryngologyAssociate Dean of Clinical AffairsMedical Director, UConn Medical Group2. Anne D. Horbtauck 3/18/2019Anne D. Horbatuck, RN, BSN, MBA DateVice PresidentAmbulatory Services3. Ann Marie Capo 3/7/2019Ann Marie Capo, MS, BSN, RN                          Date        Vice President Quality & Patient                            Services, Chief Nursing Officer                        4. Scott Allen 3/7/2019 Scott Allen, MD DateChief Quality OfficerMedical Director, Clinical Effectiveness and            Patient Safety, Patient Safety Officer |
| 1. REVISION HISTORY:
 | 1. Approved: 08/2014
2. Revised 04/2018, 10/2018, 2/2019
3. Reviewed 04/2018
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END OF STANDING ORDER