

*[P-176D] Impact of a diabetes complications screening clinic on provider practice patterns*

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*This study evaluated the compliance of primary care providers with American Diabetes Association (ADA) and Diabetes Quality Improvement Project (DQIP) standards of care after receiving information provided by a diabetes Complications Screening Clinic (CSC). Medical records for all patients enrolled in the diabetes CSC at a Veterans Affairs Medical Center between January and August 1999 were reviewed. Changes in therapy for diabetes, dyslipidemia, and hypertension were documented and compared with expected changes using national guidelines. Of the 264 medical records reviewed, 46% of patients had HgA1c values >8.0%, and of those, 50% had no documented change in therapy. 63.3% of patients had a non HDL >130 mg/dL (corresponding to an LDL >100 mg/dL), and of those, 86% had no documented change in therapy. 76.2% of patients had a systolic blood pressure (SBP) >130 mmHg and 16.3% had a diastolic blood pressure (DBP) >85 mmHg. 66% of patients with a SEP >130 mmHg had no documented change in therapy, as well as 38% of patients with a DBP >85 mmHg. The following had no documentation of ancillary care: 57% for eye care, 73% for foot care, 68% for diet/exercise management, 91% for patient education and 90% for treatment of depression. In conclusion, primary care providers do not routinely act on information that is passively presented; therefore, a majority of patients fall short of nationally accepted goals of therapy. These results indicate a need for provider education or possibly initiation of protocol driven changes by CSC providers.*