

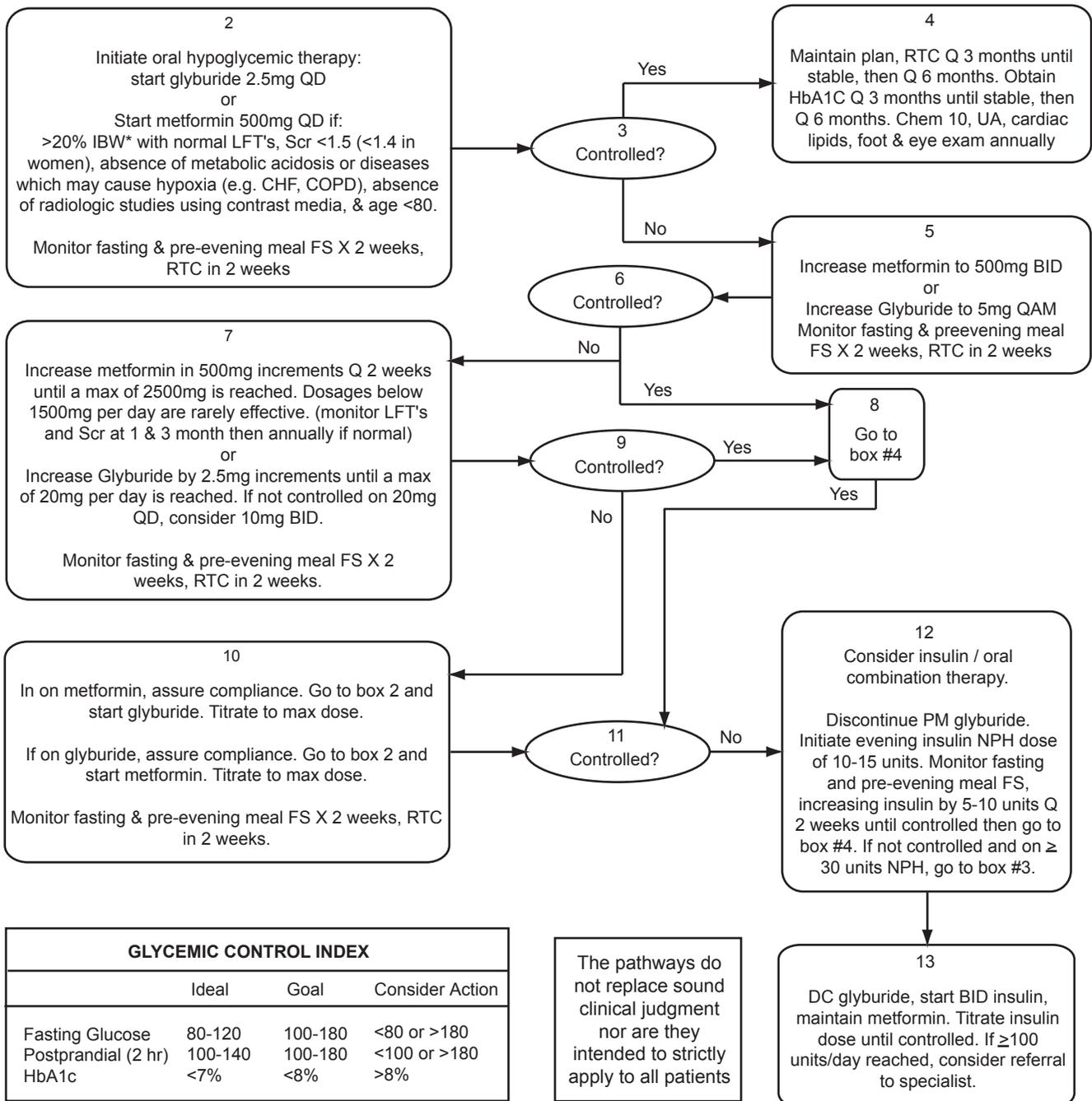
## Type 2 Diabetes Mellitus

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**Institute Lifestyle Modification & Group/Individual Education with Specific Patient Goals for 3 Months**

1. Baseline labs, LFT's, UA, thyroid function, fasting & 2 hour postprandial serum glucose and HbA1C.
2. Initiate aspirin therapy if no contraindications
3. Start low dose Ace-Inhibitor if no contraindication. (Enalapril 2.5mg QD (\$1.20/month)
4. Weight loss (>10% above IBW), exercise plan, diet plan.
5. If glucose <200, follow-up in 3 months. If goal met, go to box 3. If not met, go to box 2.
6. If glucose >200, go to box #2.

**\*\*If intolerant to Ace-Inhibitor, microalbumin annually. If microalbumin >30, consider non-dihydropyridine CCB (verapamil or diltiazem). Ace-inhibitor or CCB usage precludes necessity for annual microalbumin.**



GLYCEMIC CONTROL INDEX			
	Ideal	Goal	Consider Action
Fasting Glucose	80-120	100-180	<80 or >180
Postprandial (2 hr)	100-140	100-180	<100 or >180
HbA1c	<7%	<8%	>8%

The pathways do not replace sound clinical judgment nor are they intended to strictly apply to all patients

\*IBW kg (men) = 50 + (2.3 x inches > 5 ft)  
 \*IBW kg (women) = 45.5 + (2.3 x inches > 5 ft)