Wisconsin Diabetes Mellitus Essential Care Guidelines 2012

Quick References and Tools Included
DISCLAIMER

These Guidelines are designed to serve as a tool to support and influence health care provider decision making to promote consistent, comprehensive, and preventive diabetes care. With the goal of improving care statewide, the Guidelines include recommended screening tests, lab tests, exams, medical checks, and essential education.

The Guidelines are population-based and therefore intended to be appropriate for most people with diabetes, but not intended to define the optimal level of care for an individual. Clinical judgment should always indicate the need for adjustments appropriate to the needs of each particular person, with goals individualized for person’s age, medical condition(s), complication(s), and any other risk identified by the primary care provider. These Guidelines are an evolving process and, as such, will be reviewed periodically to reflect advances in research and medical knowledge.

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Overview

Diabetes in Wisconsin

There are an estimated 475,090 adults (10.1% of population) and 4,500 children with diabetes in Wisconsin. Approximately 128,900 of those adults have diabetes that is undiagnosed. In addition, approximately 1,460,250 Wisconsin adults age 20 years and older have pre-diabetes. In the United States, approximately 25.8 million people have diabetes and 27% are unaware that they have the disease.

Diabetes can lead to devastating complications, such as blindness, end-stage renal disease, amputations, heart disease, and stroke. These complications are the cause of the major morbidity, mortality, and economic burden of diabetes. For additional information on the 2011 diabetes prevalence and the burden of related complications, go to the following website: http://www.dhs.wisconsin.gov/diabetes/factsandfigures.htm.

Wisconsin Diabetes Mellitus Essential Care Guidelines

The Wisconsin Diabetes Mellitus Essential Care Guidelines were published in 1998, revised in 2001, 2004, 2008, 2011 and 2012 by the Wisconsin Diabetes Prevention and Control Program, members of the Wisconsin Diabetes Advisory Group and other health care professionals with expertise in diabetes care and management. This document is divided into 13 sections, each providing pertinent information and references related to specific areas of essential diabetes care. Helpful tools and resources once included at the end of each section are now located in a new section titled “Tools.” These various tools may assist providers and others with integrating diabetes care recommendations contained in the Guidelines into everyday practice.

These Guidelines provide a simple translation of diabetes care standards that align with the American Diabetes Association (ADA) Clinical Practice Recommendations. They can be used by primary care providers, other health care professionals, health systems (e.g., managed care organizations, other insurers, clinics purchasers, etc.) and a companion piece for consumers interested in learning about essential diabetes care.

The Appraisal of Guidelines for Research and Evaluation (AGREE) instrument is a tool used to assess the quality of clinical practice guidelines. Team members involved in the 2012 update applied this instrument to the 2011 Guidelines to provide a framework for the 2012 update. Several area of improvement to the Wisconsin Guidelines were identified.

Implementing the Wisconsin Diabetes Mellitus Essential Care Guidelines

Implementation and adoption of the Wisconsin Diabetes Mellitus Essential Care Guidelines (Guidelines) in a health system or organization is one way to improve care and enhance quality of life for people with diabetes. These evidence-based Guidelines set a standard of care that organizations can use to measure quality and monitor improvement. As continuous quality improvement is constantly evolving, the Guidelines offer a promising strategy to make dramatic improvements in population health outcomes.
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