

CLINICAL INFORMATION REQUIRED

■ TYPE 2 DIABETES

The VSRF must include:

- **Date of Diagnosis**
- **Relevant blood results**
 - *FBG/OGTT (For Newly Diagnosed only)
 - *HbA1c
 - *Total Cholesterol, HDL, LDL, triglycerides
- **Risk Factors**
 - *BP
 - *Smoking status
 - *Height, weight and BMI
- **Medications and medical history**

** If a GP Management plan has been prepared, please attach

■ DIABETES PREVENTION

The VSRF must include:

- **Relevant blood results**
 - *FBG
 - *OGTT (if indicated due to fasting level)
 - *Total Cholesterol, HDL, LDL, triglycerides
- **Risk Factors**
 - *BP
 - *Smoking status
 - *Height, weight and waist measurement
- **Medications and medical history**

VSRF – Victorian Statewide Referral Form