ADA Standards of Medical Care in Diabetes recommends all patients be assessed and referred for:

**NUTRITION**
- Registered dietitian for medical nutrition therapy

**EDUCATION**
- Diabetes self-management education and support

**EMOTIONAL HEALTH**
- Mental health professional if needed

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**FOUR CRITICAL TIMES TO ASSESS, PROVIDE, AND ADJUST DIABETES SELF-MANAGEMENT EDUCATION AND SUPPORT**

1. **AT DIAGNOSIS**
- Newly diagnosed. All newly diagnosed individuals with type 2 diabetes should receive DSME/S
- Ensure that both nutrition and emotional health are appropriately addressed in education or make separate referrals

2. **ANNUAL ASSESSMENT OF EDUCATION, NUTRITION, AND EMOTIONAL NEEDS**
- Needs review of knowledge, skills, and behaviors
- Long-standing diabetes with limited prior education
- Change in medication, activity, or nutritional intake
- HbA1c out of target
- Maintain positive health outcomes
- Unexplained hypoglycemia or hyperglycemia
- Planning pregnancy or pregnant
- For support to attain or sustain behavior change(s)
- Weight or other nutrition concerns
- New life situations and competing demands

3. **WHEN NEW COMPLICATING FACTORS INFLUENCE SELF-MANAGEMENT**
- Health conditions such as renal disease and stroke, need for steroid or complicated medication regimen
- Physical limitations such as visual impairment, dexterity issues, movement restrictions
- Emotional factors such as anxiety and clinical depression
- Basic living needs such as access to food, financial limitations

4. **WHEN TRANSITIONS IN CARE OCCUR**
- Living situation such as inpatient or outpatient rehabilitation or now living alone
- Medical care team
- Insurance coverage that results in treatment change
- Age-related changes affecting cognition, self-care, etc.

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