**Referral criteria to diabetes dietetic service.**

The diabetes specialist dietetic service operates a referral system via single point of access for care (SPA)

New referrals are accepted from GPs, allied health professionals, consultants and practice nurses through SPA.

It must be stated on the referral whether the patient requires an advocate.

Please note: people with pre-diabetes (HbA1c 42-47mmol/mol) should be referred to the diabetes education team for pre-diabetes awareness training (PAT).

All newly diagnosed patients

* New type 2 patients should preferably be referred to the structured education programme first (X-PERT), if suitable for group education.
* New type 1 patients should always be referred for nutrition education and assessment within the specialist team.

Review patients

People with diabetes who identify nutrition/lifestyle related issues via the annual care planning process which include:

* **Any patient with an HbA1c greater than 58mmol/mol or lower as a result of recurrent hypos/ hypo unawareness**
* Type 2 who are on maximum oral agents and require pre-insulin assessment
* Type 2 who are new to insulin or have changed their insulin regimen
* Type 1
  + Where food and insulin are not matched resulting in hypo/hyperglycaemia
  + And/or annually for a dietetic review.
  + On insulin pump therapy

* Dyslipidaemia
  + For those who are eligible for a Statin, but wish to pursue lifestyle changes
  + Type 2 under 40 years and Type 1
  + Those treated with Statins whose Dyslipidaemia persists
* Hypertension
  + For those who indicate that they wish to consider lifestyle changes via the care planning process (e.g. weight management, salt reduction, alcohol)
* Obesity:
  + When it affects glycaemic control / hypertension
  + When weight trend is upward
  + Planned surgery e.g., CABG, Joint surgery, transplant
  + If anti-obesity drugs/ are to be considered
* Lifestyle changes such as changes to physical activity, moving away from home (for young type 1 patients)
* Renal disease, CKD 1,2,3 – (CKD 4 & 5 may be seeing specialist renal Dietitian)
* Nutrition Support for undernourished patients with diabetes requiring basic nutritional support e.g. post surgical, cancer, coeliac, anaemia or pancreatitis

*(If nutrition support versus diabetes management is the primary reason for referral it may be more appropriate to refer on to specialist nutrition support dietitian or for the community dietitian and specialist nutrition support dietitian to work collaboratively depending on the complexity of the patient).*

* Patients with an eating disorder or disordered eating.