



**PROVIDERS:**

- Bill LaGarde, MD
- Hillary Lockemer, MD

**REQUEST FOR REFERRAL**  
**Pediatric Type 2 Diabetes / Pre-Diabetes Screen and Education (ENERGIZE)**

Date: \_\_\_\_\_

Patient Name: First \_\_\_\_\_ Last \_\_\_\_\_ MI \_\_\_\_\_

DOB: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_

Referring Physician: \_\_\_\_\_ Practice Name: \_\_\_\_\_

Practice Phone: \_\_\_\_\_ Practice Fax: \_\_\_\_\_

Reason for Referral: \_\_\_\_\_

Blood Pressure: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ BMI: \_\_\_\_\_

Fasting lab results: TC \_\_\_\_\_ LDL \_\_\_\_\_ HDL \_\_\_\_\_ Trig \_\_\_\_\_ Fasting Blood Glucose \_\_\_\_\_

Medications: \_\_\_\_\_

**Screen all children 6 years old and over:**

1. Determine BMI for age: BMI % =  online calculator available at: <http://apps.nccd.cdc.gov/dnpabmi/Calculator.aspx>
2. BMI over 85% for age? If YES, continue screen If NO, STOP
3. Assess for Risk Factors: (Risk factors do not qualify a child for ENERGIZE, see below)
  - Race/ethnicity (*circle appropriate*) African American Hispanic American Indian Asian
  - Family History of Type 2 Diabetes (in 1st or 2nd degree relative)
  - Acanthosis Nigricans
  - Hypertension (BP >90th% for age/ht) BP =  BP% for age/ht =
  - BMI >95% for age
4. If positive for at least one risk factor:
  - Order the following lab tests: Fasting Lipid Panel (TC, HDL, LDL, Trig) and Fasting Blood Glucose (May use prechecked WakeMed lab form if sending to a WakeMed facility)
  - Upon receiving lab results: Fax completed referral form and completed lab results to 919-231-0314

Children qualify for the ENERGIZE program by meeting criteria for one of the following:

- Type 2 Diabetes FBG >126 (confirmed by 2 separate tests) **OR**
  - Impaired FBG FBG >100mg/dl <126mg/dl **OR**
  - Elevated Cardiometabolic Risk (must meet 3) (please check):  BMI >85% for age  TG >110mg/dl  
 HDL <40mg/dl  BP >90th% for age  Total cholesterol >170 or LDL cholesterol >130
5. ENERGIZE staff will contact patient and schedule appointment. *Patients diagnosed with type 2 diabetes will be referred to our Endocrinologist for medical management and may receive diabetes education in addition to ENERGIZE. Patients who complete the WakeMed Energize Program will be seen for follow up every six months for 2 years. clinic follow-up includes evaluation of BMI, BP, FBG and cholesterol measurements, nutrition and lifestyle counseling, and goal setting.*

Referring Physician Signature: \_\_\_\_\_

*Using the phone and fax numbers from the top of this form, please call for an appointment or fax this request to our office (along with appropriate records, notes, lab results, insurance info where applicable). Thank you for your referral. To download this form electronically, visit [wakemedphysicians.com](http://wakemedphysicians.com) and click on "Referring Providers."*