REFERRAL FORM
SOUTHEAST DIABETES FAITH INITIATIVE

I refer my patient,

(FIRST NAME) (MI) (LAST NAME)

Participate in the Southeast Diabetes Faith Initiative (SDFI) lifestyle change program utilizing the PreventT2 curriculum based on the following eligibility criteria:

✔ 18 years or older BMI ≥25kg/m2 (≥23 if Asian)
✔ No previous diagnosis of type 1 or type 2 diabetes
✔ Diagnosis of prediabetes within the past year or GDM based on (check one or more)
  - HbA1C: 5.7%–6.4%
  - Fasting plasma glucose: 100–125 mg/dL
  - 2-hour plasma glucose (after a 75 gm glucose load): 140–199 mg/dL
  - Previous diagnosis of GDM (may be self-reported):

PROVIDER SIGNATURE

DATE

PROVIDER NAME

PREVENT T2
A PROVEN PROGRAM TO PREVENT OR DELAY TYPE 2 DIABETES

SOUTHEAST DIABETES FAITH INITIATIVE
State Manager: Tanya Henderson, PhD, MBA 202.277.5872 / thenderson@balminglead.org www.BalmInGilead.org/SDFI

Keep a copy and give the completed form to the patient, who should contact this local program for more information and to enroll.