



Patient Referral Form RESET: Small Steps, Big Change

This is a referral for an adult patient to participate in RESET: Small Steps, Big Change, part of the National Diabetes Prevention Program, led by the Centers for Disease Control and Prevention (CDC). It is a proven program to prevent or delay type 2 diabetes in high-risk patients. **Providers can send the referral form directly to the organization offering the program using the contact information below.** Providers can also make a copy and provide the completed form to the patient, who may contact his/her local program for more information and to enroll.

(First Name)	(MI)	(Last Name)	(Telephone Number)
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Is recommended for enrollment in RESET: Small Steps, Big Change based on the following eligibility criteria:

- 18 years or older
- Overweight (body mass index above 25, or 23 if you are Asian)
- No previous diagnoses of type 1 or type 2 diabetes
- NOT pregnant

In addition, you must meet ONE of the following criteria* (check all that apply):

- ☐ Have had a recent blood test in the prediabetes range, which includes one of the following tests and results:
 - ☐ Hemoglobin A1C: 5.7–6.4%
 - ☐ Fasting plasma glucose: 110–125 mg/dL
 - ☐ Two-hour plasma glucose (after a 75 gm glucose load): 140–199 mg/dL
- ☐ Have received a result of high risk for type 2 diabetes on the Prediabetes Risk Test.
- ☐ A doctor previously diagnosed you with gestational diabetes.

HEALTH CARE PROVIDER INFORMATION

SIGNATURE: _____ DATE: _____

NAME: _____

ADDRESS: _____ PHONE: _____

For more information, call Skye Beech at 850-316-2764. Visit www.escambiahealth.com and www.cdc.gov/diabetes/prevention for more information.

Email forms to Skye.Beech@flhealth.gov or fax forms to 850-595-6745.

