

**DIABETES**  
Patient Care Treatment Form  
Completed when claiming tariff 8431

Date of Service of CDM Claim (YYYY-MM-DD)	Physician Surname	Physician Given Name	Billing #
Patient Surname	Patient Given Name	Gender	Registration #
		<input type="checkbox"/> F <input type="checkbox"/> M	
			PHIN #
			Birthdate (YYYY-MM-DD)

Weight (kg)

Height (cm)

Date Completed  
(YYYY-MM-DD)

**Blood Pressure Measurement**

Patient age: 18 years and older

Systolic

Diastolic

Target <130/80

N/A <18 years of age  
Outside of age range

Date Completed  
(YYYY-MM-DD)

Foot examination OR

Management of documented peripheral nephropathy

N/A - Bilateral amputation

Date Completed  
(YYYY-MM-DD)

**HGB A1C test**

Frequency: Done in preceding  
6 months of the service date

Target  $\leq 7\%$

Date Completed  
(YYYY-MM-DD)

**Fundoscopic examination** OR  
Patient age: 15 years and older

Date Completed  
(YYYY-MM-DD)

**Referral for a fundoscopic examination**  
Patient age: 15 years and older

YES - If Yes, select the option(s)

NO - If No, select the reason(s)

OPTHAL

CI - Contraindicated

PR - Patient refused

OPTOM

NT - Not tolerated

Patient age <15 years

\$ - Financial barrier

N/A

**Lipid Profile**

Patient age: 74 years or under

LDL

TC/HDL

Non HDLChol

Frequency: Once in 60 months

Target < 2.0 mmol/L

Target < 4.0 mmol/L

Target <2.6 mmol/L

N/A - Patient on statins in last 12 months

Date Completed (YYYY-MM-DD)

**Nephropathy screening**

Patient age: 12 - 74 years

ACR

eGFR

Target: Male: < 2.0

Female: <2.8 mg/mmol

Target: > 60 mL/min

N/A - Pre-existing documented nephropathy

N/A - Patient age <12 years or age > 74 years

Date Completed (YYYY-MM-DD)

**NOTES:**

- Please retain a copy of this form in your patient chart.
- This form can be submitted in person to **Manitoba Health, Seniors and Active Living** during business hours (8:30 am to 4:30 pm, Monday to Friday),
- or by mail to this address: **Claims Unit - Patient Care Treatment Forms  
Manitoba Health, Seniors and Active Living  
300 Carlton Street  
Winnipeg, MB R3B 3M9**

- DO NOT FAX - any fax received will NOT be considered submitted.