

Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention
MAINE DIABETES PREVENTION AND CONTROL PROGRAM: Diabetes Self-Management Training (DSMT)
Diabetes Self-Management Training (DSMT) Behavioral Goals/Plan of Care

DSMT- 4
 (02-2016)

Diabetes Self-Management Training Assessment

Physician's Name: _____ _____ _____	Phone _____	Address _____ _____ _____
Name (Last) (First) (M.I.)	__FP/GP__Ped__Int__Endo__Other	

New Rev Cont	Date	Initials	Behavior Goal	Success Noted			
				Goal Category	Date	1-3	4-5

- Goal Category**
- | | | | |
|------------------|----------------------|------------------------------------|------------------------------|
| 1. Exercise | 4. General knowledge | 7. Psychological adjustment/stress | 9. Blood pressure monitoring |
| 2. Meal planning | 5. Medications | 8. Recognize/treat | 10. Smoking cessation |
| 3. Monitoring | 6. Foot care | hypo/hyperglycemia | 11. Health care visits |
| | | | 88. Other |
- Success Attainment Scale 1-5:** 1=None 2=Little 3=Some 4=Mostly 5=Always

_____ / _____ _____ / _____ _____ / _____
 Signature of Participant / Date Signature of Nurse Instructor / Date Signature of Dietitian Instructor / Date