

Welcome to Sonoran Medical Centers!

Dr. Diane Gronski would like this information for her diabetes patients.

Patient Name: _____ **Date:** _____

Who is your PCP (primary care doctor): _____

What year did you find out you had diabetes? _____

What diabetic medications have you tried and stopped and for what reasons?

Medication Name:	Approximate Dates Used:	Why stopped?

Do you see any of these consultants?

Specialty	Doctors' Name	Date of last visit
Nephrologist		
Cardiologist		
Eye doctor		
Neurologist		
Other specialties:		

Do you use an insulin pump? Yes No

Do you upload your readings to a website? Yes No

If yes, which site? _____

User name: _____ **Password:** _____