

## For GPs to complete

## Life! participants:

Please take this letter to your GP – it outlines the tests you will need to have completed by session 4/your final call.

## **Re: Request for further pathology**

Dear Doctor,

Your patient is participating in the Life! helping you prevent diabetes, heart disease and stroke program. This lifestyle modification program is delivered by Diabetes Victoria and funded by the Victorian Government.

As part of the program all participants are required to provide the following test results. Please note that new blood pathology is required if patient records are older than 12 months.

Date: DD/MM/YYYYPatient's name:	
Fasting plasma glucose OR HbA1c:	
Total cholesterol (mmol/L):	
Triglycerides (mmol/L):	
HDL (mmol/L):	
LDL (mmol/L):	
Diabetes excluded:	
	Yes No

Thank you for your assistance.

If you would like to learn more about the Life! program and how you can receive a financial incentive for referring eligible participants, please contact us by email: casefinding@diabetesvic.org.au or phone: 03 8648 1880.

Please return this form by one of the following options:

- y Give the completed form back to your patient
- y Fax this completed form or pathology report to the Life! program on (03) 9667 1757
- y Fax the completed form to your patient's Life! program facilitator

Facilitator's name:

Facilitator's fax:



The Life! program is supported by the Victorian Government