This is a recommendation for an adult patient to participate in the PreventT2 program. 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)

Is recommended for enrollment in the PreventT2 lifestyle change program based on the following eligibility criteria:

- 18 years or older
- BMI ≥ 24 kg/m² (≥ 22 if Asian)
- No previous diagnosis of type 1 or type 2 diabetes
- Diagnosis of prediabetes in the past year or GDM based on (check one or more)
  - HbA1C: 5.7%-6.4%
  - Fasting plasma glucose: 100-125 mg/dL
  - 2-hour plasma glucose (after a 75 gm glucose load): 140-199 mg/dL
  - Previous diagnosis of GDM (may be self-reported)

Health Care Provider Information

Signature: ___________________________________________ Date: _____________

Name: __________________________________________________________________________

Address: _________________________________________________________________________

Phone: __________________________________________________________________________

PreventT2 is 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.

For more information, contact your local PreventT2 program at:

Insert Local program name
Insert Program contact name
Insert Address 1
Insert Address 2
Insert Phone number
Insert Email address