

Practice Name, Program Name, Etc.

Time Period: _____

Summary Report of DSMES Patients' Clinical-Health Outcomes

Clinical--Health Outcomes	Number Pts Who Chose Goal	Number Reporting Improvement	% Who Reported Improvement	Program Benchmark %	Average Degree of Improvement	Program Benchmark Degree
A1c			%	%		%
BP			%	%		%
FPG			%	%		%
PPG			%	%		%
Weight			%	%		%
BMI			%	%		%
LDL-C			%	%		%
HDL-C			%	%		%
T-Chol			%	%		%
			%	%		%

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