

# Referral to the SA Health Do It For Life program

## Making lifestyle changes for better health



### Section 1: Referrer details (other than Medical Practitioner) MPs complete section 3 & 4

Name: \_\_\_\_\_ Worker/Organisation: \_\_\_\_\_  
Address: \_\_\_\_\_ Post Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date of Referral: \_\_\_\_\_

### Section 2: Client details

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender:  Male  Female  
Address: \_\_\_\_\_  
Post Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Is an interpreter required?  No  Yes If yes, please specify \_\_\_\_\_  
Other relevant information (e.g. medical history, cultural, gender or disability considerations) \_\_\_\_\_

Please tick box if: The client is Aboriginal or Torres Strait Islander   
The client is a concession card holder

I understand a referral to the Do It For Life program is being made on my behalf, and I am aware my details will be faxed/posted to program staff.  
A brief explanation of the program was also provided to me.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Section 3: Medical Practitioner must complete

Must meet all FOUR eligibility criteria:

1. Must be aged (18+)

2. Total Risk Score (from overleaf) of 15 or more,  
OR score of 13, plus alcohol/stress risk factors

Score = \_\_\_\_\_

(tests to exclude Type 2 Diabetes highly recommended)

3. Has one or more 'SNAPS' Risk Factors: (tick as appropriate)

Smoker  Poor Nutrition  Risky alcohol use  Physical inactivity  Stress

4. Does not already have a diagnosed chronic disease?  Agreed

[Exclusion from the program includes those with diabetes, heart disease, renal disease, chronic obstructive pulmonary disease, cognitive impairment or any other medical condition that would exclude a person from safely participating in a SNAPS risk factor modification program.]

### Section 4: Medical Practitioner must complete

I consider my client to be eligible and I am aware of no medical conditions or medication that would significantly impact on participation

Yes  No

Name: \_\_\_\_\_

Practitioner Signature: \_\_\_\_\_

Practice/GP STAMP:

Once complete, please fax both pages of the form or post to:



# AUSDRISK

## 1. Your age group

- Under 35 years  0 points  
35 - 44 years  2 points  
45 - 54 years  4 points  
55 - 64 years  6 points  
65 years or over  8 points

## 2. Your gender

- Female  0 points  
Male  3 points

## 3. Your ethnicity/country of birth:

### 3a. Are you of Aboriginal, Torres Strait Islander, Pacific Islander or Maori descent?

- No  0 points  
Yes  2 points

### 3b. Where were you born?

- Australia  0 points  
Asia (including the Indian sub-continent), Middle East, North Africa, Southern Europe  2 points  
Other  0 points

## 4. Have either of your parents, or any of your brothers or sisters been diagnosed with diabetes (type 1 or type 2)?

- No  0 points  
Yes  3 points

## 5. Have you ever been found to have high blood glucose (sugar) (for example, in a health examination, during an illness, or during pregnancy)?

- No  0 points  
Yes  6 points

## 6. Are you currently taking medication for high blood pressure?

- No  0 points  
Yes  2 points

## 7. Do you currently smoke cigarettes or any other tobacco products on a daily basis?

- No  0 points  
Yes  2 points

## 8. How often do you eat vegetables or fruit?

- Everyday  0 points  
Not everyday  1 point

## 9. On average, would you say you do at least 2.5 hours of physical activity (for example walking, cycling or swimming) per week (for example, 30 minutes a day on 5 or more days a week)?

- Yes  0 points  
No  2 points

## 10. Your waist measurement taken below the ribs (usually at the level of the navel, and while standing)

Waist measurement (cm)

### For those of Asian or Aboriginal or Torres Strait Islander descent:

- | Men              | Women           |                                   |
|------------------|-----------------|-----------------------------------|
| Less than 90 cm  | Less than 80 cm | <input type="checkbox"/> 0 points |
| 90 - 100 cm      | 80 - 90 cm      | <input type="checkbox"/> 4 points |
| More than 100 cm | More than 90 cm | <input type="checkbox"/> 7 points |

### For all others:

- | Men              | Women            |                                   |
|------------------|------------------|-----------------------------------|
| Less than 102 cm | Less than 88 cm  | <input type="checkbox"/> 0 points |
| 102 - 110 cm     | 88 - 100 cm      | <input type="checkbox"/> 4 points |
| More than 110 cm | More than 100 cm | <input type="checkbox"/> 7 points |

Add up your points

## Your risk of developing type 2 diabetes within 5 years\*:

- 5 or less: Low risk**  
Approximately one person in every 100 will develop diabetes.
- 6 - 14: Intermediate risk**  
For scores of 6 - 8, approximately one person in every 50 will develop diabetes.  
For scores of 9 - 14, approximately one person in every 20 will develop diabetes.
- 15 or more: High risk**  
For scores of 15 - 19, approximately one person in every seven will develop diabetes.  
For scores of 20 and above, approximately one person in every three will develop diabetes.

**If you scored 6 - 14 points in the AUSDRISK you may be at increased risk of type 2 diabetes.**

Discuss your score and your individual risk with your doctor. Improving your lifestyle may help reduce your risk of developing type 2 diabetes.

**If you scored 15 points or more in the AUSDRISK you may have undiagnosed type 2 diabetes or be at high risk of developing type 2 diabetes.**

See your doctor about having a fasting blood glucose test. Act now to prevent type 2 diabetes.

\*The overall score may overestimate the risk of diabetes in those aged less than 25 years

The Australian Type 2 Diabetes Risk Assessment Tool was developed by the Baker IDI Heart and Diabetes Institute on behalf of the Australian, State and Territory Governments as part of the COAG initiative to reduce the risk of type 2 diabetes.