London FreeStyle Libre Audit Pre-FreeStyle Libre Information Collection Form



Hospital Name Centre ID Name of Clinician

Patient age



**PATIENT USE OF FREESTYLE LIBRE**

What is the date of FreeStyle Libre start (best estimate if uncertain)   
Click here to enter a date.

Reason for starting FreeStyle Libre (please tick as many boxes as apply)



Replacement of SMBG High HbA1c Disabling hypoglycaemia CGM not suitable/practical

(to reduce test strips by at least 8 (>8.5% (69.4mmol/mol))

(7 in children aged 0-19 years))



Conventional monitoring is not possible with SMBG testing Other, please specify

**USE OF NHS RESOURCES BEFORE STARTING FREESTYLE LIBRE**



Average number of SMBG tests in the last 2 weeks Average number per day Don’t know

**HYPOGLYCAEMIC AWARENESS BEFORE STARTING FREESTYLE LIBRE**

Enter information either on GOLD score or CLARKE score.

PLEASE DON’T ENTER RECOLLECTED INFORMATION. Only enter if information obtained prospectively or contemporaneous data is present in patient records.

**Gold score**

Assessment of awareness of hypoglycaemia (Gold Score). Does the patient know when hypos are commencing?



1 2 3 4 5 6 7 Not applicable

1= Always aware, 7= Never aware

**Clarke score**



0-4 ≥4 Not applicable

**GLUCOSE CONTROL**

Most recent HbA1c test done before starting FreeStyle Libre



Date of test: 05/06/2018 HbA1c mmol/mol

**MEDICATIONS**



Is the patient on Basal bolus Insulin pump

**OTHER PATIENT COMMENTS OTHER HEALTHCARE PROFESSIONAL COMMENTS?**



FreeStyle Libre pre-libre data collection from 05/06/18 v2.1

FreeStyle Libre audit pre-FreeStyle Libre form for London 05/06/18 v2.1