<<YOUR LETTERHEAD>>

<<ADDRESS>>

<<PHONE NUMBER>>

<<DATE>>

<<PATIENT NAME>>

<<PATIENT ADDRESS>>

Dear Mr./Mrs. <<PATIENT’S LAST NAME>>,

Based on a review of your medical chart, you have a condition known as prediabetes.

It means your blood glucose level is higher than normal, which puts you at increased risk of

developing type 2 diabetes. However, prediabetes is a treatable and potentially reversible condition.

I am writing to tell you about the National Diabetes Prevention Program lifestyle change program that can help you prevent or delay type 2 diabetes. Over the course of a year, you'll attend classes and work with a lifestyle coach to help you stay active, eat healthy and manage stress to achieve a diabetes-free future. The program has free or low-cost options and offers <select appropriate options based on what is available: local and virtual classes>.

<Select appropriate instruction>

<I have sent a referral to <<NAME OF DPP PROVIDER>>, and you will receive a call to discuss the program, answer any questions you may have and, if you are interested, enroll you in the program.>

OR

<To hear more about the program and to enroll, call the Diabetes Prevention Program navigator

at (844) 328-0021 between 7am to 7pm ET on Monday-Friday.

Please feel free to call <<INSERT NAME OF CONTACT PERSON>> at <<PHONE NUMBER>>

between <<INSERT HOURS>> on <<INSERT DAYS>>.

Sincerely,

Dr. <<PHYSICIAN LAST NAME>>