Submitted case studies must include principles of [person-centred care](https://www.ndss.com.au/about-diabetes/resources/find-a-resource/person-centred-care-for-people-with-diabetes/?msclkid=5a999425b53f11eca54cb23acd3c78ed)and adhere to the [Diabetes Australia Position Statement: Our Language Matters](https://www.diabetesaustralia.com.au/wp-content/uploads/Language-Matters-2021-Diabetes-Australia-Position-Statement-1.pdf?msclkid=7a8e3592b53811ec99f32e739c6dab3c)while discussing the use of Freestyle Libre CGM plus the analysis and use of at least 2 Libreview Reports in addition to AGP.

Submissions must address **all** of the following questions:

1. How has the client’s clinical diabetes outcomes improved with this technology?
2. How has the technology been used to impact the client’s quality of life?
3. How has the technology changed practice for an individual health professional or the diabetes care team?
4. How has it helped to prevent an adverse clinical event?
5. What are the challenges clients have found with this technology? What has been done as a consequence?
6. Discuss ways that Libreview reports have been used to inform diabetes management changes and what these changes were and the effectiveness of them to increase time in range.
7. How has the Freestyle Libre CGM helped facilitate freestyle living with diabetes?
8. Case studies referencing the use of the Novopen 6 in conjunction with the LibreLink App is encouraged when clinically relevant

Guidelines:

* + Ensure the client’s anonymity is maintained. Ensure that the patient is not identifiable in any way. Avoid using dates, names of institutions, any details that may identify the patient.
  + Clearly articulate the management issue(s) (including patient identified goals).
  + Appropriately address the management issue(s).
  + A case study is a modest description of what actually happened, so keep to facts of clinical events. Recognised abbreviations can be used provided the term is written in full at the first usage. Tables and bullet points can also be used provided they are well explained and not used excessively or as a way to circumvent the word limit.
  + Critique the care provided for the patient. Explore the rationale behind the care. Support care decisions with evidence from Libreview reports (at least 2 in addition to AGP) plus references. Reflect on evidence-based practice guidelines and include outcomes that demonstrate clinical improvement with TIR plus other appropriate metrics.
  + Case Study submission should be no longer than 1500words in total (not including references).

Consent

* Before submitting your case study, please ensure that you have obtained written consent of people with diabetes discussed in your submitted case studies, in which they give you their permission for your case study to be published via print and/or online by ADEA.
* ADEA will not use these materials in a manner that may be deemed adverse, or defamatory to the person signing this form. ADEA further agrees that it will not use these materials for any political or commercial gain.

Please ask the people who are mentioned in your case study to complete this survey to meet the consent requirements: <https://www.surveymonkey.com/r/F9KC3GW> this is due by 17th May 2024

Terms and Conditions

1. Submitted case studies must include any principle(s) of person-centred care and adhere to the Diabetes Australia Position Statement: Our Language Matters while answering the identified questions.
2. All written case studies must be completed using the Microsoft Word template and submitted to [education@adea.com.au](mailto:education@adea.com.au) via email with FREESTYLE LIVING WITH DIABETES: LEARNING FROM CASE STUDIES in the subject line. Parts of the submitted case studies that are over the limit (i.e. from the 1501st word of the written case study) will not be considered.
3. Submitted case studies must de-identify details of the person in the case study to ensure confidentiality. This means neither names nor initials, locations mentioned in the submissions, e.g. ‘a 32-year-old woman with newly diagnosed type 1 diabetes attended our health service for …’.
4. Applicants must obtain consent of people with diabetes discussed in the submitted case studies, giving permission that they are happy for the selected case studies to be published via print and/or online by ADEA. Submitted case studies without matching consents will not be reviewed.
5. When referencing is required, submitted case studies must follow Vancouver referencing style.
6. The authors of the case studies that are ranked top 10 will receive one registration per case study to the 2024 Australasian Diabetes Congress (ADC), financially supported by Abbott Diabetes Care.
7. Authors who submit a case study must be prepared to attend and present at ADC 2024, should they reach the final 10 and the final 4 for oral presentations or win the Early Career category. You will be ineligible for top 4 placing or winning the Early Career category if unable to attend ADC 2024 in-person.
8. Winner of the Abbott Case Study Competition may have their case study published in Australian Diabetes Educator.
9. Members of the Reviewing Panel and members of the Abbott Libre Advisory Committee are not eligible for this competition.
10. Any adverse events experienced by health professionals or people with diabetes should be reported through to Abbott Diabetes Care’s customer service.

Submission details:

* Entrants must submit case study award entries using this provided template
* 1500 word limit (words above this limit will not be considered)
* Please save your submission as 2024\_Freestyle Living- Case Study Submission\_SURNAME
* Submit completed Microsoft Word file via [education@adea.com.au](mailto:education@adea.com.au) with FREESTYLE LIVING WITH DIABETES: LEARNING FROM CASE STUDIES in the subject line.
* Submission closing date: 17 May 2024.
* Enquiries please contact ADEA at [education@adea.com.au](mailto:education@adea.com.au)
* You must include AGP/ AGP Plus reports and you may upload them here. PDF, DOC, DOCX, PNG, JPG, JPEG, GIF files are supported. Please e-mail your submission to [education@adea.com.au](mailto:education@adea.com.au)
* The four (4) Judges Choice finalists and winner of the Early Career category, will be asked to present their cases as an oral presentation at the ADC.
* Entrants must state which category they are entering:
  + Judges Choice
  + Early Career

Submission format:

Introduction (approximately 200 words)

* Describe briefly your profession and scope of practice plus a short outline of the team you work with.
* Describe and summarise the case study
* Details of the person with diabetes (de-identified/do not use actual name): gender, age, social considerations (family/employment/etc.)
* Consider: reason for referral, medications, medical history, social history, demographic and lifestyle factors, family history, previous diabetes management knowledge, biochemistry, investigations, anthropometry, other health professional input, diet history, exercise.

Assessment (approximately 200 words)

* Consider: diabetes management, medication, interventions/technology being used.
* Clearly describe the working diagnosis/clinical impression of the person with diabetes and the plan for care.
* What issues/problems were encountered and managed? What was the rationale for using the selected system?

Management (approximately 800 words)

* Consider: changes made to diabetes management/introduction of technology, who was involved, over how many consultation sessions, what management goals were made and the reasons for them.
* Include analysis of LibreView reports to identify diabetes management areas of concern evident from the reports (AGP plus at least 2 others).
* How did you address the issues/problems? What clinical management changes did you suggest to the client; how did they respond and what changes were implemented.
* Describe outcome measures such as self-management behaviours (blood glucose monitoring, medication/ insulin concordance, exercise), clinical investigations (HbA1c, weight, BMI, blood pressure) and what those outcomes were.
* Provide follow-up examples of how the care changes affected/improved TIR using Libreview reports to demonstrate this.
* Compare with existing literature where relevant (include references)
* How has the Freestyle Libre CGM helped facilitate freestyle living with diabetes?
* You must include relevant AGP/AGP Plus reports with your submission.

Conclusion (approximately 300 words)

* Consider how this has influenced you and/or your team to change your practice.
* Consider impact of mental health and stages of readiness to change.
* Discuss ways that the Freestyle Libre or Libre 2 has facilitated freestyle living with diabetes.
* Consider applicability to other people with diabetes and implication for the practice of diabetes care, diabetes education and self-management.

References – when required are not included in word count, please use Vancouver Style referencing.

Title:        
Surname:        
First name:        
Postal address:        
Suburb:        
State:        
Postcode:        
ADEA membership number:         
Email address:        
Mobile number:

Please provide your written case study below. (maximum 1500 words)

Introduction (approximately 200 words)

Assessment (approximately 200 words)

Management (approximately 800 words)

Conclusion (approximately 300 words)

References (not included in word count; in Vancouver referencing style)

You must include AGP/ AGP Plus reports and you may upload them here. PDF, DOC, DOCX, PNG, JPG, JPEG, GIF files are supported. Please e-mail your submission to [education@adea.com.au](mailto:education@adea.com.au)