

A Guide to Understanding Diabetes Self Management



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# What is Diabetes?

Diabetes is a disease in which the sugar level in your blood is high. It's a lifelong condition. When you eat food that contains carbohydrates, the food is broken down into a simple sugar called glucose. This sugar travels in your blood to all cells in your body and is used for energy. Insulin (a hormone made by the pancreas) is released into the bloodstream and allows the sugars to enter your cells. Without insulin, sugar remains in the blood, causing complications or damage.

## There are three common Types of diabetes:

Type 1, Type 2 and gestational diabetes.

# **Type 1 Diabetes**

With Type 1 diabetes, your body makes little or no insulin. It's not always clear what causes Type 1 diabetes, but researchers believe autoimmunity, genetics and possibly viruses play a role. People with Type 1 diabetes must take insulin every day. Type 1 diabetes usually happens in children or young adults, but it may appear at any age.

# **Type 2 Diabetes**

With Type 2 diabetes, there are two main causes of high blood sugar. First, your body doesn't effectively use the insulin it makes. This is called insulin resistance.

Second, over time, your body's ability to make insulin decreases and you may not make enough insulin to meet your needs. This is called insulin deficiency. Most people with diabetes have Type 2. Anyone may develop diabetes, but there are some factors that increase your risk for developing Type 2:

- Family history of diabetes.
- · Lack of physical activity.
- · Being overweight.
- Being over the age of 45.
- History of gestational diabetes.
- Being African American, Native American, Latino, Asian American, Asian, Indian or Pacific Islander.

Things you can do to decrease insulin resistance and allow the body to use insulin better are eating healthy, increasing physical activity and stopping tobacco use. These topics will be discussed later in this booklet.

Stopping tobacco use can reduce insulin resistance. For help with quitting, visit <a href="mailto:mercy.net/healthinfo">mercy.net/healthinfo</a> and search "Smoking" to see a variety of resources.

# **Gestational Diabetes**

Gestational diabetes results from high blood sugar that develops during pregnancy. Blood sugar levels usually return to normal after the baby is born. However, having gestational diabetes increases the risk of developing Type 2 diabetes later in life.

# **Healthy Eating**

A key approach to controlling blood sugar (glucose) is eating healthy foods every day. It isn't necessary to stop eating all the foods you like. However, it's important to know what you're eating and how those foods affect your blood sugar.

Often, when people are told they have diabetes, they don't know where to begin. The first step is making a meal plan. Those who have had diabetes for a while may also feel frustrated or limited in their meal choices.

There are three common approaches to meal planning that may help you manage your blood sugar levels. Work with your health care team to choose the method that works best for you.

- 1. Plate method
- 2. Counting carbohydrate servings
- 3. Counting grams of carbohydrates

## What are carbohydrates?

- Carbohydrates raise blood sugar levels higher and faster than other foods.
- Carbohydrates are a major energy source.
- Carbohydrates turn into sugar in the blood.
   This sugar then works with your own or your injected insulin to make energy.

## **Examples of carbohydrate sources are:**

- Grains bread, cereal, rice, pasta, crackers, chips.
- Starchy vegetables potatoes, corn, beans, peas, winter squash.
- Fruit and fruit juice apples, berries, melons, oranges, grapes, bananas.
- Milk cow's milk, buttermilk, yogurt.
- Sweets cookies, candy, cakes, soda.

By controlling the amount of carbohydrates you eat, you will help keep your blood sugar within your target range.

Sweets and desserts are carbohydrate choices that don't offer the nutrition other carbohydrate sources may offer, and you should limit your portion sizes.

#### 1. Plate Method

This method allows you to learn portion control and how to make a nutritionally well-rounded plate. Start by using a nine-inch plate.



## 1/4 plate = protein

3-4 oz. cooked skinless chicken or turkey, fish, seafood, lean beef, lean pork, tofu, eggs, cheese

#### ½ plate = carbohydrate

Starchy vegetable or whole grain food such as bread, pasta, rice, cereals, beans, corn, potatoes, crackers, pretzels

## ½ plate = non starchy vegetables:

Carrots, green beans, lettuce, broccoli, greens, cabbage, cauliflower, tomatoes, brussels sprouts, kale, onions, cucumber, beets, okra, mushrooms, peppers, turnips, radishes, spinach, bok choy, asparagus, artichoke hearts, eggplant, leeks, mushrooms, squash, sugar snap peas, water chestnuts

# 2. Carbohydrate Servings

Counting your servings of carbohydrate is another way to create your diabetes meal plan. Be aware that starches, sugar and fiber all contain carbohydrate. It is also important to note the serving size of each carbohydrate you are eating.

# 3. Counting Carbohydrate Grams

15 Grams of Carbohydrates = One Serving

	Carb Servings Per Meal	Grams of Carbs Per Meal
Women	3-4	45-60g
Men	4-5	60-75g
Snacks	1	15g

This chart lists basic guidelines. However, a dietitian can help you figure out the number of carbohydrate servings or grams that's right for you.

It's important to eat about the same amount of carbohydrates at each meal. This helps the body use the sugar more efficiently and maintain steady blood sugar. Eating meals evenly spaced throughout the day is important to stay in your target range. Don't eat most of your food at one time.

# **Reading a Nutrition Facts Label**

If you're unsure about how much carbohydrate a food has, refer to the product's nutrition label.

Serving size 2/3 cu	ıp (55g
Amount per serving Calories	230
% D:	aily Value
Total Fat 8g	10%
Saturated Fat 1g	5%
Trans Fat 0g	100
Cholesterol Omg	0%
Sodium 160mg	79
Total Carbohydrate 37g	13%
Dietary Fiber 4g	14%
Total Sugars 12g	\
Includes 10g Added Sugars	20%
Protein 3g	
Vitamin D 2mcg	109
Calcium 260mg	209
Iron 8mg	459
Potassium 235mg	69

Start with serving size. This will tell you how much food is in one serving. If you eat more than one serving, you must add up the total carbs to match the food you actually ate. For example, if you ate two servings or 1½ cups, your total carbs for this meal would be 74 grams.

Total carbohydrate tells you how many total carbohydrates are in one serving. The sugars and fibers are including in this total.



Consult your meal plan before you go to the grocery store or out to eat.

# **Tips for Healthy Eating**

- Plan ahead for a meal or snack by cutting up vegetables the night before or making your lunch for tomorrow after cleaning up dinner. This may help to avoid last-minute unhealthy choices.
- Consult your meal plan before you go to the grocery store or out to eat. Make a list and stick to it.
- Eat from all the food groups: grains, vegetables, fruits, protein, dairy and oils.
- Be aware of how your meal choices affect your blood sugar. Check your blood sugar before and two hours after the beginning of the meal. This will show you how the foods you ate affected your blood sugar.
- Alcohol can lower your blood sugar level too much. Never drink alcohol if your blood sugar is low, or on an empty stomach. Ask you health care team if any of the medicine you take interacts with alcohol.
- Read food labels.
- Visit the website of restaurants for nutrition information and make your choices before going.
   This lets you focus on the company and not stress over the foods offered.
- When you combine carbohydrate + protein + fat, it provides longer-lasting energy.

# If You Want To Lose Weight

- Meet with your dietitian to develop a meal plan that will help achieve your goals.
- Cut calories by using smaller amounts of oils, dressings and butter/margarine.
- Reduce your servings of sugar-sweetened soda, tea, sports drinks and juice.
- Increase your activity level.

# **Being Active**

Exercise, or physical activity, includes anything that gets you moving such as walking, dancing or working in the yard. Regular physical activity is important for everyone, but it's especially important for people with diabetes and those at risk for diabetes. It's important to visit a member of your health care team before starting an exercise program.

#### **Benefits of Exercise**

- Lowers blood sugar.
- Lowers blood pressure.
- Aids in weight loss.
- Improves mood.
- Increases energy.
- Improves balance.



For most people with diabetes, 30 minutes a day is recommended. This should equal about 150 minutes each week. Start small and work up to your goal. If you haven't been very active recently, start with five or ten minutes a day. Stretching before and after you exercise will help prevent injury and sore muscles. Include strength training two to three days a week to keep muscles and bones strong.

## **Tips for Successfully Being Active**

- Keep a record of all your activity.
- Start small and increase time and duration as you feel stronger.
- Do something you love.
- Break up the time you exercise. As little as ten minutes at a time will make a difference.
- Make being more active a habit instead of thinking of it as a chore.
- Find a friend. Accountability is key to maintaining an exercise program.

## Types of Exercise:

- · Bicycling.
- Walking.
- · Dancing.
- Jogging.
- Gardening.
- Swimming.

# Find an activity you love and do that for exercise

Types of Exercise	Examples
Endurance	Brisk walking, jogging, swimming, etc.
Strength	Lifting weights, etc.
Balance	Standing on one foot, heel-toe walk, yoga, etc.
Flexibility	Shoulder and upper arm stretch, calf stretch, etc.

## Being Active Throughout the Day

Reducing the amount of time spent sitting or being still is important. Set an alarm to get up and stretch or walk around the house or office at least every 30 minutes throughout the day.

# Monitoring

# **Home Monitoring**

Learning how to check (monitor) your blood sugar is another key to managing your diabetes. You can get a blood glucose meter and testing supplies from any pharmacy — either with a prescription if using your insurance or without a prescription if paying for it yourself.

## Benefits to checking your blood sugar:

- Identifies foods that make your blood sugar rise.
- Shows how exercise affects your blood sugar.
- Shows how your diabetes medicines are working.
- Identifies how illness, pain, stress or menstrual periods affect your blood sugar.

Your health care team can teach you how to use your blood glucose meter. Ask how often you should check your blood sugar.

# Options for checking your blood:

- When you wake up. This lets you know your baseline blood sugar.
- Before meals. This lets you know your before-meals blood sugar.
- Two hours after your first bite of a meal. This lets you know how the foods you eat affect your blood sugar.
- Before and after physical activity. This lets you know how activity affects your blood sugar.

Keep a record of your blood sugars and take it with you to appointments. Know your target ranges. Blood sugar target ranges vary from person to person. Work with your health care team to find your target range.

# The following guidelines are from the American Diabetes Association:

Before a meal blood sugar: 80-130mg/dL After a meal blood sugar: Less than 180 mg/dL

Living a healthy lifestyle — blood sugar control, blood pressure control, cholesterol control and not smoking — can prevent or reduce risks of diabetes complications.



# How can I make sure that my meter provides accurate results?

- Keep your meter clean.
- Make sure your strips haven't passed their expiration date.
- Store your strips at room temperature and keep them in their original container.
- Ensure your blood sample is big enough.

# **A1C Testing**

Also called hemoglobin A1C, this is another test that your health care team may do that will show your blood sugar control over the past two or three months. It is a blood test that reflects the average amount of sugar attached to your red blood cells. The American Diabetes Association guideline is 7% or less because it results in fewer complications or damage to the body over time. As with blood sugar target ranges, your doctor may give you a higher or lower A1C target based on your age and/or other factors. Work with your health care team to set your goal.

A1C(%)	eAG(mg/dL) Estimated Average Glucose
6.0	126
6.5	140
7.0	154 (Goal 7.0 or below)
7.5	169
8.0	183
8.5	197
9.0	212
9.5	226
10.0	240
10.5	255
11.0	269
11.5	283
12.0	298

# Problem Solving - Hypoglycemia

Hypoglycemia or low blood sugar happens when the body doesn't have enough sugar to use for energy. This means your blood sugar is less than 70 and you may be having some of the symptoms listed below.

#### Causes:

- Skipped meal or not eating enough food.
- Too much insulin.
- Medicines that cause low blood sugar.
- Unusual amounts of exercise.
- Drinking alcohol without eating.

# **Symptoms:**

- Sweating.
- Shakiness.
- · Heart pounding.
- Irritability.
- Hunger.
- Headache.
- Confusion.
- Blurry vision.
- Tiredness.

#### Call your health care team if:

- Your blood sugar level is ever less than 54.
- You have more than two low blood sugars in a week.
- Another person has to help you to treat your low blood sugar.

# **Need to Know for Family Members**

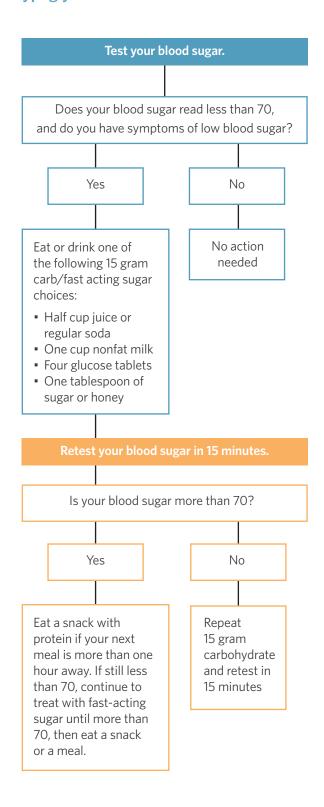
- How and when to check a loved one's blood sugar.
- If unconscious, don't give anything by mouth.
- Learn how to give glucagon if your health care team has instructed you to do so.
- Call 911.

Wear a medical alert bracelet or necklace at all times.

# Glucagon

Glucagon is a hormone that is used to raise blood sugar if you are experiencing a low blood sugar and are passed out or cannot safely swallow. A member of your health care team will teach you how to give this injection if ordered by your provider.

# Hypoglycemia Plan





# Problem Solving - Hyperglycemia

Hyperglycemia or high blood sugar means that your blood sugar is out of your target range and at an unsafe level. You may or may not have symptoms.

#### Why is my blood glucose high in the morning?

You may be experiencing the dawn phenomenon – a surge of hormones that the body produces daily around 4 to 5 a.m. If you are experiencing high morning blood glucoses, talk with your physician or diabetes educator.

#### Causes:

- Skipping a dose of insulin or diabetes medication
- Eating more than usual.
- Less activity than usual.
- Stress or sickness.
- Medications such as steroids.

## Symptoms:

- Extreme thirst or hunger.
- Need to urinate more than usual.
- Sleepiness.
- Blurry vision.
- Slow-healing infections or injuries.

## **Treatment:**

The best way to avoid high blood sugar is to follow your diabetes care plan.

# If your blood sugar remains higher than your target range, follow these steps:

- Check your blood sugar at least every two to four hours.
- Do not take more or less medicine. Only give yourself extra insulin if your doctor has told you to do so.
- Drink plenty of water and stay hydrated.
- Wait one hour after you take the extra insulin or the missed medicine and take your blood sugar again.
- Test for ketones, if the doctor told you to do so. For moderate to large results, call your doctor or go to the emergency room.

# Call your health care team if:

- Your blood sugar is more than 300 mg/dL for two readings.
- Your blood sugar is consistently higher than your target range after treatment to bring it down.
- You start vomiting and cannot keep fluids down.
   Go to the emergency room or call 911.

#### **Need to Know for Family Members**

- How and when to check a loved one's blood sugar.
- If unconscious, do not give anything by mouth.
- Give insulin as prescribed by the health care team.
- When to call 911.

# Sick Day Care

Being sick may make it harder to manage your diabetes. Here are some tips to help you prepare for a possible sick day with diabetes.

Keeping a sick day notebook will help you follow your treatment plan. It also contains important information that can be helpful when calling your health care team.

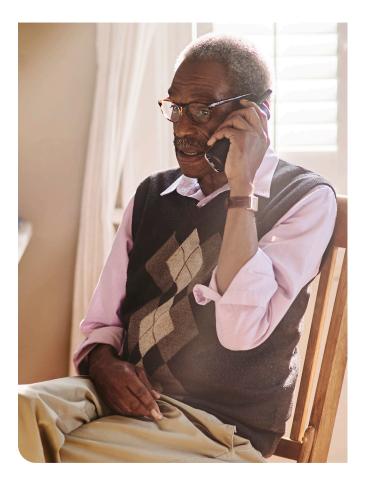
#### Tips:

- Keep taking your diabetes medicine.
- Stay hydrated. Drink plenty of water or no-calorie drinks. Try one to two teaspoons of liquid every 15 minutes if drinking large amounts of fluid makes you vomit.
- Keep a record of your blood sugars.
- Check your blood sugar every two to four hours.
- Check ketones if your health care team has told you to do so.
- Call a member of your health care team if you don't know what to do.

Your health care team includes you and your family; your doctor or nurse practitioner; your diabetes educator; your dietitian and your pharmacist.

## Call your health care team if you:

- Are sick and don't know what to do.
- Cannot keep liquids down for longer than four hours.
- Are vomiting or having diarrhea for more than six hours.
- Have a fever more than 100.4 degrees Fahrenheit.
- Have + ketones.
- Are having trouble breathing.
- Can't stay awake or have trouble thinking.
- Are having severe stomach pains.



If you cannot keep down solid food, drink a cup of water every hour and have **one serving (15g) of a carbohydrate** every hour you're awake. Examples of carbohydrate fluids are:

- ½ cup juice.
- ½ cup regular, caffeine-free soft drink (not diet).
- 1 cup sports drink.
- 1 cup broth-based soup.
- ½ cup gelatin.
- 1 popsicle.

If you are able to keep down solid food, eat your regular meal plan and drink one cup of calorie-free liquid every hour. Examples of liquids are:

- Water.
- Caffeine-free diet soft drinks.
- Plain tea.
- Bouillon or fat-free broth.

# **Taking Medicine**

Some people with diabetes may take medicine to keep their blood sugar in the target range.

- There are oral medicines or pills to treat people with Type 2 diabetes as well as medicines that are injected under the skin.
- Insulin is the most common injectable medicine and may be used for people with Type 2 diabetes and always for people with Type 1.

# Insulin delivery options include:

- Insulin pen.
- Insulin vial and syringe.
- Insulin pump.

(SGLT2) inhibitors.

## **Diabetes Medicine Tips**

- Don't wait to start taking diabetes medicines. Diabetes is serious.
- Talk to your health care team before you change or stop taking your diabetes medicines.
- Ask you health care team about your target blood sugar.

  - My target blood sugar two hours after a meal:
    \_\_\_\_\_\_(for example less than 180 mg/dL)
- Talk with your health care team about what you should do if your blood sugar gets too high or too low.
   Refer to the Diabetes Action Plan.
- Keep a list of your medicines in your wallet (refer to the pocket card in this booklet) or take a picture with your phone.

- Take your medicines at the same time each day; keep a routine.
- Use a plastic pillbox with daily compartments that you fill each week.
- Set reminders on your phone or ask a family member to help you remember.
- Ask your health care team if your diabetes medicine will affect your other medicines.
- If you are taking a steroid such as prednisone or decadron, call your health care provider when your dose is changed. Your diabetes medicine may need to be adjusted.
- Be sure a friend or family member knows how to test your blood sugar, understands your medicine regimen and can assist you if you're unable for any reason.
- Know the members of your health care team and put them in your phone contacts: medical provider (doctor or nurse practitioner), diabetes educator, dietitian and pharmacist.
- Don't hesitate to contact your health care team if you have any questions.

If you're having trouble affording your insulin or diabetes medicine, ask your health care team for available resources. Patient assistance programs are often available.

## Where Diabetes Medicines Work Glucose absorption GLP-1, DPP-4 inhibitors delay gastric emptying. Alpha glucosidase inhibitors Improved insulin sensitivity: block breakdown of complex thiazolidinedione (TZDs), carbs into glucose. metformin (lesser effect). Liver -Decreased glucose production. **Pancreas** Metformin (biguanide). Increased insulin secretion. Sulfonylureas, non-sulf. **Kidneys** Insulin secretagogues, GLP-1 Increased glucose and and DPP-4 inhibitors. sodium excretion. Sodium-glucose co-transporter 2

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# Staying Healthy With Diabetes and Preventing Complications

Over time, elevated blood sugars can damage blood vessels by affecting the lining of the arteries. This damage to the blood vessels can increase your risk of circulation problems. High blood pressure and elevated cholesterol may also contribute to damaging blood vessels and organs as described below.

Organ	Description	What to Do
Eyes	Retinopathy caused by damage to the blood vessels in the back of your eye (retina)	Have a diabetes eye exam at least yearly or as recommended by your doctor. Contact your health care provider if you see new dark spots, or have eye pain or pressure. Ensure your primary care doctor receives a copy of exam by asking your eye doctor to send a report at each visit.
Brain	Cerebral vascular disease. Damage to blood vessels can cause blockage such as clots and can cut off blood flow to areas of the brain. If this happens, you could have a stroke.  Stroke warning signs: B: Balance E: Eye/blurry or loss of vision F: face drooping A: arm weakness S: speech difficulty T: time to call 911	Other stroke symptoms may include confusion, sudden numbness or tingling especially in your arm, leg or one side of your body; trouble seeing; severe headache; dizziness or loss of balance.  A cholesterol medication (statins) and Aspirin (81 mg) is usually recommended for persons with diabetes to reduce your risk of stroke and heart attack. Ask your healthcare provider if taking a statin and aspirin would be right for you."
Heart	Cardiovascular disease. Oxygen is carried by your blood vessels to your heart muscle. If a vessel becomes partially or totally blocked, the blood supply can be cut off. Then you could have a heart attack or myocardial infarction (MI).	Warning signs of a heart attack include: chest pain or discomfort; pain or discomfort in your arms, back, jaw, neck or stomach; shortness of breath; sweating; indigestion or nausea; feeling lightheaded or fatigued.  Diabetes can cause nerve damage and you may not feel the usual symptoms of a heart attack ("silent heart attack").  If you have signs of a heart attack, call 911.
Gums	Periodontal (gum) disease. Bacterial growth in your mouth may lead to tooth and gum destruction.	See a dentist regularly. Contact your dentist if you have bleeding or red, swollen gums or loose teeth. Brush and floss regularly.
Kidneys	Nephropathy. The kidneys work as filters to remove waste from the blood. They also hold on to protein in the blood so that protein doesn't leave your body in urine. The kidneys help control fluid levels in your body. Kidney damage can also affect blood pressure.	Visit your care provider regularly. Keep blood sugar and blood pressure in control. You may need a medication to protect your kidneys. Ask you provider what your blood pressure goal is and if you should be on any medication. Watch your salt intake. Don't smoke and be sure to stay active.
Reproductive Organs	Women may experience vaginal dryness. Men may develop erectile dysfunction (ED).	Keep your blood sugar in control. Talk to your health care provider about symptoms. If you are trying to get pregnant contact your provider to prevent complications
Legs	With peripheral arterial disease (PAD) or peripheral vascular disease (PVD), your legs don't receive enough blood because something is blocking your blood flow.	Discuss symptoms with your health care provider. Exercise as recommended and don't smoke. Ask your provider if aspirin would be right for you.
Feet	Diabetes can affect circulation and nerves in your feet (neuropathy). Feet may feel numb, tingly or painful. You may feel that your feet are too hot or too cold. Your feet also may be slow to heal.	Look at your feet at least daily. Do not soak your feet unless your health care team tells you to. Apply lotion to the tops and bottoms of your feet, but not between your toes. Look for sores, blisters, cuts, calluses, changes of color or temperature. Always protect you feet from injury. Ask your doctor to look at your feet at each visit.



# **Healthy Coping**

Managing your emotional health is just as important as your physical health. People with diabetes have a greater risk of depression and emotional stress than people without diabetes. Stress hormones may increase your blood sugar levels. The daily management of your diabetes may make you feel overwhelmed, increase your stress or worsen your depression. Be sure to take the time to care for your whole person, not just your diabetes.

People under stress or depressed may not take good care of themselves. Signs of emotional stress are:

- Not checking blood sugars.
- Overeating or skipping meals.
- Missing visits to health care team.
- Forgetting to take medicine.
- Exercising less.
- Drinking more alcohol.

How Do I Feel Right Now?					
1	2	3	4	5	
Calm Relaxed Content Happy Peaceful Positive Settled	Nervous Worried Concerned Anxious Fidgety Jittery Unsure	Tense Insecure Confused Lost Upset Sad Impatient	Overwhelmed Agitated Frustrated Irritated Discouraged Cross	Angry Panicked Out of Control Enraged Powerless Frightened Despairing	

If you are feeling anything more than a one on the above scale, seek out resources to help relieve your stress. If your symptoms are above three, contact a member of your health care team right away.

# Ways to deal with stress: Notes: Find a support group. Making friends in support groups may help you learn new ways to cope with stress and diabetes. • Take time to relax. Try yoga, prayer, meditation or exercise to reduce your stress. • Develop relationships. Find people with diabetes who are dealing with similar things. • Establish a routine. • Ask your health care provider about seeing a therapist, counselor or other resource. • Talk with your clergy or spiritual counselor. Don't delay; recognize these signs of depression and seek help: • Trouble sleeping. • Change in appetite. • Trouble concentrating. Loss of energy. • Feeling sad or down in the dumps. Nervousness. Guilt. Suicidal thoughts. Feeling that you just want to give up on life. **Additional Resources** Mercy diabetes page: mercy.net/service/diabetes MyMercy: mymercy.net American Diabetes Association: diabetes.org American Association of Diabetes Educators: diabeteseducator.org American Heart Association: americanheart.org Calorie King: calorieking.com Choose My Plate: choosemyplate.gov Diabetic Living: diabeticlivingonline.com Diatribe: diatribe.com dLife: dlife.com National Diabetes Education Program/National Institute of Health: ndep.nih.gov

# **Blood Sugar Log**

Take this log to your next appointment with your health care team.

Blood Suga	ar Log				
Day/Date	Meal	Diabetes Medication	Before Meal	2 Hours After Meal	Comments
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				

You're the leader of your diabetes health care team. Take this card with you to each of your appointments to help keep track of the care you're receiving. The recommendations are from the American Diabetes Association (ADA).

Hemoglobin ALC (every 3 months)				
Date of Visit	Goal	Actual		

# **Blood Sugar Log**

Take this log to your next appointment with your health care team.

Blood Sugar Log					
Day/Date	Meal	Diabetes Medication	Before Meal	2 Hours After Meal	Comments
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
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	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				
	Breakfast				
	Lunch				
	Dinner				

# **Recommended Tests**

Weight (every visit)				
Date of Visit	Goal	Actual		

Blood Pressure (every visit)					
Date of Visit	Goal	Actual			

# **Recommended Tests**

Lip	ids: total cholesterol (once a year)
	LDL:
	HDL:
	Triglyceride:
	Microalbuminuria (once a year)
	Foot exam (every visit)
	Eye exam (once a year)
	Dental exam (once a year)
	Pneumonia shot
	Flu shot (once a year)
	th my health care team, I have reviewed the owing items:
	Nutrition/meal plan
	Exercise plan
	Blood sugar testing
	Low blood sugar (below 70 or symptoms)
	High blood sugar
	Asprin therapy (if appropriate)
	Foot care considerations
	Diabetes medicine
	Oral diabetes medicine(s)
	Injectable diabetes medicine(s)
	Insulin(s) and how to use
	Sick day management
	Stress management
	Outpatient diabetes self-management  Initial class Refresher class
	Other concerns

# Please fill out the card to the right, detach it and keep it with you at all times.

#### **Medication Identification Alert**

Please obtain medical alert identification such as a bracelet, necklace or ID card. You can obtain these from your pharmacy or online.

# Medication and Allergy Information

Medication
Dosage Time
Medication
Dosage Time
Allergies:

# I have diabetes. If I'm unconscious or acting strangely, my blood sugar may be low.

If I can swallow, give me sugar in some form: sweetened soda, fruit juice, jelly or another source.

If I don't recover within 15 minutes, repeat the above and be sure I get emergency care at a hospital or by my health care team.

If I can't be awakened or can't swallow, DO NOT give me anything by mouth. CALL a doctor or send me to a hospital right away.

# Medication and Allergy Information

Name	
Emergency Contact _	

Medical Information on reverse side.

Notes:		

# My Diabetes Emergency Plan

# Prepare a portable, insulated and waterproof diabetes emergency kit that contains the following items:

- ☐ List of the following information:
  - Type of diabetes
  - All of your medical conditions, allergies and prior surgeries
  - All medications (include pharmacy contact information, active prescription information and eligible refills)
  - Previous diabetes medications and reason for discontinuation
  - Contact information for all your health care professionals and for atleast two emergency contacts
- ☐ Letter from your diabetes health care professionals with most recent diabetes medication regimen (especially if taking insulin), health insurance card, living will, health care power of attorney, etc.
- ☐ Most recent laboratory results (especially A1C, kidney and liver tests)
- ☐ If possible, a 30-day supply of all medications taken by mouth or injection for diabetes as well as all other medical conditions
  - Include insulin and a severe hypoglecemia emergency (e.g., glucagon) kit if prescribed (always check expiration date)
- ☐ Blood glucose testing supplies including, if possible, two glucose meters with extra batteries
- ☐ A cooler with room for four refreezable gel packs, insulin and unusedinjectable medications to be added when ready to go
  - Note: Do not use dry ice and avoid freezing the medication
- Empty plastic bottles or sharps containers for syringes, needles and lancets
- ☐ Source of carbohydrates to treat hypoglycemic reactions (for example, glucose tablets, 6 oz. juice boxes, glucose gel, regular soda, sugar, honey or hard candy)
- ☐ A two-day supply of nonperishable food (for example, peanut butter or cheese crackers, meal replacement shakes or bars, etc.)

- ☐ At least a three-day supply of bottled water
- Pen/pencil and notepad to record blood sugar, other test results and any new signs/ symptoms suggesting medical problems
- ☐ First aid supplies such as bandages, cotton swabs, dressings and topical medications (antibiotic ointments or creams)



## Other recommendations:

- Wear shoes and socks while awake and examine your feet often for cuts, sores, red spots, swelling, blisters, calluses and infected toenails or any unusual condition
- ☐ Make sure that all vaccinations, including tetanus, are up to date
- ☐ Pack extra comfortable clothing, including undergarments
- ☐ Take a mobile phone with an extra charger or extra batteries for you and family members
- ☐ Choose a designated meeting place in case you are separated from your family and/or significant others and are unable to reach them by phone

