

Diabetes may affect many parts of your body. Keeping blood glucose in target range will help you feel well, have more energy and reduce your risk of complications.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

My medication plan is:	Medicine	Dose	Time	Notes

**Mark the days and times to check blood glucose:**

**Days:**  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

**Times:**  Before Breakfast  Before Lunch  Before Dinner  Bedtime  
 After Breakfast  After Lunch  After Dinner  Middle of the Night

**Goals:** Pre-Meal: 90-130 or \_\_\_\_\_ 2 hours after meal: 110-160 or \_\_\_\_\_ Bedtime: 110-150 or \_\_\_\_\_

**Use the results:**

- Write them down on a log sheet or record book. Bring them to your next appointment.
- Look for patterns in the numbers. The results help you and your provider make decisions about your diabetes treatment plan.

Labs and Exams	Goal/How Often	My Results	My Action Plan
<b>A1C</b>	Less than 7% 2-4 times a year		<p><i>Write down details for taking the first step!</i></p> <input type="checkbox"/> Take diabetes medicine according to plan <input type="checkbox"/> Check blood glucose at times chosen above. Write down results. <input type="checkbox"/> Review blood pressure medicines <input type="checkbox"/> Make appointment for dilated eye exam <input type="checkbox"/> Check feet every day <input type="checkbox"/> Meet with diabetes educator <input type="checkbox"/> Meet with registered dietitian for meal plan <input type="checkbox"/> Lose weight (2-4 pounds/month) ( <i>how?</i> ) <hr/> <input type="checkbox"/> Increase physical activity ( <i>how?</i> ) <hr/> <input type="checkbox"/> Make better food choices ( <i>how?</i> ) <hr/> Other: _____
<b>Blood Pressure</b>	Less than 130/80 Every visit		
<b>Cholesterol</b>	LDL less than 100 or _____ Once a year		
<b>Microalbumin</b>	Less than 30 Once a year		
<b>Dilated Eye Exam</b>	Once a year		
<b>Foot Exam</b>	2-4 times a year		
<b>Weight</b>	Short-term goal _____ Every visit		
<b>Flu Shot</b>	Once a year		

**When to call the healthcare provider:**

1. If your blood glucose falls below 70 and you don't know why or if you become unconscious
2. If you are sick and unable to take liquids because of nausea or vomiting
3. If you have a fever over 101° or a pain that lasts
4. If your blood glucose is 250 or higher twice in a row with or without ketones
5. If you are just unsure of what to do

**Schedule your next appointment:**  1 month  3-4 months  6 months  1 year **Other:** \_\_\_\_\_

# My Diabetes Care Plan



Prepared by  
**Joslin Diabetes Center**

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# Making Healthy Food Choices

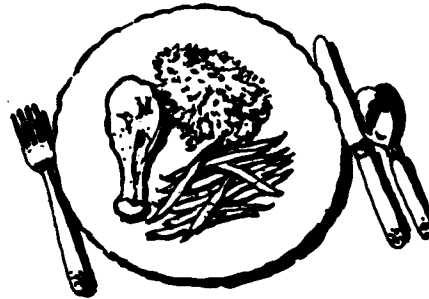


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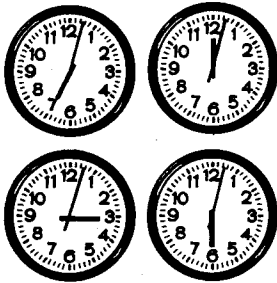
Eating the right types and right amounts of foods can help you control your diabetes and achieve a weight that is healthy for you.



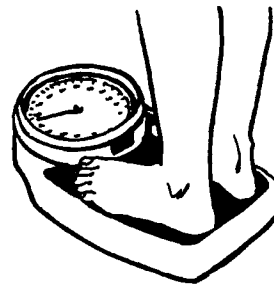
Eat a variety of foods from all food groups.



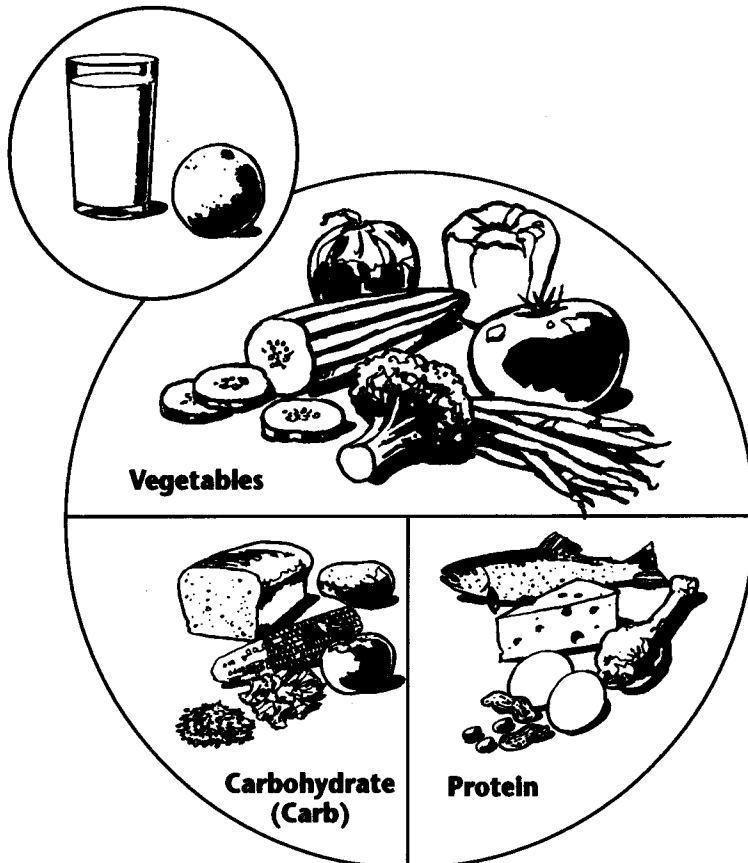
Eat about the same amount of carbohydrate foods each day.



Eat meals at the same time each day and don't skip meals.



Eat less if you want to lose weight.



## Tips to Make a Healthy Meal

- Fill 1/2 of your plate with non-starchy vegetables (broccoli, green beans, carrots, green salad)
- Fill 1/4 of your plate with carb (bread, potato, rice, pasta or starchy vegetables). Choose carbs that are also good sources of fiber.
- Fill 1/4 of your plate with protein foods (3-4 ounces of lean meat, poultry or fish)
- Use 1-2 tsp. of tub margarine or a heart-healthy vegetable oil
- Add a small piece of fruit or 8 ounces of skim/low fat milk

Ask your healthcare provider for help in scheduling a visit with a registered dietitian (RD).

## Getting Started

Write down one change you can make in your eating pattern.

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**Remember:** Regular physical activity (such as walking) is also important for diabetes control.