

# **About Diabetes**

Diabetes is a disease in which your body cannot use the food you eat for energy. Your cells need energy to live and grow.

When you eat, food breaks down into a form of energy called glucose. Glucose is another word for sugar. The glucose goes into your blood and your blood sugar rises. Insulin is a hormone made by your pancreas. It helps glucose move from your blood into your cells so your body can use it for energy. People cannot live without insulin.

There are three main types of diabetes.

- In Type 1 diabetes, the pancreas makes no insulin.
- In Type 2 diabetes, the pancreas does not make enough insulin or your body is not able to use the insulin the pancreas makes.
- In gestational diabetes during pregnancy, the mother is not able to make enough insulin to cover the needs of both mother and baby.

### **Risk Factors for Diabetes**

You are more at risk for getting diabetes if you:

- Are from a family where others have diabetes
- Are overweight
- Are over age 45
- Are inactive
- Had diabetes during pregnancy (gestational diabetes) or a baby weighing 9 pounds (or 4 kilograms) or more at birth
- Are of African, Asian, Latino, Native American, or Pacific Islander decent



# **DIABETES CARE:** About Diabetes

# **Signs of Diabetes**

- Very thirsty
- Feeling tired
- Use the toilet often to urinate
- Blurred vision
- Weight loss
- Wounds are slow to heal
- Constant hunger
- Itchy skin
- Infections
- Numbness or tingling in feet and/or hands
- Problems with sexual activity

Often people have no signs even though their blood glucose level is high. You can be checked for diabetes with a blood test.

### **Your Care**

The goal is to keep your glucose level as near to normal as possible. Your care may include:

- Planning meals
- Testing glucose levels
- Learning signs to know when your glucose level is too low or too high
- Exercising
- Taking medicine insulin or pills
- Keeping all appointments with your health care team
- Attend diabetes classes

Talk to your doctor, nurse and dietitian to learn how to manage your diabetes.

### You don't have to do this alone!

For classes and one on one support with diabetes care call Alliance Health Programs at **510-747-4577**.

Toll-Free: 1-877-932-2738;

CRS/TTY: 711 or 1-800-735-2929;

8 a.m. to 5 p.m., Monday-Friday.

www.alamedaalliance.org

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# The Diabetes Team

With diabetes it can seem like a big task to stay healthy. One way you can help yourself is to act like the coach of a sports team. A coach gets a team together to win. With diabetes you need a health care team to win. With the right team you will be able to make the changes you need to stay healthy.



# These are some of the people you might need on your team:

### **Family and Friends**

The people close to you should understand about diabetes. Their support for the kinds of things you need to do will help you manage your diabetes.

# Your Primary Care Provider (PCP or regular doctor)

The most central member of your team is your Primary Care Provider. This is the person who will help you to get the medical care you need. He or she will be the one to refer you to other members of your team. Your PCP should be someone you trust and feel you can talk to about your concerns.

### Ophthalmologist/Optometrist

These are eye doctors. They do special exams for people with diabetes. It is important for you to have regular eye exams. The eye exam should include dilation of your eyes, at least once a year. This is when the pupils of your eyes are opened wide with eye drops so the doctor can see the inside of your eye.

#### **Podiatrist**

Podiatrists are doctors who take care of feet. People with diabetes have to take special care of their feet. It is a good idea to go to a podiatrist before you have any major problems with your feet.



#### Dietitian

Dietitians teach how to eat well so you can control your blood sugar. They are also called RDs (Registered Dietitians). When you see a dietitian you will learn about the types of food to eat, how much to eat and when it is the best time to eat. You will also learn how to manage your medications and your meals. Dietitians can also show you how to fit your favorite foods into a healthy diet.

### **Pharmacist**

A pharmacist explains:

- How to use meds
- When to take meds
- What the side effects might be

Don't be afraid to ask for help when you pick up your medicines.

### **Endocrinologist**

This doctor is an expert in diabetes treatment. He or she will review your medicines, lab tests, diet, and exercise program. Not everyone needs to see this type of doctor.

#### **Track Your Diabetes**

One tool that has been helpful to people with diabetes is the Diabetes Health Record. One is enclosed with this mailing. This card can be used to track different tests and results. You may already have your own way of tracking this information, but if you do not, please give this Health Record a try.

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# **High Blood Sugar**

High blood sugar means having too much sugar called glucose in the blood. High blood sugar is also called hyperglycemia. The body's cells need blood sugar.

A normal blood sugar level is 70-100. You may have diabetes if your blood sugar level is above 126. Your fasting blood sugar level (before meals) should be below 130. Ask your doctor what blood sugar level is high risk for you and when you should call for advice or get help.

An **A1c** test measures average blood sugar over 4 - 6 weeks' time. You should have your **A1c** tested every 3 to 6 months.

You may not feel any signs of high blood sugar, but damage can happen in your body. High blood sugar over years can damage the eyes, kidneys, blood vessels, heart, nerves, and feet.

### Causes

The most common reasons for high blood sugar in people with diabetes are:

- Not taking enough insulin or diabetes pills
- Missed, skipped or delayed diabetes medicine
- Eating too much food
- Eating foods high in sugar or carbohydrates

High blood sugar can get worse because of:

- Stress
- Infection or illness
- Certain medicines such as steroids
- Pregnancy





# **DIABETES CARE:** High Blood Sugar

# **Signs**

High blood sugar affects people in different ways. Some people have no warning signs. High blood sugar may happen slowly over time.

You may have one or more signs of high blood sugar. Family members may notice these signs before you do.

- Extreme thirst
- Urinate often
- Increased hunger
- Blurred vision
- Weight loss or gain
- Feeling tired or sleepy
- Feeling moody or grumpy
- Slow healing of wounds
- Numbness in feet or hands
- Vaginal itching or have vaginal infections often
- Impotence
- Skin itching
- Skin infections such as boils

### **Your Care**

See your doctor if you have signs of high blood sugar. Talk to your doctor about the cause of your high blood sugar. You may need to take medicine to control your blood sugar, or you may need to change how you eat and exercise.

If you have diabetes, control high blood sugar by keeping to your diabetes treatment plan:

- Follow your meal plan.
- Take your insulin shots and pills as prescribed.
- Test your blood sugar often and keep a record of the results.
- Follow your activity routine.
- Contact your doctor if you see patterns of high blood sugar.
- Follow your sick day plan if you are ill.
- $\bullet$  Keep all appointments with your health care team.

If not treated, high blood sugar can lead to coma and even death.

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# **Low Blood Sugar**

Low blood sugar means not having enough sugar, also called glucose, in the blood. Low blood sugar is also called hypoglycemia, insulin shock or insulin reaction. Glucose is needed by the body's cells. A normal blood sugar level is 70 to 100. A blood sugar level below 70 is low.

### **Causes**

Sometimes the cause is not known, but it may be from:

- Too much insulin or diabetes pills
- Meals that are skipped or delayed
- Too much exercise or unplanned exercise

# Signs

There may be no warning signs or you may:

- Feel dizzy, shaky, nervous, weak or tired
- Sweat
- Feel hungry
- Feel moody or grumpy or not think clearly
- Not be able to speak
- Have blurred vision
- Feel a fast heart beat
- Feel numb around the mouth or lips
- Have a headache
- Too much exercise or unplanned exercise





#### **Your Care**

When your blood sugar is low, you need to eat or drink food with sugar. Do not eat too much. Your blood sugar may go too high. Eat or drink one of these:

- ½ cup (or 120 milliliters) of juice or soda (no diet, sugar free or calorie free drinks)
- 3 or 4 glucose tablets
- 1 tablespoon (or 15 milliliters) of sugar
- 1 cup (or 240 milliliters) of milk

Check your blood sugar in 15 minutes. If your blood sugar is still less than 70 or if you are not feeling better, eat or drink another serving of food or drink from the list.

When your blood sugar is 70 or more, you still need to eat something to keep your blood sugar from dropping again.

- If it is time for your next meal soon, eat your normal meal.
- If your next meal is more than an hour away, eat a snack. Try one of these:
  - Half a sandwich and 1 cup (or 240 milliliters) of milk, or
  - 3 crackers, 2 ounces of cheese and a small apple

# To Prevent Low Blood Sugar

- Follow your meal plan. Eat meals and snacks at the same time each day. Do not miss or delay meals.
- Check and record your blood sugar levels. If you have low blood sugars more than 2 times in a week, call your doctor or diabetes educator. Changes may need to be made to your diet, medicine or exercise routine.
- Take your diabetes medicine as directed. Do not take extra diabetes medicine without your doctor's advice.
- Exercise regularly.



# **To Stay Safe**

- Keep food such as crackers, gels and juice with you at all times.
- Tell other people who work or live with you that you have diabetes and how to treat low blood sugar.
- Wear a medical bracelet or necklace to tell others that you have diabetes during a medical emergency.
- If you have Type 1 diabetes, people close to you should learn how to give a glucagon shot. Glucagon is a hormone used to raise blood sugar when a person is not alert or awake. A nurse can teach them how to give a glucagon shot.
- Call your doctor when you have frequent low blood sugars or wide swings from high to low.
- Talk with your doctor and dietitian before starting a weight loss diet.
- Keep all your appointments with your doctor, diabetes nurse and dietitian.

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# **How To Use A Glucose Meter**

A glucose meter is used to check your blood glucose or blood sugar level. This is needed to help you manage your diabetes. There are many brands of meters. Your nurse or pharmacist can help you learn about your meter.



Follow these steps to check your blood sugar with a meter.

# **Getting Ready**

- 1 Wash your hands with warm water and soap for at least 15 seconds then rinse and towel dry.
- 2 Get your supplies:
  - Your meter
  - Test strips
  - Lancing device
  - Needle, often called a lancet
  - Needle disposal or sharps container
- 3 Open the lancing device and put a needle in. Take the cap off the needle. Do not touch the needle.
- 4 Put the cover back on the device. Set the spring on the device so it is ready to be used to stick you.
- **5** Get a test strip out of the bottle or package. Put the cap back on the bottle.

- **6** Put the strip in the meter. This will turn the meter on.
- 7 Match the code on your meter screen with the code for your test strips.
  - The code is printed on the test strip bottle or package.
  - If your meter has the code built into the strips, go to the next step.
- **8** When the test strip symbol flashes on the screen, the meter is ready for a drop of blood.



# **Checking Your Blood Sugar**

- 1 Pick up the lancing device and put it against the side of one of your fingers.
- 2 Push the button on the device to release the needle. You will feel the needle stick. Set the device down.
- 3 Squeeze your finger at its base to get a large drop of blood.
- 4 Where you put the blood on the test strip depends on the type of strip you have:
  - Touch the end of the test strip to the drop of blood, or
  - Put the blood drop on the test area of the strip.
- **5** Be sure that the test area on the strip fills completely with blood.
- 6 The meter will time the test and then your blood sugar number will show on the screen.
- 7 Write your blood sugar number in your log book or blood sugar diary.

# **Cleaning Up the Supplies**

- 1 Remove the test strip and throw it away in your in your needle disposal container.
- 2 Remove the needle from the device. Throw the needle into a needle disposal container or other puncture proof container.



- 3 Put your supplies away. Store the needle container away from children and pets.
- 4 Wash your hands again with water and soap.

Talk to your doctor, nurse, diabetes educator or pharmacist if you have questions about your meter and doing your glucose testing.

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# How to Give an Insulin Injection

To control your diabetes you may need to take insulin. Insulin can only be given by injections, also called shots. Your doctor will tell you how much insulin to take and how often to take it.



# **Getting Ready**

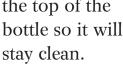
- 1 Gather the needed supplies:
  - Insulin
  - Insulin syringe
  - Alcohol pad
- 2 Wash your hands with warm water and soap. Dry your hands.

### What to Do Next

- 1 Check the label on the insulin bottle to make sure you are using the correct insulin.
- 2 Check the expiration (end) date on your insulin bottle. **Do NOT Use** expired insulin. Throw away any insulin left in the bottle 30 days after you first open the bottle.
- Gently roll the bottle of insulin between your hands until it is mixed. Do not shake the insulin bottle because this can cause air bubbles.

Wipe off the top of the insulin bottle with an alcohol pad.

Do not touch the top of the





# **DIABETES CARE:** How to Give an Insulin Injection

**5** Take the syringe out of its package or remove the plastic cap.



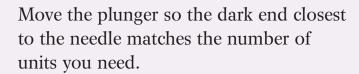
**6** Take off the needle cap and place it on the table.



**7** Pull the plunger of the syringe down to the number of units of insulin you need. The syringe will fill with air.

The syringe has small lines and numbers. Look at the type of needle you have.

- If you are using a 50-unit syringe, the space between each line is 1 unit.
- If you are using a 100-unit syringe, the space between each line is 2 units.



8 Carefully put the needle through the rubber stopper of the insulin bottle. Push the air into the bottle by pushing the plunger all the way down. Putting air in the bottle makes it easier to get the insulin

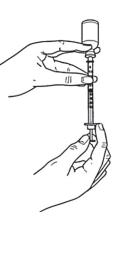
out of the bottle.



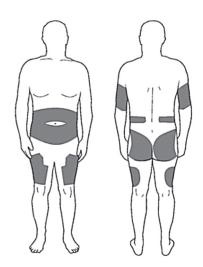
- Turn the insulin bottle upside down with the syringe still in place.
  - Support the needle in the bottle so it does not bend.
  - Pull the plunger down to the number of units of insulin you need.
- ① Check for air bubbles in the syringe. Air bubbles will not hurt you, but will take the place of insulin. This could cause you to get less insulin than you need because there is no insulin in the air bubble.

If you see air bubbles:

- Tap the syringe firmly with your fingertip to move the bubbles to the top of the syringe.
- Push the plunger
   up a few units
   until the air bubbles go back into the insulin bottle.
- Pull down on the plunger and fill the syringe with the correct amount of insulin.
- Check again for air bubbles.
- Take the needle out of the insulin bottle.



### Select the Site for the Shot



- 1 Sites which can be used are:
  - Back of upper arms
  - Abdomen (around navel)
  - Front and side area of thighs
  - Back above waist
  - Buttocks
- 2 Stay 1 inch away from previous injections.
- 3 Stay 2 inches away from your navel or scars.
- **4 Do not** use sites that are bruised, tender or swollen.

# **Giving the Insulin**

1 Clean the site with an alcohol pad. Let the alcohol dry. If you have just showered or bathed, you do not need to clean the site again.



- 2 Pinch up and hold the skin of the site with one hand.
  - Hold the syringe like a dart or pencil as shown in the picture.
- 3 Put the needle straight into the skin at a 90 degree angle.
  - Use a quick motion.
  - The quicker you put the needle in, the less it hurts.
  - Push the needle all the way into the skin.
- 4 Let go of the pinch of skin unless you are told not to.
- 5 Push the plunger all the way down until all the insulin is in. Wait 5 seconds.
- seconds.

  6 Remove the needle. Put your finger on the site and apply
- **7** Check the site for any redness, bleeding or bruising. Put a band-aid on the site if there is bleeding.

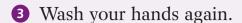
pressure for 30 to 60 seconds.



# **DIABETES CARE:** How to Give an Insulin Injection

# **Clean Up the Supplies**

- 1 Do not recap the needle. Put the used syringe, needle and cap into a needle disposal container. Your drug store can give you a free container.
- 2 Be sure to store new and used syringes and needles out of the reach of children and pets.



- Store the insulin in the refrigerator between shots.
- 5 When the needle disposal container is <sup>3</sup>/<sub>4</sub> full, mail in or drop off at a toxic waste site. (Call **1-800-606-6606** for more details.) **Do not** put the container with needles in the trash.

Talk to your doctor or nurse if you have any questions or concerns.



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### www.alamedaalliance.org

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# **DIABETES CARE**

# **Foot Care Tips**

# 1. Check your feet every day.

- ✓ Look at your bare feet every day for cuts, blisters, red spots, and swelling.
- ✓ Use a mirror to check the bottoms of your feet or ask a family member for help if you have trouble seeing.

# 2. Wash your feet every day.

- ✓ Wash your feet in warm, not hot, water every day.
- ✓ Dry your feet. Be sure to dry between the toes.

### 3. Keep the skin soft and smooth.

✓ Rub a thin coat of lotion over the tops and bottoms of your feet, but not between your toes.

# 4. Smooth corns and calluses gently.

- ✓ If your doctor tells you to, use a pumice stone to gently smooth corns and calluses.
- ✓ Do not use over-the-counter products or sharp objects on corns and calluses.

# 5. If you can see, reach, and feel your feet, trim your toenails regularly. If you cannot, ask a foot doctor (podiatrist) to trim them for you.

✓ Trim your toenails straight across and smooth the corners with an emery board or nail file.

### 6. Wear shoes and socks at all times.

- ✓ Never walk barefoot.
- ✓ Wear shoes that fit well and protect your feet.
- ✓ Feel inside your shoes before putting them on to make sure the lining is smooth and that there are no objects inside.













- ✓ Wear shoes at the beach and on hot pavement.
- ✓ Wear socks at night if your feet get cold.
- ✓ Do not test bath water with your feet.
- ✓ Do not use hot water bottles or heating pads on your feet.

# 8. Keep the blood flowing to your feet.

- ✓ Put your feet up when sitting.
- ✓ Wiggle your toes and move your ankles up and down for 5 minutes, two or three times a day.
- ✓ Do not cross your legs for long periods of time.
- ✓ Do not smoke. Call 1-800-NO-BUTTS (1-800-662-8887) for free help with quitting.



# 9. Be active every day.

✓ Talk to your health care team about safe ways you can be more active.

# 10. Check with your health care team.

- ✓ Have your doctor or nurse check your bare feet at each visit.
- ✓ Have them tell you if you have foot problems or may get foot problems in the future. Remember that you may not feel the pain of an injury.
- Call your health care team right away if you find a cut, sore, blister, or bruise on your foot that does not begin to heal after a few days.



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This handout was adapted from National Diabetes Education Program, *Take Care of Your Feet for a Lifetime*, August 2012.

Live Healthy 16-D April 2013

# **Control Diabetes: Why do I need insulin?**

If you have type 1 diabetes, your pancreas cannot make any insulin. You must take insulin to live. If you have type 2 diabetes and need insulin it is because all the other medicines are not working to keep your blood sugar where it needs to be to prevent problems. Keep in mind, insulin does not cause the problems. **High blood sugar** causes the damage to organs and your body.

### What do I need to know about insulin?

You take insulin as a shot. You inject the insulin just under the skin with a small, short needle.

### Can insulin be taken as a pill?

No. Insulin is a protein. If you took insulin as a pill, your body would break it down and digest it before it got into your blood to lower your blood glucose.

#### How does insulin work?

Insulin lowers blood sugar levels by moving sugar (glucose) from the blood into the cells of your body. Once inside the cells, glucose provides energy. Insulin lowers your blood glucose whether you eat or not. This is why you must eat on time if you take insulin.

#### How often should I take insulin?

Most people with diabetes need at least two insulin shots a day. Some people take three or four shots a day. Your doctor works with you to get good glucose control.

#### When should I take insulin?

Take insulin 30 minutes before a meal if taking regular or long-acting insulin. If you take a fast-acting insulin, you should take your shot just before you eat.

# How many types of insulin are there?

There are six main types of insulin. Each one works at it's own speed - fast, medium, or slow. Many people take two types of insulin

# Does insulin work the same all the time?

After a short time, you will get to know when your insulin starts to work, when it works its hardest to lower blood glucose, and when it finishes working. You will learn to match your mealtimes and exercise times to the time when each insulin dose you take works in your body.



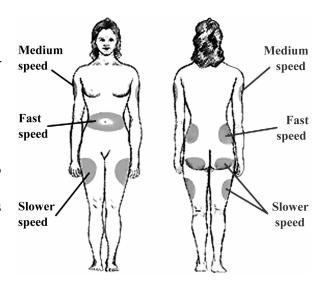


### How quickly or slowly insulin works in your body depends on many things.

- Your own body.
- The place on your body where you inject insulin.
- The type and amount of exercise you do.
- The length of time between your shot and exercise.

### Where on my body should I inject insulin?

You can inject insulin into many places on your body. Inject near the stomach and it works fastest. Inject into the thigh and it works slowest. Inject into the arm and it works at medium speed. Ask your doctor or diabetes teacher to show you the right way to take insulin and in which parts of the body to inject it.



#### How should I store insulin?

- Keep the bottle you are using at room temperature.
- Once open, write the date 30 days away on your bottle. Do this every time you open a bottle. For example, if today's date were 11/14/03 then you would write 12/14/03 on the bottle.
- Throw away the bottle after the 30 days have passed.
- Do **not** keep the bottle in very cold places like the freezer.
- Do **not** keep the bottle in hot places such as the trunk of the car or by a window.

**Heat and extreme cold breaks down insulin and it will not work.** It is helpful to keep extra bottles of insulin in your house. Make sure to store all extra bottles in the refrigerator.

### What are some side effects of insulin?

The most common side effects are weight gain and having low blood sugar (glucose). You need insulin to keep your blood sugar in good control. Your doctor will work with you to get the best treatment plan to keep you living well with diabetes.

#### For more information

For classes and one on one support with diabetes care call Alliance Health

Programs at 510-747-4577. www.alamedaalliance.com

# Control Diabetes: My Action Plan to Control My Blood Sugar

I wi	ll ask my doctor
$\overline{\mathbf{V}}$	What is my A1c goal?
$\checkmark$	What is my blood sugar goal before meals (testing at home)?
V	What is my blood sugar goal at bedtime (testing at home)?
I wi	ll work on the following three goals over the next two weeks to control my blood sugar.
1	
<b>2.</b> _	
3 1	Note: Pick things that you really want to do. For example, I will eat vegetables in my daily meals.
Her	e are 3 people who can help me do these things (e.g., friend, co-worker, doctor).
1	
2	
s	
1	main reasons to keep my blood sugar in a good range.
2 3.	
	Il review this plan in two weeks. First review date:
At tl	his time I will see what is working and what is not. I will change what is not working.
	Il reward myself for what I have been able to do. My reward will be
I wi	Il keep working on my goals for 10 more weeks. It takes about three months to make any avior change a habit.
	ow that my goals will change over time. I will write out a new plan at least every three oths. I will place my action plan where I will see it often. <i>I can do this!</i>
Sign	nature: Date:
	$\kappa_{A}^{LTH} E_{D_{L}}$
	ED HEALTH EDUCATION

DIABETES SELF-MANAGEMENT

# **Diabetes Health Record**

Discuss these with your diabetes care provider and use this to record your results. Fold to fit into your wallet.

Note: You may require other tests that are not listed.

B: ·	1	1	
Review Blood			
Sugar Records (every visit)	Date:		
Target:			
Blood Pressure	Date:		
(every visit) Target:	Value:		
Weight (every visit)	Date:		
Target:	Value:		
Body Mass Index	Б.		
(BMI)	Date:		
(every visit) Target:	Value:		
Foot Exam (every visit)	Date:		
Dental Exam (every six months)	Date:		
Dilated Eye Exam (every year)	Date:		
A1C Blood test to measure	Date:		
past 3 mos. blood sugar level (every 3 months) Target:	Value:		
Albumin/Creatinine Ratio Urine kidney test	Date:		
(every year) Target:	Value:		
Serum Creatinine (GFR)	Date:		
Blood kidney test (every year) Target:	Value:		
Cholesterol	Date:		
(every year) Target:	Value:		
HDL	Date:		
(every year) Target:	Value:		
LDL	Date:		
(every year)	Value:		
Target: Triglycerides	Date:		
(every year)			
Target:	Value:		
Flu Shot (every year)	Date:		
Pneumonia Vaccine (at least once/ask provider)	Date:		
Hepatitis B Vaccine ages19-59 (ask provider)	Date:		
Tuberculosis (TB)/PPD Status	Date:		
Depression Screening	Date:		
Smoking/Tobacco Exposure (every visit)	Date:		
Sexual Health Family Planning (every visit)	Date:		

# Discuss these issues often with your health care provider to improve your diabetes management skills:

- Medications
- Nutrition Therapy
- Physical Activity
- Weight Management
- Complications
- Aspirin Therapy

- Hypoglycemia (low sugar)
- Hyperglycemia (high sugar)
- Sick Day Rules
- Psychosocial Issues
- Pre-pregnancy Counseling
- Pregnancy and Post-pregnancy Management

If you smoke and want to quit, call the California Smoker's Helpline 1 -  $8\,0\,0$  -  $N\,O\,B\,U\,T\,T\,S\,$  or 1-  $8\,0\,0$  -  $6\,6\,2$  -  $8\,8\,8\,7\,$ 

# **Diabetes Health Record**

Your Name
Todi Name
Diabetes Care Provider
Diabetes Care Flovidei
Disheles Core Desider Telephone
Diahetes Care Provider Telephone

### Take Charge of Your Diabetes!

Medications – list your medications here and discuss with your diabetes care provider at every visit





The Diabetes Health Record is based on the *Basic Guidelines for Diabetes Care* and was developed by the Diabetes Coalition of California, in collaboration with the California Diabetes Program.

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Download the Diabetes Health Record in multiple languages and the Basic Guidelines for Diabetes Care at

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