

Diabetes Diary

Name: _____

Date: _____

Important Contact Information

Doctor or case manager:

Hospital or emergency room:

Other emergency contact information:

(parent, relative, or friend)

In case of life-threatening emergency, **call 911**

Ambulance: _____

Blood glucose target: _____ to _____

(In general, the goal is 80 - 120 mg/dL, measured before meals.)

Blood pressure target: _____ / _____ or less

(Normal BP is 130/85 or less; ideal BP is 120/80 or less.
For diabetics with renal failure, ideal BP is 120/75 or less.)

Weight target: _____ lbs This is a BMI target of: _____

Current BMI is: _____

(In general, aim for a body mass index of 25 or less – check the [BMI calculator](#) to determine yours, or ask your doctor.)

Exercise targets:

_____ minutes of _____ every day three times a week once a week other _____
 _____ minutes of _____ every day three times a week once a week other _____
 _____ minutes of _____ every day three times a week once a week other _____

Daily medicines

Amount (dose)

When to take

Daily medicines	Amount (dose)	When to take

Last HbA1c test result: _____ percent (Date tested: _____)

(This test tells you if your blood glucose has been under control for the past 8-12 weeks; HbA1c test result should be less than 7 percent.)

Next physical exam: _____

Next eye exam: _____

Next HbA1c test due on: _____

Week of:	Blood glucose		Took your daily meds?	Blood pressure	Weight	Exercise (List type of activity)	How long?	Checked your feet?	Notes
	AM	PM							
Sunday									
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									