

LARGE PRINT



Blood Sugar Log

Before and after meals, made easy to keep

Your numbers • low blood sugar steps • how to check • weekly log

Type in it on screen, or print as many copies as you like

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Understanding Your Numbers

TARGETS AND LOW BLOOD SUGAR • FROM THE CDC



The CDC gives these ranges for most people with diabetes who are not pregnant.

Your own target may be different, based on your age, health and care plan.

CDC RANGE

MY TARGET (FROM MY DOCTOR)

Before meals

80 to 130 mg/dL

1 to 2 hours after a meal

Below 180 mg/dL

Low blood sugar: below 70 mg/dL

Signs: fast heartbeat, shaking, sweating, nervousness, irritability or confusion, dizziness, hunger.

The 15–15 rule

1. Have 15 grams of carbs, then wait 15 minutes.
2. Check your blood sugar again. If it is still below 70, repeat.
3. Once it is back in your target range, eat a snack or meal with protein and carbs.

About 15 grams of carbs is:

- 4 oz (1/2 cup) of juice or regular, non-diet soda
- 1 tablespoon of sugar, honey or syrup
- 3 to 4 glucose tablets, or 1 dose of glucose gel (follow the label)

Severe low: below 54 mg/dL

The person will often need someone to help. Glucagon is the best treatment; contact a doctor right after giving it.

If they pass out or cannot swallow safely: give nothing by mouth, call 911.

How to Check Your Blood Sugar

WITH A FINGER-STICK METER • BASED ON CDC ADVICE



1

Make sure the meter is ready

Charged or with a good battery, and strips that are in date.

2

Wash and dry your hands

with soap and warm water before every check.

3

Get the blood flowing

Massage or shake out your hand first.

4

Prick the side of a fingertip

with the lancet, then gently squeeze from the base of the finger.

5

Put the drop on the strip

and place the strip in the meter. The reading appears in seconds.

6

Write it in your log

with the time, and a note on anything that may have affected it.

7

Throw away the lancet and strip

safely, in a trash container.

8

Never share your equipment

especially lancets, even with family. Ask your doctor when to check.

My Details



KEEP THIS PAGE WITH YOUR LOG • TAKE IT TO EVERY APPOINTMENT

NAME _____

DOCTOR & PHONE _____

DIABETES NURSE OR EDUCATOR _____

PHARMACY & PHONE _____

MY METER (MAKE & MODEL) _____

WHEN MY DOCTOR WANTS ME TO CHECK _____

MY LOW BLOOD SUGAR PLAN (FROM MY DOCTOR)

MY DIABETES MEDICINES AND INSULIN

MEDICINE	DOSE	WHEN I TAKE IT

Weekly Blood Sugar Log

BEFORE AND AFTER MEALS • WRITE THE READING IN mg/dL • PAGE 1 OF 2



WEEK STARTING _____

BREAKFAST

LUNCH

DINNER

BED

DAY	BEFORE	AFTER	BEFORE	AFTER	BEFORE	AFTER	BEDTIME	NOTES / MEDICINE
Mon	time	time	time	time	time	time	time	
Tue	time	time	time	time	time	time	time	
Wed	time	time	time	time	time	time	time	
Thu	time	time	time	time	time	time	time	
Fri	time	time	time	time	time	time	time	
Sat	time	time	time	time	time	time	time	
Sun	time	time	time	time	time	time	time	

Big box: the reading. Small line: the time. After = 1 to 2 hours after the meal.

Weekly Blood Sugar Log



BEFORE AND AFTER MEALS • WRITE THE READING IN mg/dL • PAGE 2 OF 2

WEEK STARTING _____

BREAKFAST

LUNCH

DINNER

BED

DAY	BEFORE	AFTER	BEFORE	AFTER	BEFORE	AFTER	BEDTIME	NOTES / MEDICINE
Mon	time	time	time	time	time	time	time	
Tue	time	time	time	time	time	time	time	
Wed	time	time	time	time	time	time	time	
Thu	time	time	time	time	time	time	time	
Fri	time	time	time	time	time	time	time	
Sat	time	time	time	time	time	time	time	
Sun	time	time	time	time	time	time	time	

Big box: the reading. Small line: the time. After = 1 to 2 hours after the meal.

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