



DIABETES LOGBOOK



Name : _____

Phone number : _____

Doctor's Name : _____

What are my blood glucose targets?

Time	My Target Range*
 Before meals	
 2 hours after start of a meal	
 Bedtime	
Other times	

*Please consult your doctor about your blood glucose target ranges.

WELCOME

Welcome to your Accu-Chek® diabetes logbook. Use this to keep track of your diabetes test results, insulin dose, food intake and more. This logbook will ease the process of recording your numbers, and will help you understand your blood glucose results even better so you can make informed and necessary decisions along with your healthcare professional's guidance.

You will find also find more information on different topics related to diabetes and blood glucose monitoring on the following pages:



HOW TO USE YOUR LOGBOOK

Use this logbook to learn more about what affects your blood glucose levels.

1. Fill in the date
2. Fill in your blood glucose value in the correct column
3. Fill in the amount of insulin you have injected (if applicable)
4. Add any additional comments that you might have e.g. if you have done exercise, what you have eaten etc.

Date		Breakfast		Lunch		Dinner		Before Bed	Comments
		Before	2hrs After	Before	2hrs After	Before	2hrs After		E.g. food intake, exercise etc.
1 Monday 12 May 2022	Blood Glucose	5.4	9.0	8.9	6.6	6.5	7.5		20 minute walk after lunch 4
	Insulin Units	10		12		12			
Tuesday	Blood Glucose								
	Insulin Units								

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[LEARN MORE](#)

HOW OFTEN SHOULD YOU CHECK YOUR BLOOD GLUCOSE?

Your healthcare team will tell you how often and when to check your blood glucose. The frequency needed depends on several factors e.g. type of diabetes that you have, type of medication that you are on, your current blood glucose control etc.¹

Here are some common situations in which blood glucose monitoring could be helpful:

- Fasting (before breakfast)
- Before lunch and/or dinner
- Occasionally after meals
- Before exercise
- Before critical tasks (e.g. driving)
- At bedtime
- When you suspect low blood glucose, and again after treating low blood glucose until your blood glucose has normalised

Some situations will require that you check more frequently, especially if you are:

- Having issues meeting your HbA1c (glycated haemoglobin) target
- Experiencing hypoglycaemia (low blood glucose) more frequently
- Taking part in sport, exercise or other physical activity
- Ill or feel unwell
- Driving
- Planning a pregnancy, pregnant or breastfeeding



These are recommendations only – speak to your healthcare professional for an individualised plan.

ADDING STRUCTURE TO YOUR SELF-MONITORING

Remember that one blood glucose value from a check does not tell you the whole story! **When you consistently check at the right time in a structured manner, blood glucose patterns emerge.** This can give you a better understanding of the fluctuations in your blood glucose, which are linked to your daily habits.

Using a structured way of checking your blood glucose (for example, before and after each meal and at bedtime for three consecutive days) can help you reduce your HbA1c and have more meaningful conversations with your healthcare professional during your diabetes appointments.²

Ask your healthcare team for recommendations on structuring your blood glucose monitoring plan.



YOUR RECOMMENDED BLOOD GLUCOSE MONITORING TIMES

Ask your healthcare team when you need to check your blood glucose and make a note of that in the table below:

Date	Breakfast		Lunch		Dinner		During the night
	Before	2hrs After	Before	2hrs After	Before	2hrs After	Time:
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

YOUR BLOOD GLUCOSE TARGET RANGE

The general target ranges (for non-pregnant adults) as recommended by the American Diabetes Association (ADA) are as follows:¹

Before meals: 80 – 130 mg/dL (4.4 – 7.2 mmol/L)

2 hours after meals: Less than 180 mg/dL (10.0 mmol/L)

Target ranges, however, differ from person to person and depend on several factors – e.g. age, duration of diabetes, other comorbid conditions, hypoglycaemia awareness, and presence of diabetes complications. Your ideal target range is specific for you and will be agreed with your healthcare team. Write yours down below:

Time	My Target Range*
 Before meals	
 2 hours after start of a meal	
 Bedtime	
Other times	

***Please consult your doctor about your blood glucose target ranges.**



WHAT SHOULD I DO WITH MY BLOOD GLUCOSE RESULTS?

Getting the results is one thing, but knowing what to do with them is key. Making the most of your data can help you to make better decisions about your health, such as dietary choices and insulin doses.

Things you could look out for:

- low blood glucose (below your target range)
- high blood glucose before meals (above your target range)
- high blood glucose after meals (above your target range)

Logging your activity, food intake and other factors may help you spot patterns and give you a good basis to have a conversation with your healthcare professional about your therapy and lifestyle.

Identifying the cause of out-of-range blood glucose values

It is not unusual for your blood glucose results to be out of range now and then. However, if you see a pattern of highs or lows outside your target range, *you may want to ask yourself:*

- Did I eat at an unusual time, have a larger or smaller portion, or try a new food?
- Did I have more or less physical activity than usual?
- Did I forget to take my medication, take it at the wrong time, take too little or too much?
- Am I taking a new medication?
- Am I stressed about something?
- Do I have an infection or an illness?
- Did I drink alcohol?

Any of the above can have an impact on your blood glucose numbers. If you're making changes to your lifestyle, or if you can't figure out why you've been out of range, talk to your doctor, nurse or diabetes educator.



UNDERSTANDING ABOVE RANGE BLOOD GLUCOSE VALUES (HIGH):

This shows that your blood glucose level is higher than what it should be.

Possible Causes:

- Missing a dose of your medication
- Eating more carbohydrates than your body or medication can cope with
- Stress and illness
- Over-treatment of a low blood glucose (hypoglycaemia)

Symptoms:



Frequent urination

Excessive thirst

Tiredness & fatigue

Blurred vision

What can you do when you have a high blood glucose level?

- Treatment of high blood glucose levels will depend on what caused them. If they are a regular occurrence, contact your healthcare team for a review of your medications and/or lifestyle.

How to prevent high blood glucose levels:

- Be aware of your carbohydrate portions and how they may be affecting your blood glucose levels.
- Include physical activity as recommended by your doctor.
- Remember to take your diabetes medication and insulin as prescribed by your doctor.

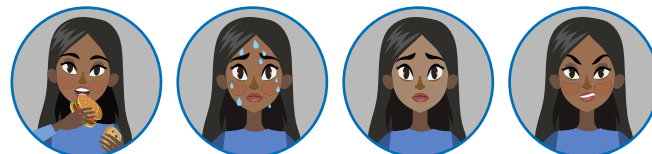
UNDERSTANDING BELOW RANGE BLOOD GLUCOSE VALUES (LOW):

This shows that your blood glucose level is lower than what it should be. For most people, low blood glucose refers to anything below 70 mg/dL (4 mmol/L), although your number may be different.¹

Possible Causes:

- Skipping a meal
- Increase in physical activity without an adjustment to your food intake or medication
- Taking more insulin or other diabetes medications than needed
- Alcohol consumption

Symptoms:



Hunger

Sweatiness

Paleness

Behaviour change

What can you do when you have a low blood glucose level?

When you are low, you have one goal: bring up your blood glucose levels. You can use the “15/15 Rule” as a reminder: eat 15 grams of fast-acting carbohydrates, then wait 15 minutes and check your blood glucose level again. Repeat this process as needed. For 15 grams of carbohydrates, try:

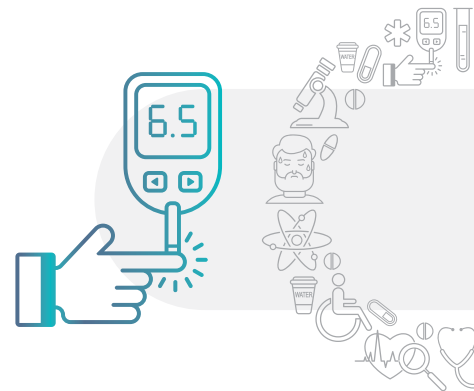
- 150 mL of regular, not diet, soft drink
- 6 or 7 jelly beans or hard sweets
- 1/2 glass of fruit juice (125mL)
- Premeasured glucose tabs or gel
- 3 teaspoons of sugar or honey

When your blood glucose has returned to normal eat a slowly digestible carbohydrate (e.g. bread) and protein (e.g. milk).

CHECKING YOUR BLOOD GLUCOSE

Always remember to follow these basic steps when checking your blood glucose:

- Wash and dry your hands. Using warm water may help increase the blood flow to your fingertips.
- Follow the instructions included with your lancing device to get a drop of blood
 - Select a penetration depth as shallow as possible that still produced enough blood.
 - Lance on the side of the fingertip rather than on the pad.
 - Keep the skin taut by pressing the lancing device firmly against the fingertip.
- Apply the blood drop to the test strip as directed.
- Wait a few seconds to view your results. Take the proper steps if your blood sugar is high or low, based on your healthcare professionals' recommendations.
- Dispose of the lancet and test strip in the proper manner.
- Record the results in a logbook (such as this one), hold them in the meter's memory or download to an app or computer so you can review and analyse them later.
- Other tips:
 - Alternate your fingers daily.
 - Remember to change your lancet after every use.
- Store your strips at room temperature, in their vial and don't use them past their expiration date. Exposing test strips to air or humidity makes them inaccurate.



Advanced precision for virtually pain-free lancing.

Only Accu-Chek lancing devices feature Clixmotion technology, the principal of dual-guided motion that helps prevent vibration and oscillations while lancing. This helps to minimise damage to skin and nerve endings and makes lancing fingertips virtually pain-free.^{3,4,5}



KEEPING TRACK

Knowing your targets and tracking your progress can help you and your diabetes management team get you the best results.

Measure	General targets ¹	My targets	Frequency of measuring ¹	Date	Date	Date	Date
Height (m)	-		With every follow-up visit if still growing				
Weight (kg)	-		With every follow-up visit				
Body Mass Index (BMI)*	< 25 kg/m ²		With every follow-up visit				
Waist circumference	Men: < 94 cm Women: < 80 cm		With every follow-up visit				
HbA1c	< 7.0 %		Once every 3-6 months				
Blood pressure	< 140/90 mm/Hg		With every follow-up visit				
Total cholesterol	< 200 mg/dL (4.5 mmol/L)		Once a year**				
LDL cholesterol	< 100 mg/dL (2.6 mmol/L)		Once a year**				
HDL cholesterol	Men: > 40 mg/dL (1.1 mmol/L) Women: > 50 mg/dL (1.3 mmol/L)		Once a year**				
Triglycerides	< 150 mg/dL (1.7 mmol/L)		Once a year**				

*BMI = Weight (kg)/ Height (m)²

**If you do not have dyslipidaemia (abnormal cholesterol levels) and you are not on cholesterol-lowering medication testing may be less frequent

Remember these other important health checks:

Check ¹	Frequency ¹
Eye health	Once a year
Foot health	Once a year*
Injection sites (if you are injecting insulin)	With every visit
Kidney and liver function	Once a year

*If you have sensory loss, have had previous foot ulcers or amputations, you should have a foot examination with every follow-up visit to your doctor

Convert Glucose (mmol/L) to Glucose (mg/dL)^{1,6}

Notes:

(mmol/L)	(mg/dl)	(mmol/L)	(mg/dl)	(mmol/L)	(mg/dl)
0.0	0	13.5	243	27.0	486
0.5	9	14.0	252	27.5	495
1.0	18	14.5	261	28.0	504
1.5	27	15.0	270	28.5	513
2.0	36	15.5	279	29.0	522
2.5	45	16.0	288	29.5	531
3.0	54	16.5	297	30.0	540
3.5	63	17.0	306	30.5	549
4.0	72	17.5	315	31.0	558
4.5	81	18.0	324	31.5	567
5.0	90	18.5	333	32.0	576
5.5	99	19.0	342	32.5	585
6.0	108	19.5	351	33.0	594
6.5	117	20.0	360	33.5	603
7.0	126	20.5	369	34.0	612
7.5	135	21.0	378	34.5	621
8.0	144	21.5	387	35.0	630
8.5	153	22.0	396	35.5	639
9.0	162	22.5	405	36.0	648
9.5	171	23.0	414	36.5	657
10.0	180	23.5	423	37.0	666
10.5	189	24.0	432	37.5	675
11.0	198	24.5	441	38.0	684
11.5	207	25.0	450	38.5	693
12.0	216	25.5	459	39.0	702
12.5	225	26.0	468	39.5	711
13.0	234	26.5	477	40.0	720



For more information contact your healthcare professional.

References:

1. American Diabetes Association Professional Practice Committee. Standards of Medical Care in Diabetes—2022. Diabetes Care 2022;45(Suppl. 1)
2. Polonsky WH, Fisher L, Schikman CH, Hinnen DA, Parkin CG, Jelsovsky Z, et al. Structured Self-Monitoring of Blood Glucose Significantly Reduces A1C Levels in Poorly Controlled, Non-insulin-Treated Type 2 Diabetes: Results from the Structured Testing Program study. Diabetes Care. 2011;34(2):262–7.
3. Kocher S, Tshiananga JKT, Koubek R. Comparison of Lancing Devices for Self-Monitoring of Blood Glucose regarding Lancing Pain. J Diabetes Sci Technol. 2009;3(5):1136–43.
4. Müller M, Streckert F. The drum-based Accu-Chek lancing devices Accu-Chek® Multiclix and Accu-Chek® FastClix: Global Value Dossier. 2012. Internal Roche Diabetes Care report; unpublished.
5. Jendrike N, Westhoff A, Haug C, et al. Pain Sensation at Fingertips and Palm Using Different Blood Glucose Monitoring Systems. Diabetes Technology Meeting. November 5-7 2009.
6. British Columbia Children's Hospital. Blood glucose units conversion table [Internet]. [cited 2022 Jan 3]. Available from: www.bcchildrens.ca/endocrinology-diabetes-site/documents/glucoseunits.pdf

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