



ENDOCRINOLOGY & DIABETES UNIT

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BLOOD GLUCOSE LOG FOR MEDICATION-RELATED DIABETES

Patient: _____ Contact Name: _____

Date of Birth: _____ Date of Diagnosis: _____

Phone: _____ E-mail: _____

Date	Blood Glucose					Insulin				Comments
	breakfast	lunch	dinner	after supper	bed	breakfast	lunch	dinner	bed	
										exercise, illness, etc.

NPH/Basaglar/Levemir	
Breakfast	
Lunch	
Dinner	
Bedtime	

Breakfast Sliding Scale	
Glucose Range	Insulin Dose

Dinner Sliding Scale	
Glucose Range	Insulin Dose

Current dose of prednisone (or dexamethasone): _____

Any upcoming changes in prednisone dose? _____