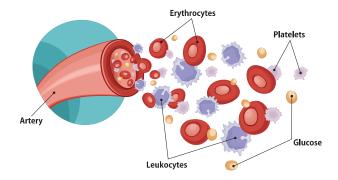
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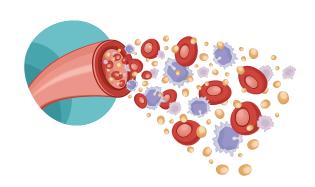
UNDERSTANDING DIABETES

Diabetes is not like other health problems you may have had in the past. For one thing, it doesn't go away like a cold or the flu. For another, you are just as responsible as your health care provider for treating your diabetes. Because so much of your day-to-day treatment is in your hands, you must learn as much about diabetes as you can. This booklet can help you.

NORMAL BLOOD SUGAR (GLUCOSE)



ELEVATED LEVELS OF BLOOD SUGAR (GLUCOSE)



The Basic Facts About Diabetes

Diabetes is:

Controllable

Though there is no cure for diabetes, it can be managed by keeping blood sugar levels close to normal. This is done with proper meal planning, exercise and possibly medicines.

Lifelong

Your blood sugar levels should improve with treatment. However, this does not mean that your diabetes has gone away. It just means your blood sugars are in control.

Self-managed

Your health care team will advise and support you, but control depends on you. The choices you make help determine what your blood sugar level will be.

Always changing

It is common for your health care provider to change your medicine or treatment plan over time because your diabetes changes over time.



You And Your Health Care Provider

How often should I see my health care provider?

People with diabetes who are treated with insulin generally should see their health care provider at least every three to four months. Those who are treated with medications or who are managing diabetes through diet should be seen at least every four to six months. Your health care provider may decide that more frequent visits may be necessary if your blood glucose (sugar) is not controlled or if complications of diabetes are worsening.

What information should I give my health care provider?

Generally, your health care provider needs to know how well your diabetes is controlled and whether complications of diabetes are starting or getting worse. If your health care provider has you check your blood glucose be sure to share your home blood glucose monitoring record at each visit. Also report any symptoms of hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose) to your health care provider. Bring your home blood pressure readings if requested by your health care provider.

Your health care provider also should be informed of any changes in your diet, exercise or medicines and of any new illnesses you may have developed. Tell your health care provider if you have experienced any symptoms of eye, nerve, kidney or cardiovascular problems such as:

- Blurred vision
- Numbness or tingling in your feet
 Wounds that won't heal
- Swelling of hands, feet, face or leas
- Cramping or pain in the legs
- Chest pain
- Shortness of breath
- Numbness or weakness on one side of your body
- Unusual weight gain or loss
- Urinating often

What lab tests should I have?

Your health care provider will decide how often you should have the following lab tests: Lab tests should include:

Hemoglobin A1C

Urine

Cholesterol

NINE QUESTIONS For Your Diabetes Care Team

- 1. When was the last time my A1C was tested and what was the result? A1C measures diabetes control over the past three months. Ask your health care provider what is right for you.
- 2. What were the results of my last cholesterol profile? This test determines your blood fat levels, meaning your cholesterol and triglycerides.
- 3. How often should I check my blood glucose? How often you check depends on what kind of medication you take to control diabetes. Ask your health care provider what is right for you.
- **4.** What kind of dietary guidelines should I be following? Find a nutrition plan that is right for you. Consider asking about talking to a dietitian.
- **5.** How do my feet look? Your health care provider should examine your feet at every visit.
- 6. What were the results of my last dilated eye exam? New cases of blindness in adults each year are caused by diabetes. Many adults have no early warning signs. This is why you should follow your eye care professional's recommendations for follow up visits.
- 7. What's my blood pressure? The recommended goal for blood pressure is less than 140/90. Check with your health care provider about the blood pressure goal that is right for you.
- 8. When was my last urine test for microalbuminuria? This urine test is one way to check if there has been any damage to your kidneys from the presence of diabetes. There are several different ways to screen your kidneys. Check with your health care provider what is best for you.
- 9. Ask about any concerns you have about how your diabetes is affecting your health!

Keeping Diabetes In Check - Know Your Blood Sugar Numbers

Taking control of your diabetes can help you feel better and stay healthy. Keeping blood sugar close to normal levels reduces your chances of having heart, eye, kidney and nerve problems that can be caused by diabetes. To control your diabetes, you need to know your blood glucose numbers and your target goals.



The A1C and Self-Monitoring Blood Glucose (SMBG) values can be used to help get a complete picture of your blood glucose control.

There are two different tests to measure your blood glucose.

- 1. The A1C (pronounced A-one-C) test
- 2. The blood glucose test you do yourself also called self-monitoring of blood glucose (SMBG)

What is the A1C test?

The A1C test is a simple lab test that measures average blood glucose levels over the past three months. A small blood sample to check your A1C can be taken at any time of the day.

Why should I have an A1C test?

The A1C test is the best test for you and your health care provider to know how well your treatment plan is working over the past three months. The test shows if your blood glucose levels have been close to normal or too high. Having high A1C tests over time can increase your chances for health problems.

What is a good A1C goal?

Age and other chronic conditions may impact your A1C goal. For most people with diabetes, the A1C goal is less than 7 percent. An A1C higher than 7 percent means that you have a greater chance of developing eye disease, kidney disease, heart disease, or nerve damage. Lowering your A1C by any amount can improve your chances of preventing complications. You and your health care provider should discuss an A1C goal that is right for you.

If your A1C is above your goal ask your health care provider about changing your treatment plan to bring your A1C number down.

How often do I need an A1C test?

Ask for an A1C test at least twice a year. Your health care provider will decide if you need this test more often.

What is a good self-monitoring blood glucose goal?

One of your main goals of treating diabetes is to control your blood sugar level by keeping it as close to normal as possible. Set your goals with your health care provider.

Level of Control	A1C Number	
Normal	5.7% or less	
Goal	less than 7%	
Take Action	7% or more	

^{*}Speak to your health care provider about what your A1C goal should be

Why should I check my blood glucose?

Self-monitoring of blood glucose, or SMBG, with a meter helps you see how food, physical activity, and medicine affect your blood glucose levels. The readings you get can help you manage your diabetes day-by-day or even hour-by-hour.

Keep a record of your test results and review it at each visit with your health care provider.

How do I check my own blood glucose?

Self-monitoring blood glucose, you use a tiny drop of blood and a meter to measure your blood glucose level. Your health care provider can show you how to use the meter. If you have not been instructed to SMBG ask your health care provider if this is right for you.

How often should I check my blood glucose?

Ask your health care provider when and how often you need to check your blood glucose. Self-tests are usually done before meals, after meals, and/or at bedtime. People who take insulin usually need to check more often than those who do not take insulin.

The benefits of staying in control:

- Maintaining a near normal blood glucose level may help protect you from many of the serious problems that are related to diabetes.
- You'll feel much better if you keep your blood glucose close to normal. When your blood glucose is higher or lower than normal, you will probably feel tired, sick, and/or uncomfortable.
- Controlling your diabetes will keep it from controlling you. It will have less power to disrupt your life.

Random Blood Sugar Test

This measures your blood sugar at the time you're tested. You can take this test at any time and don't need to fast (not eat) first. A blood sugar level of 200 mg/dL or higher indicates you have diabetes.

Result*	A1C Test	Fasting Blood Sugar Test	Glucose Tolerance Test	Random Blood Sugar Test
Diabetes	6.5% or above	126 mg/dL or above	200 mb/dL or above	200mb/dL or above
Prediabetes	5.7 - 6.4%	100 - 125 mg/dL	140 - 199 mg/dL	N/A
Normal	Below 5.7%	99% mg/dL or below	140 - 199 mg/dL or below	N/A

^{*}Results for gestational diabetes can differ. Ask your health care provider what your results mean if you're being tested for gestational diabetes.

Source: American Diabetes Association

Know your "numbers!"

The American Diabetes Association (ADA) A1C goal: Less than 7%

- You and your health care provider will set your A1C goal. This goal may change over time.
- Work with your health care provider to reach your final goal.



Meal Planning

Despite of what you might have heard, having diabetes does not mean you have to give up all the foods you enjoy. However, learning to eat healthy, satisfying meals is an important part of your treatment.

Good meal planning includes:

- Speaking with a registered dietitian or diabetes educator
- Understanding the importance of certain foods, portion size and meal times
- Choosing healthy foods

Diabetes Plate Method

This plate shows an easy way to choose foods for good health. This simple guide offers a stress-free way to plan your portions without any counting, calculating, or measuring.

Please visit the following address for further details: diabetes.org/healthy-living/recipes-nutrition/eating-well

