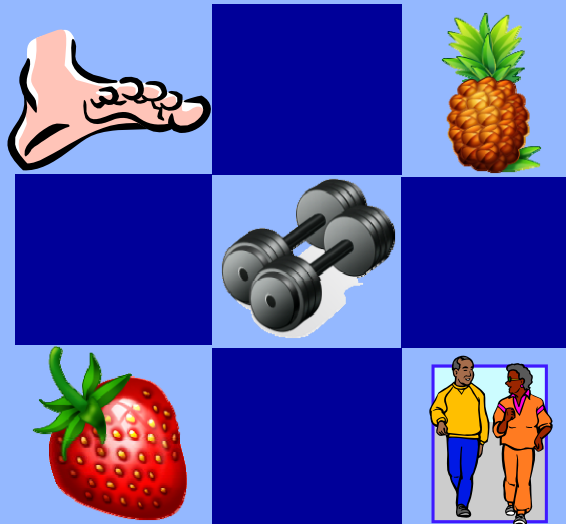


Diabetes Self Management



Clinical Data Record Book

**Please take this book with you to
all Health Related Visits**

This Book Belongs to:

Name: _____

Address: _____

Phone: _____

In Case of Emergency Please Contact:

Name: _____

Relationship: _____

Phone: _____

Clinical Details:

Diagnosis date: _____

Please tick appropriate boxes below

- Type 1 diabetes
- Type 2 diabetes
 - Diet controlled
 - Oral diabetes medication
 - Insulin

Your Diabetes Team

General Practitioner: Ph:
Diabetes Specialist: Ph:
Diabetes Educator: Ph:
Dietitian: Ph:
Podiatrist: Ph:
Ophthalmologist / Optometrist: Ph:
Pharmacist: Ph:
Dentist: Ph:
Psychologist: Ph:

DIABETES SELF-MANAGEMENT

The basis of successful self-management is an understanding of the process of diabetes and your individual treatment plan. Education is therefore essential for effective diabetes control and management.

To maintain good health, you will need to learn to adjust your life in order to keep blood glucose levels within a narrow range. To do this you will need to learn a variety of skills.

The diabetes team will help you by teaching you what you need to know, assisting you with strategies for success, and providing support when things change or don't go according to plan.

An important part of diabetes self-management is setting and working with goals that help you to live a healthy life.

By working together, we can help you control your diabetes so that you remain healthy, active and able to achieve your full potential.

BEST PRACTICE

There is strong evidence showing regular blood glucose testing and review of diabetes management results in fewer complications and enhances quality of life. Your team of Health Professionals will support you as required.

Guidelines:

- 3 monthly reviews by your Doctor.
- Regular assessment of your blood pressure and blood glucose levels by your Diabetes Educator or Doctor.
- 3 monthly HbA1c testing to monitor overall blood glucose control.
- 6 monthly cholesterol testing (total, HDL, LDL, triglycerides).
- 6-12 monthly review by your Dietitian to assess your weight, waist circumference and dietary management of your diabetes.
- Minimum of 12 monthly foot check as advised by your Podiatrist.
- Annual eye examination to check the back of your eyes for changes that can be associated with Diabetes.
- Annual dental check.
- Annual kidney screen (urine collection) to test for early signs of kidney problems.
- Annual liver function test (if on medication)
- ECG at diagnosis of type 2, after 10 years of type 1, or by age 40.

YOUR DIABETES TEAM:

Your team of health professionals provide ongoing education, information and support regarding your diabetes management.

DOCTOR

The role of the General Practitioner ideally involves initial diagnosis, treatment, co-ordination of your Diabetes Team, and includes continuing care and management.

DIABETES EDUCATOR

Consults with patients individually or in group sessions. Topics discussed include:

- Diabetes – how it affects your body
- Exercise
- Achieving diabetes control
- Medications – how they work
- Self-monitoring of blood glucose levels
- Treating high / low blood glucose levels
- Avoiding complications
- Managing sick days
- Day to day living with diabetes
- Diabetes equipment, needle disposal

DIETITIAN

Consults with patients individually or in group sessions.

Dietitians know about food and health; they work with people with diabetes to provide practical advice about what foods will best help you to manage your Diabetes. Your Dietitian can help you with meal planning, choosing the best foods when shopping or eating out, teach you how to read food labels and show you healthy ways to prepare food.

PODIATRIST

Your feet are vital to you remaining active and they rely upon a good blood supply to keep them healthy. Diabetes may cause alterations affecting your ability to feel or notice changes.

The Australian Podiatry Association and Diabetes Australia recommend that people with Diabetes should have a Podiatry assessment at least annually.

This is an important intervention as these changes are known to be a major cause of long term problems if not identified.

PSYCHOLOGIST

Psychologists specialise in understanding the relationship between behaviours/ attitudes/beliefs and health and illness.

Psychologists use many different skills including behaviour therapy and health coaching with individuals who have a chronic illness. Health coaching provides structured guidance to help patients to adhere to medical and health recommendations and to make health enhancing lifestyle changes.

PHYSICAL ACTIVITY

Physical activity is an important part of your individual diabetes management.

National Physical Activity Guidelines encourage you to:

- Think of movement as an opportunity not an inconvenience;
- Be active every day in as many ways as you can; and
- Put together at least 30 minutes of moderate intensity activity on most days of the week.

Remember: it is important to check with your doctor before starting any exercise.

**Monitor these Health Indicators at
least once each year**

	GOAL
Blood Pressure	130 / 80 mmHg
Body Mass Index	20- 25 kg/m ² where practical
Waist Circumference	<u>Females</u> : less than 80cm <u>Males</u> : less than 94cm (approximately)
HbA1c	Less than 7.0 %
Total cholesterol	Less than 4.0 mmol/L
HDL cholesterol	More than 1.0 mmol/L
LDL cholesterol	Less than 2.5 mmol/L
Triglycerides	Less than 1.5 mmol/L
Alcohol	<u>Females</u> - No more than 2 standard drinks/day <u>Males</u> - No more than 4 standard drinks/day 2 Alcohol Free days per week

**Monitor these Health Indicators at
least once each year**

	GOAL
Physical Activity	At least 30 mins of moderate activity 5 or more days/wk
Cigarettes	Nil
Urinary Albumin Excretion	Discuss with Doctor
Diet	Annual Review with Dietitian
Podiatry / Feet	At Least Annual Review
Dental / Teeth	Annual Review
Eyes	Annual Review
Blood Glucose Meter	Six monthly check
Injection Sites	Check for lumps. Discuss with team as needed.
Other	

INITIAL ASSESSMENT

Date:	/ /
Blood Pressure	
Weight	
Waist Circumference	
BMI	
HbA1c	
Total Cholesterol	
HDL Cholesterol	
LDL Cholesterol	
Triglycerides	
Alcohol Intake	
Physical Activity	
Cigarettes	
Urinary albumin excretion	
Dental	<input type="checkbox"/> Yes <input type="checkbox"/> No
Eyes	<input type="checkbox"/> Yes <input type="checkbox"/> No
Blood Glucose Meter	
Injection Sites	

PODIATRY ASSESSMENT / /

RIGHT	LEFT
Monofilament (5.07 / 10g)	
/10	/10
Vibration (tuning fork)	
1 st MTPJ -	1 st MTPJ -
Lat Malleoli -	Lat Malleoli -
Pulses	
Dorsalis Pedis	Dorsalis Pedis
Post Tibial	Post Tibial
Comments / Advice:	
Recommended Review:	
Months	

Please make an appointment with:

- Diabetes educator**
to discuss results and plan of action
- Dietitian**
to discuss meal plan and review dietary management

PLAN: (To be completed by person with diabetes)

After discussion with the Diabetes Team I propose to:

REVIEW

Date:	/ /
Blood Pressure	
Weight	
Waist Circumference	
BMI	
HbA1c	
Total Cholesterol	
HDL Cholesterol	
LDL Cholesterol	
Triglycerides	
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Cigarettes	
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Dorsalis Pedis	Dorsalis Pedis
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Recommended Review:	
Months	

Review results show my diabetes control is:

- Good Improved Not improved

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- Dietitian**
to review dietary management

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to review dietary management

PLAN:(To be completed by person with diabetes)
After discussion with the Diabetes Team I
propose to:

DIABETES EDUCATION CHECKLIST

Diabetes	√	Date
What is Diabetes? / Types		
Effect on CHO metabolism		
Reasons for good control		
Nutrition		
Advise Dietitian referral		
Intro to meal planning		
CHO distribution		
Glycaemic index		
Weight control		
Label reading		
Recipe modification		
Eating out		
Alcohol		
Physical Activity		
Importance of being active		
Effect on BGL's		
Exercise Plan		
NDSS Registration		
Diabetes Australia Membership		
Monitoring		
Equipment		
Meter Type		
Testing times/recording		
Maintenance/control tests		
Interpreting results		
Sharps container/disposal		
Ketone testing		
Driving & Diabetes		
Vic Roads requirements		

Hypoglycaemia (Low BGLs)	√	Date
Signs and Symptoms		
Causes		
Treatment/prevention		
Identification		
Hyperglycaemia (High BGLs)		
Signs and Symptoms		
Causes		
Action		
Medication – Oral Agents		
Name of medication		
Dose/time taken		
Action		
Side effects/precautions		
Medications – Insulin		
Name of insulin/ Dose time		
Insulin administration device		
Injection technique		
Action		
Site rotation		
Insulin adjustment		
Precautions		
Insulin storage		
Footcare		
Advise referral to Podiatrist		
Complications (long term)		
Eyes (retinopathy)		
Nerves (neuropathy)		
Kidneys (nephropathy)		
Circulation/cardiovascular		

COMMENTS

COMMENTS

COMMENTS

COMMENTS

