

DIABETES REPORT CARD

Patient: _____






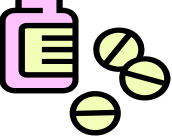




QUESTIONS TO ASK
AT MY NEXT VISIT:

	Date	Date	Date
Weight			
Blood Pressure Goal - 130/80			
HgA1C Goal less than 7			
Cholesterol Goal less than 200			
HDL (good cholesterol) Goal higher than: Men - 40, women - 45			
LDL (bad cholesterol) Goal less than 100			

YOU ARE THE MOST IMPORTANT PERSON TO MANAGE YOUR DIABETES. We at Northwest Health Services will guide you and offer support to you.

On the reverse side are things that you can do to help gain and maintain control of your diabetes and to prevent complications related to diabetes. (Note: Diabetes is a very serious disease that can damage the blood vessels and nerves leading to the brain, eyes, kidneys, toes and feet.)

DIABETES SELF-MANAGEMENT

Accomplished			New Goal	Ongoing goal	Comments
	I will keep my appointments and work hard to keep my HgA1c less than 7.0				
	I will exercise _____ minutes _____ days per week				
	I will check my feet daily. If I see a sore or an irritation, I will see my provider. I will see the podiatrist once a year.				
	I will follow my diet. I will see the dietician or diabetic nurse for diet instruction/review				
	I will try to obtain my ideal body weight. I will try to lose _____ lbs. by my next visit				
	I will take my medications every day as prescribed, including a baby aspirin daily				
	I will stop smoking. I will see a smoking cessation counselor				
	I will see the eye specialist every year or as recommended				
	I will take my blood sugar as instructed				
	I will see the dentist every year or as recommended				

Patient signature: _____

Date: _____