Your guide to better office visits

A diabetes care planner
This booklet belongs to:
Name
Address
City  State  ZIP
Phone  Email

If this booklet is found, please contact the owner listed above. Thank you!

Favorably reviewed by:

This booklet was developed to be consistent with American Diabetes Association educational materials, including the Standards of Medical Care in Diabetes. This booklet does not replace the advice of your diabetes care team. Be sure to consult your diabetes care team regarding your individual diabetes care plan.

Quotes reflect the opinions of the people quoted and not necessarily those of Novo Nordisk. Individual results may vary.
You are not alone when it comes to managing your diabetes. You may have a doctor, nurse, diabetes educator, dietitian, and others on your team. You may also have family members or friends who lend their help and support.

And then, of course, there’s you. You are the captain of your team and the most important person on it. Your fellow team members are experts on diabetes. But you are the expert on how you feel living with diabetes. All of your team members have the same goal: to help you manage your diabetes.

Diabetes is a condition that you can manage. You are in charge of the day-to-day care of your diabetes. As the captain of your team, you need to:

- Learn as much as you can about diabetes in general
- Know as much as possible about your diabetes and your health
- Know how to get the most from your visits with your diabetes care team

As the team captain, you also have a right to:

- Be involved in your diabetes care planning
- Work with your team to set diabetes care goals
- Understand your diabetes tests and know what the results mean
- Have your questions answered

This booklet can help you be an active member of your diabetes care team and make the most of your office visits. It can help you:

- Keep track of your test results
- Prepare for your visits
- Decide before each visit what questions you want to ask
- Understand and remember your team’s advice and answers
- Use the information you receive to improve your diabetes care

Take this booklet with you to every visit. Use it to help you talk about what you need and how your diabetes care plan is working.

Visit Cornerstones4Care.com to find all sorts of tools to help you take charge of your diabetes. And join a FREE program to help you manage your diabetes.
Regular visits with your diabetes care team are very important to managing your diabetes.

**Your first visit**

At your first visit, you and your diabetes care team will make a plan for managing your diabetes. Your plan should include:

- A list of goals for your
  - Blood sugar (eg, A1C, fasting)
  - Weight
  - Blood pressure
  - Medicine schedule
  - Meal plan
  - Physical activity
  - Cholesterol and blood fat tests
- Action steps that will help you reach your goals
- Ways to measure your progress
- Steps to take when you have questions
- Regular checks for diabetes problems

**Follow-up visits**

Your diabetes care team will let you know how often you should return for visits. They most likely will recommend a complete checkup at least once a year. At each of your visits, make sure to:

- Let your diabetes care team know how you’ve been feeling
- Discuss your blood sugar tracker and the other records you keep
- Talk about any new medicines you’ve been taking since your last visit
- Tell your diabetes care team about any major changes in your life
- Ask about your weight and blood pressure
- Have your feet checked
- Ask about any signs of possible diabetes problems
- Ask whether you need any diabetes care tests (See pages 10 and 11 for a schedule of diabetes care testing)
- Review your diabetes care plan to make sure it’s working for you
- Talk about any changes to your diabetes care plan
Your diabetes care team

You and your diabetes care team need to stay in close touch. Write the names and phone numbers of your team members on the next page. Don’t hesitate to ask a member of your team whenever you have questions or concerns. Make sure you keep a copy of the contact information for your team in your wallet.

To learn more about working with your diabetes care team, visit Cornerstones4Care.com.

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Keeping track of your diabetes care team

Below, write the names and phone numbers of the people who might be on your diabetes care team.

<table>
<thead>
<tr>
<th>Team member</th>
<th>Name</th>
<th>Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary health care provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endocrinologist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes educator</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Podiatrist (foot doctor)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dietitian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiologist (heart doctor)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ophthalmologist/optometrist (eye care provider)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nephrologist (kidney doctor)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dentist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pharmacist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency contact</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other contacts</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
These pages show the tests and checkups that are part of a diabetes care plan. Ask your diabetes care team how often you should have these tests. Write down the date when you are scheduled to have each test.a

### Your diabetes care schedule

<table>
<thead>
<tr>
<th>As recommended</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular office visit</td>
<td></td>
</tr>
<tr>
<td>A1C test (every 3–6 months, as needed)</td>
<td></td>
</tr>
<tr>
<td>Blood pressure check</td>
<td></td>
</tr>
<tr>
<td>Weight check</td>
<td></td>
</tr>
<tr>
<td>Foot check</td>
<td></td>
</tr>
</tbody>
</table>

The A1C test measures your estimated average blood sugar level over the past 3 months. It’s like a “memory” of your blood sugar levels.

Every year

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical exam</td>
</tr>
<tr>
<td>Comprehensive foot examb</td>
</tr>
<tr>
<td>Cholesterol and blood fat testsc</td>
</tr>
<tr>
<td>Kidney tests</td>
</tr>
<tr>
<td>Dilated eye examd</td>
</tr>
<tr>
<td>Flu shot</td>
</tr>
</tbody>
</table>

*b Should be done more often if you have foot problems.
*c Individualized based on how long you have diabetes and type of statin treatment.
*d Eye exams every 2 years may be okay after 1 or more normal eye exams.

Make copies of these pages for future use, or visit [Cornerstones4Care.com](http://Cornerstones4Care.com) to learn more.

*a These recommendations are based on American Diabetes Association Standards of Medical Care. You and your diabetes care team will set individual goals for you.
The key parts of a diabetes care plan are:

- A meal plan
- A physical activity plan
- Medicine

Talk with your diabetes care team about your plan. Write each part of your plan here. Then write down any questions you want to ask at your next visit. Find out more about creating a diabetes care plan at Cornerstones4Care.com.

### Your daily meal plan

<table>
<thead>
<tr>
<th>Amount per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calories</td>
</tr>
<tr>
<td>Carbohydrates (carbs)</td>
</tr>
<tr>
<td>Fat</td>
</tr>
<tr>
<td>Protein</td>
</tr>
<tr>
<td>Sodium</td>
</tr>
</tbody>
</table>

### Questions

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### Your physical activity plan

<table>
<thead>
<tr>
<th>Type of physical activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long</td>
</tr>
<tr>
<td>How often</td>
</tr>
</tbody>
</table>

### Questions

- 
- 
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- 
- 
- 

### Things to avoid

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- 
- 
- 
- 
- 

Here is the blood pressure goal for most people with diabetes. Ask your diabetes care team what your personal goal is and write it below.

<table>
<thead>
<tr>
<th>Blood pressure goal for most adults with diabetes</th>
<th>Your blood pressure goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 140/90 mm Hg</td>
<td>________________ mm Hg</td>
</tr>
</tbody>
</table>

If your blood pressure is too high, you may need to change your diabetes care plan. Changes might include:

- Weight loss (if necessary)
- Decreasing the amount of salt in your diet
- Changing your physical activity plan
- Adjusting your blood pressure medicine
- Reducing the amount of alcohol you drink

Here are some important questions to ask your diabetes care team about your blood pressure. Write the answers in the spaces.

- When was the last time my blood pressure was checked?
- What was the reading?
- If I’m not at my blood pressure goal, what would help me get there?
- When should I have my blood pressure checked next?

### Blood pressure results

You and your diabetes care team will decide how often to check your blood pressure. Use the spaces below to keep track of your blood pressure.

<table>
<thead>
<tr>
<th>Date</th>
<th>Blood pressure</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________</td>
<td>______________</td>
</tr>
<tr>
<td>__________</td>
<td>______________</td>
</tr>
<tr>
<td>__________</td>
<td>______________</td>
</tr>
<tr>
<td>__________</td>
<td>______________</td>
</tr>
<tr>
<td>__________</td>
<td>______________</td>
</tr>
</tbody>
</table>

A quick tip:

Regular blood pressure checks shine a light on the health of your heart and blood vessels. Aim to keep your blood pressure at or below your goal.
Here are some questions to ask your diabetes care team about your cholesterol and blood fat levels.

When was the last time my cholesterol and blood fat levels were checked?

What were the results and what do they mean?

If I’m not meeting my cholesterol and blood fat goals, what would help me meet them?

When should I have my cholesterol and blood fat levels checked next?

The cholesterol and blood fat (triglyceride) goals for most people with diabetes are shown below. Meeting your goals will help protect your heart and blood vessels from damage. Ask your diabetes care team what your personal goals are and write them in the spaces below.

### Cholesterol and blood fat goals for adults with diabetes

#### Your personal goals

<table>
<thead>
<tr>
<th>HDL (“good”) cholesterol</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Men: more than 40 mg/dL</td>
<td>__________ mg/dL</td>
</tr>
<tr>
<td>Women: more than 50 mg/dL</td>
<td>__________ mg/dL</td>
</tr>
</tbody>
</table>

**Triglycerides**: less than 150 mg/dL __________ mg/dL

<table>
<thead>
<tr>
<th>LDL (“bad”) cholesterol</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Based on your risk factors for heart disease, your diabetes care team may have LDL goals for you __________ mg/dL</td>
<td></td>
</tr>
</tbody>
</table>

If you’re not meeting your cholesterol and blood fat goals, your diabetes care team may advise:

- Weight loss (if necessary)
- A change in your eating plan
- A change in your physical activity plan
- Cholesterol-lowering medicine

*Based on your risk factors and age, your diabetes care team may recommend a drug class called statin.

**Cholesterol and blood fat tracker**

Each time you get your cholesterol and blood fat levels checked, ask your diabetes care team for the results. Write them on this chart along with the date.

<table>
<thead>
<tr>
<th>Date</th>
<th>Cholesterol and blood fat levels</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HDL__________________mg/dL</td>
</tr>
<tr>
<td></td>
<td>Triglycerides________mg/dL</td>
</tr>
<tr>
<td></td>
<td>LDL__________________mg/dL</td>
</tr>
<tr>
<td></td>
<td>HDL__________________mg/dL</td>
</tr>
<tr>
<td></td>
<td>Triglycerides________mg/dL</td>
</tr>
<tr>
<td></td>
<td>LDL__________________mg/dL</td>
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<tr>
<td></td>
<td>HDL__________________mg/dL</td>
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<tr>
<td></td>
<td>Triglycerides________mg/dL</td>
</tr>
<tr>
<td></td>
<td>LDL__________________mg/dL</td>
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<tr>
<td></td>
<td>HDL__________________mg/dL</td>
</tr>
<tr>
<td></td>
<td>Triglycerides________mg/dL</td>
</tr>
<tr>
<td></td>
<td>LDL__________________mg/dL</td>
</tr>
</tbody>
</table>

Once a year, your diabetes care team will want to check your kidneys. Here are some questions to ask your diabetes care team about how your kidneys are working. Write the answers in the spaces.

- When was the last time I had a kidney test?
- What were my results and what do they mean?
- Is there anything else I could be doing to help protect my kidneys?
- When is the next time my kidneys should be checked?

To learn more about how to manage diabetes, visit [Cornerstones4Care.com](http://Cornerstones4Care.com).
To help protect your eyes, you should have a dilated eye exam every 1 to 2 years, or more frequently if needed. This may be done by an eye doctor. During a dilated eye exam, the pupil of the eye (the black center) is made bigger with drops. This allows the doctor to see the inside of the eye more easily.

Here are some questions to ask your diabetes care team. Write their answers in the spaces.

- When was the last time I had a dilated eye exam?
- What were the results?
- What do the results mean?
- When should I have my next dilated eye exam?

Caring for your feet

It’s best to have your feet checked at every office visit. Taking off your shoes and socks while waiting in the exam room can help you and your diabetes care team remember to look at your feet. In addition, you should have a comprehensive foot exam at least once a year. You should have a comprehensive exam at every visit if you have foot problems.

Here are some questions to ask your diabetes care team. Write their answers in the spaces.

- When was the last time I had a foot exam?
- What did the exam show?
- What do the findings mean?
- If the exam showed any problems, what can I do to correct them?

A quick tip

People who routinely track their progress, both good and bad, are more likely to stick to their plan over the long term. Tracking success can help boost your confidence and continue on the right path. It also helps you understand what’s going well so you can keep it up.
Questions for your diabetes care team

Think about the questions you’d like to ask your diabetes care team at your next visit. Write them in the spaces below. During the visit, write down the answers your diabetes care team gives you. This information will help you continue to take good care of your diabetes.

Q

A

Q

A

Diabetes care plan checkup

Do you know everything you need to know about your diabetes care? Do you have all the answers you need? This checklist can help you find out. Check the boxes below when you understand:

- When and how to take your diabetes medicine
- If you take insulin, when it starts working and when it will have its peak action (the time when it’s working the hardest to control your blood sugar)
- When and how to check your blood sugar and what the results mean
- Your target blood sugar goals (before meals, after meals, and A1C)
- Why it’s important to keep your blood sugar levels in your target range
- What you can do if your blood sugars are out of your goal range
- Possible causes of low blood sugar, how to prevent it, and what to do if it happens
- How to follow your meal and physical activity plans
- What to do when you are sick
- When to call your diabetes care team and how to reach them
- The importance of follow-up visits
- Where to go to learn more

Cornerstones4Care.com is a great place to visit to learn all about diabetes.
One of the most important things you can do is to manage your blood sugar. To do that, you need to check your blood sugar often. Checking often will tell you:

- If your diabetes medicine is working to control your blood sugar
- How your physical activity and meal plans affect your blood sugar

You and your diabetes care team will set blood sugar goals for you based on your diabetes care plan. The chart on the next page lists blood sugar goals that many experts suggest for people with diabetes. Write your personal goals in the last column.

### Blood sugar goals

<table>
<thead>
<tr>
<th>Time</th>
<th>Goals for most adults with diabetes</th>
<th>Your goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1C</td>
<td>Less than 7%</td>
<td>__________</td>
</tr>
<tr>
<td>Before meals</td>
<td>80 to 130 mg/dL</td>
<td>__________</td>
</tr>
<tr>
<td>1 to 2 hours after the start of a meal</td>
<td>Less than 180 mg/dL</td>
<td>__________</td>
</tr>
</tbody>
</table>


### Questions for your diabetes care team about A1C

Here are some important questions to ask your diabetes care team about your A1C. Write the answers in the spaces below.

1. When was the last time my A1C was checked?
2. What was the reading?
3. What does the reading mean?
4. How often should I have my A1C checked?
5. If I’m not at my A1C goal, what would help me get there?

### Here’s a thought

Have you ever wondered whether you were on the right track with your diabetes care? While you can’t see inside your body to know what’s going on, you can use “diabetes numbers” to help you see where things stand—and what might need to be changed in your diabetes care plan.
### A1C tracker

Use the spaces below to keep track of your A1C.

<table>
<thead>
<tr>
<th>Date</th>
<th>A1C level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Using your blood sugar tracker

Use your tracker to record your blood sugar readings. You’ll find an example on pages 28 and 29 of this booklet. Show the tracker to your diabetes care team at your office visits. Good tracker records will help you and your team make the best possible decisions about your diabetes care plan.

You can also track your blood sugar at Cornerstones4Care.com.

### A quick tip

The A1C is the best measure of your overall blood sugar control.
Here's how to use the blood sugar tracker:

1. Write down the date for the start of the week. (You can start tracking on any day of the week)

2. Write the name(s) and dose(s) of your diabetes medicine(s)

3. Write the time and your blood sugar readings in the “before” and “after” spaces. After-meal readings are usually taken 1 to 2 hours after you start your meal. Nighttime readings may be taken during the night as needed

4. If you are counting carbs, write how many grams of carbs you ate

5. If your doctor has told you to use mealtime insulin when you eat, see page 30 for instructions that your doctor can fill out for you

6. Add notes on anything else you might want to track (such as blood pressure or weight)

   After “Sunday,” in the “Notes” section, write notes about anything that might have affected your blood sugar readings, such as the food you ate, any physical activity you did, or any stress you might be under.

If you’d like to use an online blood sugar tracker, you can find one at Cornerstones4Care.com
Adding or starting mealtime insulin

Because diabetes changes over time, your doctor may decide to add mealtime insulin to your plan to help control blood sugar when you eat. There are many ways to add mealtime insulin to your care plan. Together, your doctor and you will decide on the insulin plan that is right for you.

You and your doctor can use the example below to see how you might add mealtime insulin one meal at a time.

Guide to Tracking and Adjusting Your Mealtime Insulin Dose

If your doctor has told you to adjust your mealtime insulin dose, have him or her complete this section for you and walk you through the example. Change or adjust your mealtime dose only as instructed by your doctor.

1. Day 1 starting dose: ____________________

2. When to take mealtime insulin: [ ] Breakfast [ ] Lunch [ ] Dinner

3. When to check blood sugar:
   - Before lunch
   - Before dinner
   - At bedtime

4. If your blood sugar reading is:
   - ______ or less (example: 80 or less)
   - Subtract ______ unit(s)
   - Between ______ and ______ (example: between 81 and 130)
   - Take the same dose you took today
   - ______ or more (example: 131 or more)
   - Add ______ unit(s)

How to use your blood sugar tracker when adding a mealtime insulin

Your starting dose

2. When to take insulin. This example assumes dinner

3. When to check (in this example, bedtime)

4. Adjust your mealtime insulin dose based on table below

Your next day’s dose

Repeat above process every day
If you’d like to use an online blood sugar tracker, you can find one at Cornerstones4Care.com

*You and your diabetes care team will decide the best times for you to check your blood sugar.

<table>
<thead>
<tr>
<th>Date: _<em><strong><strong>/</strong><em><strong><strong>/</strong></strong></em></strong></em></th>
<th>BLOOD SUGAR RESULTS*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Breakfast</td>
</tr>
<tr>
<td></td>
<td>BEFORE</td>
</tr>
<tr>
<td></td>
<td>Time</td>
</tr>
<tr>
<td></td>
<td>mg/dL</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Carb intake

Mealtime insulin dose

Other

*You and your diabetes care team will decide the best times for you to check your blood sugar.
If you’d like to use an online blood sugar tracker, you can find one at [Cornerstones4Care.com](http://Cornerstones4Care.com).

**NOTES:**

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**BLOOD SUGAR RESULTS***

<table>
<thead>
<tr>
<th></th>
<th>Breakfast</th>
<th>Lunch</th>
<th>Dinner</th>
<th>Bedtime</th>
<th>Night</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FRIDAY</strong></td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
</tr>
<tr>
<td><strong>SUNDAY</strong></td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
</tr>
<tr>
<td><strong>SATURDAY</strong></td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
<td>AFTER</td>
<td>BEFORE</td>
</tr>
</tbody>
</table>

Carb intake

Mealtime insulin dose

Other

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*You and your diabetes care team will decide the best times for you to check your blood sugar.
**Commitment to my health**

**My agreement**

Use this chart to help you decide on your wellness goals and plan how to get to the goals you choose. I, ______________________, agree to achieve the goals below to help improve my overall health and wellness.

**Your signature ______________________ Date __________
Friend’s signature ______________________ Date __________

<table>
<thead>
<tr>
<th>What I will do:</th>
<th>When I will start:</th>
<th>My barriers:</th>
<th>How I will overcome barriers:</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will play a more active role on my diabetes care team by using this booklet to keep track of my test results, write down my questions, and get ready for my visits.</td>
<td>I will start as soon as my most recent test results come back.</td>
<td>I sometimes think of questions and then forget them when I’m at my visits.</td>
<td>I will keep this booklet with me all the time so that I can write down questions as soon as I think of them.</td>
</tr>
</tbody>
</table>

**Goal 1**

<table>
<thead>
<tr>
<th>What I will do:</th>
<th>When I will start:</th>
<th>My barriers:</th>
<th>How I will overcome barriers:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Goal 2**

<table>
<thead>
<tr>
<th>What I will do:</th>
<th>When I will start:</th>
<th>My barriers:</th>
<th>How I will overcome barriers:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Tell us about yourself

Go to Cornerstones4Care.com to register today. Or fill in the information below. Then tear off this card, fold and seal it, and mail it back to us.

All fields with asterisks (*) are required.

Tell us which medicine you use so we can offer you the information and support that’s most helpful to you.

To complete your registration, we ask you to take a moment to read the below information to better understand how Novo Nordisk uses the information you provided. If you choose to unsubscribe, please check the “Unsubscribe” box and confirm your age. Sign and date below to complete your registration.

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Novo Nordisk is dedicated to diabetes

Diabetes is our passion and our business

As a leader in diabetes, Novo Nordisk is dedicated to improving diabetes care worldwide. Novo Nordisk first marketed insulin for commercial use in 1923. Today we offer a broad line of medicines for diabetes. Novo Nordisk created the world’s first prefilled pen device for injections.

If you are having trouble affording your Novo Nordisk brand product for diabetes care, call 1-800-727-6500.

If you are the parent of a child aged 17 years or younger for whom you provide diabetes care, please provide the following information for the minor:

* Birth date (mm/dd/yyyy) ___________________________________

All fields with asterisks (*) are required.

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