

# Diabetes Self-Care Plan

Date \_\_\_\_\_

At your appointment today you and your healthcare team discussed your diabetes care and made a plan for what to do next. These are notes on what you did and decided.

**Goals.** The goal you have set for your diabetes care is:  
\_\_\_\_\_

**Treatment guidelines.** You were given a copy of the the *Diabetes Care Card* on (date): \_\_\_\_\_

**Current testing status.** We reviewed your current test results in relation to your goals. We discussed how to resolve problems related to getting these tests:

- |   |  |
|---|--|
| <input type="checkbox"/> HbA1c          | <input type="checkbox"/> Urine albumin |
| <input type="checkbox"/> Lipid profile  | <input type="checkbox"/> Eye exam      |
| <input type="checkbox"/> Blood Pressure | <input type="checkbox"/> Foot exam     |

**Self management.** We discussed some changes you can make that will help you manage your diabetes and reach your goals.

How **important** are these changes to you? (1-10): \_\_\_\_\_

*What would help you move from a \_\_\_\_\_ to a \_\_\_\_\_?*

How **confident** are you that you can make these changes? (1-10): \_\_\_\_\_

*What would help you move from a \_\_\_\_\_ to a \_\_\_\_\_?*

How can your healthcare team help you with your goals?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Local resources:**

Care manager or health educator: \_\_\_\_\_

Local clinic phone and website: \_\_\_\_\_  
\_\_\_\_\_

Other consultants or providers: \_\_\_\_\_  
\_\_\_\_\_

## Self-care goals and monitoring

*Check the main goals that you most want to work on now.*

- Monitor glucose** and bring meter or log to each visit  
– Lab testing plan: \_\_\_\_\_
- Take medications** according to plan
- Follow a healthy meal plan** (and count carbs)  
– 45 to 50 grams carbs per meal for women, or  
50 to 60 grams carbs per meal for men
- Get regular exercise**  
– 30 to 45 minutes of moderate-intensity aerobic activity, 3 to 5 days a week

*Check any other healthy habits you want to work on.*

- Monitor blood pressure at home
- Get regular medical care: \_\_\_\_\_  
– For example, get immunized against pneumonia or the flu, have a dental exam, or discuss aspirin therapy with your doctor
- Maintain a healthy weight
- Care for your feet, skin, teeth, and gums
- Stop smoking
- Manage stress, depression, or “burnout”
- Sign up for and use Intermountain MyHealth

## Patient education resources

*Write the date you received each resource.*

- |   |  |
|---|--|
| <input type="checkbox"/> <i>Living Well:</i> _____    | <input type="checkbox"/> <i>Testing Tips and Guidelines:</i> _____               |
| <input type="checkbox"/> <i>First Steps:</i> _____    | <input type="checkbox"/> <i>Dietitian referral (name):</i> _____                 |
| <input type="checkbox"/> <i>Carb Counselor:</i> _____ |  |
| <input type="checkbox"/> <i>Food Finder:</i> _____    | <input type="checkbox"/> <i>Diabetes education class (when and where):</i> _____ |
| <input type="checkbox"/> <i>Meal Plan:</i> _____      |  |

## Online resources

- [www.intermountainhealthcare.org/diabetes](http://www.intermountainhealthcare.org/diabetes)
- American Diabetes Association: [www.diabetes.org](http://www.diabetes.org)
- NIH National Diabetes Association Program: [www.ndep.nih.gov](http://www.ndep.nih.gov)
- Applications for iPad or smartphone: Glucose Buddy, OnTrack, Pocket A1c
- ID Medical Bracelet: 1-800-ID Alert
- Other websites: [gomeals.com](http://gomeals.com), [diabetesincontrol.com](http://diabetesincontrol.com)