

### The Essentials of Diabetes Management



**Toolkit** 





### The Essentials of Diabetes Management Toolkit



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This toolkit contains resources to help you effectively manage your diabetes.





### Preparing for Change

**Directions:** Write down the healthy lifestyle (behavior) change you want to make. Then complete the following activities to help you identify your desire, reasons, need, and ability to change. All these components help determine your readiness for change.

List the healthy behavior change you want to make:	
Activity 1 - Identify Priorities	

Activity 1 – Identify Priorities	
List your top life priorities in order of importance, for example, work, family, health, sochealthy behavior change fit into your lifestyle? How will it impact your priorities?	ial activity. How will your
•	
•	
•	
•	
•	
Activity 2 – Identify Motivation	
List the reasons why you want to make this healthy behavior change: •	On a scale of 0 to 10, rate how important each reason is. $(0 = not important at all;$ $10 = extremely important)$
•	-
•	_
•	
•	
Activity 3 – Identify Confidence	
On a scale of 0 to 10, rate your confidence level for making this change. (0 = not confident at all; $10 =$	extremely confident)
My rating is: Don't worry if your rating is low. You can take small steps toward chan	ge regardless of your confidence level.
Answer the following questions to help identify prior successes and challenges to im	prove your confidence level:
Why are you at this level and not a lower one? For example, have you had past success	or have a good support team?
What would help you improve your confidence level? For example, do you need suppo	rt or information?







### My Diabetes Record

Below is a list of items for good diabetes care recommended by the American Diabetes Association. Track your diabetes information and review this with your doctor regularly.

Every Visit:	Date of Visit	Result	Date of Visit	Result
Review blood glucose readings				
Blood pressure check (<140/90)*				
Weight				
Foot exam				
Review meal plan				
Review activity level				
Discuss questions or concerns				
Every three to six months:				
A1C blood test (<7%)				
Every year:				
Physical exam				
Dilated eye exam				
Complete foot exam				
Cholesterol Total				
HDL (men >40, women >50)				
LDL (<100)				
Triglycerides (<150)				
Urine test for protein				
Flu shot				
Ask your doctor about:				
	Date Completed			Date Completed
Getting a pneumonia shot			Stress management	
Aspirin therapy			Unusual symptoms	
Quitting smoking			New treatments	
Sick day plan				

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This document is for general information only and is not intended as a substitute for professional medical care.







### My Current Medications

Name and Dose (number of mgs)	Used For	How Often and When to Take	Notes	Start Date
Prescription medicines				
Nonprescription medicines and	dietary supplements			

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### Diabetes Medications

Drug Class Examples	How the Medication Works
Biguanides  Glucophage, Glucophage XR – metformin  Other:	<ul> <li>decreases the liver's glucose production and insulin resistance in liver, muscle and fat cells</li> <li>may also improve blood lipid (fat) levels</li> </ul>
Sulfonylureas  Glucotrol, Glucotrol XL – glipizide Amaryl – glimepiride Other:	<ul> <li>stimulates the pancreas to produce and release more insulin</li> <li>can be long-acting and may stay in the body up to 72 hours, but most last 24 hours or less</li> </ul>
SGLT2 Inhibitors ☐ Invokana – canagliflozin ☐ Farxiga – dapagliflozin ☐ Steglatro – ertugliflozin	lowers blood sugar by causing the kidneys to remove sugar from the body through the urine
DPP-4 Inhibitors  Januvia – sitagliptin Nesina – alogliptin Other:  TZDs – Thiazolidinediones Avandia – rosiglitazone Actos – pioglitazone	<ul> <li>increases the body's release of insulin in response to a rise in glucose levels</li> <li>prolongs action of gut hormornes</li> <li>delays gastric (stomach) emptying</li> <li>increases insulin sensitivity in muscle and fat cells</li> <li>helps decrease production of glucose in the liver and</li> </ul>
Alpha-glucosidase Inhibitors  Precose – acarbose Glyset – miglitol	<ul> <li>improve blood lipid (fat) levels</li> <li>slows down the digestion of certain carbohydrates, which can help keep blood sugar levels from rising</li> </ul>
Meglitinides (Can cause low blood sugar)  Prandin – repaglinide  Starlix – nateglinide  Other:	<ul> <li>causes a burst of insulin to be released when you eat a meal</li> <li>has a short time of action for mealtime use</li> </ul>
Dopamine Receptor Agonists  □ Cycloset and Parlodel – bromocriptine	helps lower blood sugar levels after a meal
BASs – Bile Acid Sequestrants  Uwelchol – colesevalam	a cholesterol-lowering medication that also reduces blood sugar levels in patients with diabetes
GLP1 – Incretin Mimetics (Injectable hormones)  Trulicity – dulaglutide  Byetta – exenatide, Bydureon – exenatide XR  Victoza – liraglutide  Other:	<ul> <li>increases insulin release with food, slows gastric emptying and promotes feeling of fullness. Also helps suppress glucose from being released by liver and can help with weight loss</li> <li>regulates insulin production in the pancreas and the release of glucose in the bloodstream (These are versions of natural hormones.)</li> <li>taken as injections</li> </ul>
Insulin (Can cause low blood sugar)  Rapid-acting – NovoLog® – aspart, Humalog – lispro Regular or short-acting – Humulin R, Novolin R Intermediate-acting – NPH (Neutral Protamine Hagedom) – isophane Long-acting – Levemir – detemir, Lantus – glargine, Tresiba – degludec	<ul> <li>regulates blood sugar if the pancreas can't produce enough insulin</li> <li>usually taken by injection or pump</li> <li>more than one type may need to be taken</li> <li>rapid acting (bolus) insulin lowers after-meal blood sugar</li> <li>intermediate or long-acting (basal) insulin control blood sugar between meal and overnight</li> </ul>

This chart does not imply endorsement of any type or brand of diabetes medication. It does not list side effects, adverse reactions, interactions or precautions. Only a doctor can recommend or prescribe these medications. Medications in these classes can cause low blood sugar. The U.S. Food and Drug Administration has approved the medications in this chart.

Visit www.tricare.mil and www.express-scripts.com/tricare for current benefit and prescription information.

Source: American Diabetes Association at https://professional.diabetes.org/sites/professional.diabetes.org/files/pel/source/medications.pdf and https://www.diabetes.org/diabetes/medication-management/oral-medication/what-are-my-options

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### **New and Improved Nutrition Facts Label**

The U.S. Food and Drug Administration has updated the Nutrition Facts label on packaged foods and beverages with a fresh design that will make it easier for you to make informed food choices that contribute to lifelong healthy eating habits. Explore it today!

### Size Up Servings H

WHAT'S NEW: Servings per container and serving size are now in larger and/or bolder type. Serving sizes have also been updated to be more realistic to reflect what people actually eat and drink today. Additionally, there are new requirements for certain size packages, such as those that are between one and two servings or are larger than a single serving but could be consumed in one or multiple sittings.

Serving size is based on the amount of food that is customarily eaten at one time. The nutrition information listed on the Nutrition Facts label is usually based on one serving of the food; however, some containers may also have information displayed per package.

• When comparing calories and nutrients in different foods, check the serving size in order to make an accurate comparison.

**Servings per container** shows the total number of servings in the entire food package or container.

• One package of food may contain more than one serving. Some containers may also have a dual column label, which shows the amount of calories and nutrients in one serving and the entire package.

### Consider the Calories

WHAT'S NEW: Calories are now in larger and bolder type and Calories from Fat has been removed because research shows the type of fat consumed is more important than the amount.

**Calories** refers to the total number of calories, or "energy," supplied from all sources (fat, carbohydrate, protein, and alcohol) in one serving of the food.

- As a general rule: 100 calories per serving is moderate and 400 calories per serving is high.
- To achieve or maintain a healthy weight, balance the number of calories you consume with the number of calories your body uses. 2,000 calories a day is used for general nutrition advice. However, your calorie needs may be higher or lower and vary according to age, gender, height, weight, and physical activity level. Check your calorie needs at http://www.choosemyplate.gov.

### When You'll See It

Manufacturers will need to use the new label by July 26, 2018, and small businesses will have an additional year to comply. During this transition time, you will see the current or the new label on products.

### **Nutrition Facts**

2 servings per container

Serving size 1 1/2 cup (208g)

Amount per serving

<u>Calories</u>	<u> 240</u>
% D	aily Value*
Total Fat 4g	5%
Saturated Fat 1.5g	8%
Trans Fat 0g	
Cholesterol 5mg	2%
Sodium 430mg	19%
Total Carbohydrate 46g	17%
Dietary Fiber 7g	25%
Total Sugars 4g	
Includes 2g Added Sugars	4%
Protein 11g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 6mg	35%
Potassium 240mg	6%

\* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice











### Use % Daily Value as a Guide F

WHAT'S NEW: The Daily Values for nutrients have been updated based on new scientific evidence. The Daily Values are amounts of nutrients to consume or not to exceed each day and are used to calculate the % Daily Value. Some of the Daily Values are based on a 2,000 calorie daily diet.

- **% Daily Value (%DV)** shows how much a nutrient in one serving of the food contributes to a total daily diet. Use the %DV to determine if a serving of the food is high or low in an individual nutrient and to compare food products (check to make sure the serving size is the same).
- As a general rule: 5% DV or less of a nutrient per serving is low and 20% DV or more of a nutrient per serving is high.

### Choose Nutrients Wisely F

WHAT'S NEW: The nutrients that are required or permitted on the label have been updated. Added Sugars is now required on the label — aim for less than 10 percent of your total daily calories from added sugars. Vitamin D and potassium are also required on the label because Americans do not always get the recommended amounts. Vitamins A and C are no longer required since deficiencies of these vitamins are rare today.

Use the label to choose products that are lower in nutrients you want to get less of and higher in nutrients you want to get more of.

- Nutrients to get less of: saturated fat, trans fat, sodium, and added sugars. Diets higher in these nutrients can increase the risk of developing high blood pressure and/or cardiovascular disease. Get less than 100% DV of these each day. (Note: trans fat has no %DV, so use the amount of grams as a guide)
- Nutrients to get more of: dietary fiber, vitamin D, calcium, iron, and potassium. Most Americans do not get the recommended amount of these nutrients, and diets higher in these nutrients can decrease the risk of developing diseases, such as high blood pressure, cardiovascular disease, osteoporosis, and anemia. Get 100% DV of these on most days.

### **Nutrition Facts**

2 servings per container Serving size 1 1/2 cup (208g)

Amount per serving Calories

240

	% Daily Value*
Total Fat 4g	5%
Saturated Fat 1.5g	8%
Trans Fat 0g	
Cholesterol 5mg	2%
Sodium 430mg	19%
<b>Total Carbohydrate</b> 46g	17%
Dietary Fiber 7g	25%
Total Sugars 4g	
Includes 2g Added Sug	ars 4%
Protein 11g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 6mg	35%
Potassium 240mg	6%

<sup>\*</sup> The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

Ingredients: Bulgur Wheat, Sauce (Water, Half and Half [Milk, Cream], Parmesan Cheese [Pasteurized Skim Milk, Cultures, Salt, Enzymes], Cheddar Cheese [Pasteurized Milk, Cultures, Salt, Enzymes], Olive Oil, Spice, Butter, Sugar, Xanthan Gum), Lentils, Corn, Green Beans, Red Beans, Potatoes.

Contains: Wheat, Milk

### Check out the Ingredient List F

The Ingredient List shows each ingredient in a food by its common or usual name in descending order by weight. So, the ingredient with the greatest contribution to the product weight is listed first, and the ingredient contributing the least by weight is listed last. The ingredient list is usually located near the name of the food's manufacturer and often below the Nutrition Facts label.

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## Diabetes Action Plan



This action plan is a guide to help you manage the signs and symptoms of diabetes. You and your provider should complete this plan together at your next visit. The three colors (zones), green, yellow and red, help you decide what to do.

Green means you are doing well.  Symptoms are STABLE.  Your diabetes is well controlled.  Your symptoms indicate you may need to talk with your provider.  Symptoms are unstable.  You need to be evaluated now if your yellow zone actions have not helped your symptoms improve.





# High and Low Blood Glucose

Keeping your blood glucose (BG) in the normal range is one of the goals of diabetes management. When you have high or low BG, it is important to check your BG more frequently, think about what may have caused it and treat it appropriately.

	High BG (hyperglycemia)	Low BG (hypoglycemia)
Definition	<ul><li>Any reading above your target range.</li><li>Any reading over 200.</li></ul>	<ul> <li>Any reading at 70 or below.</li> <li>Symptoms may indicate BG is dropping fast and on the way to being low.</li> </ul>
Causes	<ul> <li>too much food</li> <li>not enough medicine or missed dose</li> <li>not enough or decreased exercise</li> <li>stress, illness or surgery</li> <li>steroids</li> <li>sleep apnea or insomnia</li> </ul>	<ul> <li>not enough food or missed meals</li> <li>too much medicine</li> <li>too much or increased exercise</li> <li>drinking alcohol without eating</li> </ul>
Symptoms	<ul> <li>increased thirst</li> <li>increased urination</li> <li>increased tiredness</li> <li>increased hunger</li> <li>blurred vision</li> </ul>	<ul> <li>sweating or cold, clammy skin</li> <li>dizziness, shakiness</li> <li>hard, fast heartbeat</li> <li>headache</li> <li>confusion or irritability</li> </ul>

### Sick-Day Plan

diabetes control may be When you are ill, your affected.

- diabetes medication as Continue taking your directed.
- Check urine for ketones if dl or higher, and you have blood glucose is 240 mg/ type 1 diabetes.
- and sips of juice are good choices if your stomach is Eat regularly. Soup, toast upset.
- Check your blood glucose every three to four hours.
  - Drink plenty of liquids.
- Call your provider if your pre-meal blood glucose

level is over 240 mg/dl,

over 24 hours, or if you

have been vomiting or

and stays that high for

experiencing diarrhea for

over 6 hours.

### Writing SMART Goals

Most people start with an outcome goal. An example of an outcome goal is: "The overall goal I want to reach is to live healthier and lose two inches around my waist."

To reach an outcome, you must have behavior goals. For example: "I want to walk five days a week for 30-60 minutes a day."

The chart below shows a brainstorming process to break this behavior goal down into a weekly SMART behavior goal. This is an example of what the final weekly SMART goal might be: "This week I will walk 15 minutes a day at a brisk pace for three days."

Breaking down the steps to writing a

Specific,

Measurable,

Attainable,

Relevant, and

Time-bound (SMART) goal.

Goal Component	Example
SPECIFIC What, when, where, and how will the behavior be done?	I want to walk regularly (at least five days a week) in the morning to help me reduce inches around my waist.
MEASURABLE  How much, how many, and/or how often will you do the behavior?	I want to walk 30-60 minutes a day at a brisk pace five days a week.
ATTAINABLE  What are your steps to meet or reach your goal?  Set your goal low enough to be reached, but high enough to be a challenge.	I will start walking 15 minutes a day for three days a week and work up to 30 minutes a day for five days a week. Seven days might be too high (no room for unexpected events or illness). One day is too low and not enough to help me lose inches.
RELEVANT  Is it the right behavior goal to help you meet your overall outcome? Is it a good time in your life to be setting this goal?	Now that my children are back in school and the holidays are over I can start walking in the morning.
TIME-BOUND  Make sure your goal includes a specific time frame in which you will achieve it.	I will increase my time each week by five minutes until I reach 30 minutes a day. I will add an extra day every two to four weeks until I reach 30-60 minutes for five days a week.

Now it's your turn. Write and track your own SMART goal.





