



UNIVERSITY OF MICHIGAN HOSPITALS AND HEALTH CENTERS
Metabolism, Endocrinology & Diabetes (MEND)
Adult Diabetes Education Program

DIABETES FOOD & BLOOD GLUCOSE LOG

Name:
MRN:
BIRTHDATE:

DATE:

Time	12a	1a	2a	3a	4a	5a	6a	7a	8a	9a	10a	11a	12p	1p	2p	3p	4p	5p	6p	7p	8p	9p	10p	11p	
Blood Sugar																									
Carbs																									
Bolus Insulin																									
Basal Insulin																									

Exercise (what & when):

BREAKFAST (time):			LUNCH (time):			DINNER (time):		
How much	What I ate: be specific	Carb grams	How much	What I ate: be specific	Carb grams	How much	What I ate: be specific	Carb grams
1 cup	<i>Example:</i> Cheerios	22g						
1 cup	1% milk	12g						
Morning Snack (time):			Afternoon Snack (time):			Evening Snack (time):		