# **Personal Diabetes Passport**

Contact information:	•			
Name:	Number:			
Physician:	Number:			
Diabetes Education Centre:	Number:			
Dietitian:	Number:			
Ophthalmologist:	Number:			
Chiropodist:	Number:			
Type of Diabetes:				
☐ Type 1 (T1DM)	□ Type 2(T2DI)	M)		
		4)		
☐ Increased risk for diabetes	☐ Gestational			
Date diagnosed:				
This Dishetes Deservet contains impor	tant information abo			
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# **Overview of Screenings and Recommendations**

Weight/ BMI:	Medical nutrition therapy:	How you feel:
Dr will determine your:	Dietitian will work with you to:	Tell your doctor if you have
■ BMI	develop a personalized, realistic eating plan to suit	experienced any of the following recently:
weight is in an acceptable	your lifestyle and type of diabetes – <b>stick to it!</b>	<ul> <li>Feeling down, depressed or hopeless</li> </ul>
range  refer you to Diabetes Education Centre for	teach you to read food labels, modify recipes and order at restaurants	<ul> <li>Having trouble sleeping or sleep too much</li> </ul>
diabetes education and nutrition counselling	Key points: portion size/number servings/ limit	Feeling tired, listless or have little energy
If obese, Dr will refer you for weight loss	foods high in sugar/reduce high fat foods /increase fruit and vegetable intake	Not being able to focus on normal activities Having little interest in doing
5-10% reduction in weight has positive health benefits	_	things
Physical activity:  Exercise according to Dr:	Smoking:  If you smoke, quit	Blood glucose control:  Daily self-monitoring of blood
_	_ ' ' ' '	sugar (BS) is important:
Exercise 30-60 minutes 5 times a week (can be in 10	Sign up for smoking cessation programme/and online	Before-meals 80-120 mg/dL
min blocks of time)  Exercise should be of	support	2 hours post- meal <180mg/dL
moderate intensity	<ul> <li>It may take more than one or two attempts to successfully</li> </ul>	Bedtime 100-140 mg/dL
Exercise can lower BS levels and may lessen your requirement for medication  More exercise (60 minutes a day) required for weight loss	quit smoking  Approved smoking cessation drugs can assist with smoking cessation	HbA1c every 3-6 months <7% - good control 7-8% - moderate control >8% - not well controlled
Hypertension:	Foot care:	Lipids:
Target blood pressure (BP):	■ Dr will refer you (T2DM) to	LDL cholesterol < 100 mg/dL
130/80 mg Always take your BP	chiropodist at diagnosis  Check your feet daily for	HDL cholesterol > 50 mg/dL
medication (if you stop your BP will go up)	sores	Triglycerides < 150 mg/dL
You may need more than one type of BP medication to	<ul><li>Call Dr if you develop sores</li><li>Ensure you have foot care</li></ul>	<ul> <li>Diabetes puts you at risk for cardiovascular disease</li> </ul>
You must have regular BP checks	education and professionally fitted footwear if required	Take lipid medications as prescribed:
Limit your intake of high sodium foods	Get immediate treatment for any infection of a diabetic foot	<ul><li>Statin drugs</li><li>ACE-inhibitors</li></ul>
		_
Diabetic Kidney Disease:	Neuropathy:	ASA Retinopathy:
DKD is a life threatening complication of diabetes  Dr will screen annually:  Albumin-creatinine ratio	Nerve damage can progress slowly and lead to loss of pain or touch sensations to your feet. It can also cause pain in legs, arms, or hands.	Retinopathy is a disorder of the eye that occurs in adults with diabetes  Dr will refer you (T2DM) to ophthalmologist at diagnosis
(ACR) Serum creatinine	■ Dr will screen annually	Have your eyes checked annually
Estimated glomerular filtration rate (eGFR)	Dr may refer you for pain management as required	Inform doctor of blurred vision, black spots etc
■ Dr will refer to nephrologist	Check your feet daily	Attend any Dr referrals
or internist if you have chronic progressive loss of kidney function	Stop/limit alcohol intake	Follow through with Drs treatment plan
To slow progression of DKD keep BS and BP as near to normal as possible	<ul> <li>If you smoke, quit</li> <li>Keep BS and BP as near to normal as possible</li> </ul>	Keep BS and BP as near to normal as possible
Horriar as possible		

#### **Your Diabetes Numbers**

Date: Height Weight BMI Waist circumference SELF-MANAGEMENT (discuss with doctor) Diabetes education Nutrition Physical activity Mental health Alcohol Smoking Patient care plan EVERY VISIT (3-6 months) Review SMBG log HbA1c * BG goals met
Weight BMI Waist circumference SELF-MANAGEMENT (discuss with doctor) Diabetes education Nutrition Physical activity Mental health Alcohol Smoking Patient care plan EVERY VISIT (3-6 months) Review SMBG log HbA1c *
BMI Waist circumference  SELF-MANAGEMENT (discuss with doctor) Diabetes education Nutrition Physical activity Mental health Alcohol Smoking Patient care plan EVERY VISIT (3-6 months) Review SMBG log HbA1c *
Waist circumference  SELF-MANAGEMENT (discuss with doctor)  Diabetes education  Nutrition  Physical activity  Mental health  Alcohol  Smoking  Patient care plan  EVERY VISIT (3-6 months)  Review SMBG log  HbA1c *
SELF-MANAGEMENT (discuss with doctor)  Diabetes education  Nutrition  Physical activity  Mental health  Alcohol  Smoking  Patient care plan  EVERY VISIT (3-6 months)  Review SMBG log  HbA1c *
Diabetes education  Nutrition  Physical activity  Mental health  Alcohol  Smoking  Patient care plan  EVERY VISIT (3-6 months)  Review SMBG log  HbA1c *
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Physical activity  Mental health  Alcohol  Smoking  Patient care plan  EVERY VISIT (3-6 months)  Review SMBG log  HbA1c *
Mental health Alcohol Smoking Patient care plan  EVERY VISIT (3-6 months) Review SMBG log HbA1c *
Alcohol Smoking Patient care plan  EVERY VISIT (3-6 months) Review SMBG log HbA1c *
Smoking Patient care plan  EVERY VISIT (3-6 months) Review SMBG log HbA1c *
Patient care plan  EVERY VISIT (3-6 months)  Review SMBG log  HbA1c *
EVERY VISIT (3-6 months) Review SMBG log HbA1c *
Review SMBG log HbA1c *
HbA1c *
BG goals met
Blood pressure
Foot care
ANNUAL
Lipid profile - TC
- LDL
- HDL
- Triglycerides
Foot exam
Neuropathy
Eye exam
Kidney
- ACR ratio
- eGFR
Microalbuminuria
Immunizations
- Influenza
- Pneumococcus
WELL PERSON SCREENINGS
Dental cleaning *
Mammogram and a second
PAP / PSA
Breast/Prostate exam
Colonoscopy

<sup>\*</sup> See frequently asked questions on page 8

#### **Every Visit Diabetes Numbers**

EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
Date:						
Weight						
BMI						
SELF-MANAGEMENT	(discus	s with d	octor)			
Diabetes education						
Nutrition						
Physical activity						
Mental health						
Alcohol						
Smoking						
Patient care plan						
EVERY VISIT (3-6 m	onths)					
Review SMBG log						
HbA1c						
Blood glucose						
BG goals met						
<b>Blood pressure</b>						
Foot care						

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EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
Date:						
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Physical activity						
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EVERY VISIT (3-6 m	onths)					
Review SMBG log						
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Blood glucose						
BG goals met						
Blood pressure						
Foot care						

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EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
Date:						
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SELF-MANAGEMENT	(discus	s with d	octor)			
Diabetes education						
Nutrition						
Physical activity						
Mental health						
Alcohol						
Smoking						
Patient care plan						
EVERY VISIT (3-6 m	onths)					
Review SMBG log						
HbA1c						
Blood glucose						
BG goals met						
<b>Blood pressure</b>						
Foot care						

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EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
Date:						
Weight						
BMI						
SELF-MANAGEMENT	(discus	s with d	octor)			
Diabetes Education						
Nutrition						
Physical activity						
Mental health						
Alcohol						
Smoking						
Patient care plan						
EVERY VISIT (3-6 m	onths)					
Review SMBG log						
HbA1c						
Blood glucose						
BG goals met						
Blood pressure						
Foot care						

### **Annual Screening Numbers**

EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
ANNUAL						
Lipid profile - TC						
- LDL						
- HDL						
- Triglycerides						
Foot exam						
Neuropathy						
Eye exam						
Kidney						
- ACR ratio						
- eGFR						
Microalbuminuria						
Immunizations						
- Influenza						
- Pneumococcus				one lifetin ation requ		ococcal

## **Annual Screening Numbers**

EXAM/ TEST	Date:	Date:	Date:	Date:	Date:	Date:
ANNUAL						
Lipid profile - TC						
- LDL						
- HDL						
- Triglycerides						
Foot exam						
Neuropathy						
Eye exam						
Kidney						
- ACR ratio						
- eGFR						
Microalbuminuria						
Immunizations						
- Influenza						

#### **Medications**

Date:	Medication:	Dose:	Frequency:

#### **Frequently Asked Questions**

**What is BMI?** BMI stands for **Body Mass Index.** It's a number that shows body weight adjusted for height. BMI is used to indicate if you are normal, overweight, obese, or underweight. BMI does not measure body fat and muscle mass.

Why will doctor measure my waist circumference? Carrying fat primarily around your waist, or being "apple-shaped", puts you at much greater risk of developing obesity-related health problems such as type 2 diabetes, dyslipidaemia, hypertension and cardiovascular disease.

Classification:	BMI	Waist circumference:
Normal	18.5-24.9	At increased health risk if:
Overweight	25.0-29.9	Men >40 in (102 cm)
Obesity (I)	30.0-34.9	Women >35 in (88 cm)
Obesity (II)	35.0-39.9	Women <u>2</u> 33 iii (66 ciii)
Severe obesity (III)	<u>&gt;</u> 40	

Why should I have a dental cleaning twice a year? Persons with diabetes are at increased risk for tooth decay and gum disease. A gum infection (periodontitis) can cause blood sugar levels to rise. Therefore, brush your teeth twice a day, use a tongue scraper to remove bacteria and floss teeth daily.

**Is there treatment for erectile dysfunction (ED)?** ED affects 34-45% of men with diabetes. Men can complete a Sexual Health Inventory online at <a href="http://www.njurology.com/">http://www.njurology.com/</a> forms/shim.pdf. Doctor can prescribe medication to treat ED.

**What is HbA1c?** (also known as glycated haemoglobin) The level of HbA1c reflects your average blood glucose level over the past 3 months. A HbA1c level greater than 6.5% is diagnostic of diabetes.

**What is IFG and IGT?** Persons diagnosed with impaired fasting glucose (IFG) and/or impaired glucose tolerance (IGT), have blood glucose levels higher than normal but not high enough to be classified as diabetes. These individuals have an increased risk of developing type 2 diabetes, heart disease, and stroke. Their HbA1c level will be between 5.7%-6.4%

**What is cholesterol?** A fat-like substance found in blood, muscle, liver, brain, and other tissues. Too much cholesterol causes fat to build up in the walls of the larger arteries and cause atherosclerosis. High levels of triglycerides are also associated with an increased risk of heart disease.

**What are trans fats?** *Trans fats* found in foods can raise blood cholesterol levels. If the ingredient list includes "shortening," "partially hydrogenated vegetable oil" or "hydrogenated vegetable oil," the food contains trans fats.

How many grams of sugar in a teaspoon of sugar?

4 grams of sugar which is equivalent to 16 calories.



**Diabetes Task Group 2009**