

**Daily Blood Glucose and
 Food Intake Log**

| Date | Fasting (before breakfast) | 2 hours after breakfast | 2 hours after lunch | 2 hours after dinner | Food record: breakfast, lunch, dinner, snacks and beverages (please write small or use a separate sheet) | Exercise time/activity | Ketones |
|------|----------------------------------|-------------------------------|---------------------------|----------------------------|---|---------------------------|---------|
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |
| | | | | | _____ _____ | | |

Glucose Goals: Fasting < 95 mg/dl, 2 hours after a meal < 120 mg/dl. Ketones record as negative, trace or moderate.

Please call the office at 847-304-0044 if you have 3 or more glucose readings above range or moderate ketones.