**BLOOD SUGAR**

|  |  |
| --- | --- |
| **Name:** | [Full Name] |

(Review & adjust weekly)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** | Wake-Up (pre-breakfast) | Pre-Lunch | **Afternoon** | **Pre-Dinner** | **Bedtime** **(pre-snack)** |
| [MM/DD/YYYY] |  |  |  |  |  |
| [MM/DD/YYYY] |  |  |  |  |  |
| [MM/DD/YYYY] |  |  |  |  |  |
| [MM/DD/YYYY] |  |  |  |  |  |
| [MM/DD/YYYY] |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **# High:** |  |  |  |  |  |
| **# OK:** |  |  |  |  |  |
| **# Low:** |  |  |  |  |  |

Changes\*: **\* If 3 or more highs, or 2 or more lows, change I:C ratio at the previous meal or snack!**