

EDMONTON IDEA CLINIC

Your Name: _____

Target BS _____

Dietitian: _____

Diabetic Nurse: _____

Fax: 780 407 8291

Date	Before Bkfst	I:C	Breakfast	2 hr blood sugar	Snack	Before lunch	I:C	Lunch	2 hr blood sugar	Snack	Before supper	I:C	Supper	2 hr blood sugar	Bedtime	Bedtime snack	3AM blood sugar
	BS					Insulin					BS				Insulin		
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Basal Rate/Insulin Regimen: _____

Legend: I:C = insulin to carbohydrate ratio
 CF = Correction factor
 BG = Blood sugar (blood glucose)