



#### **Building healthier lives**

**UHB** is a no smoking Trust

To see all of our current patient information leaflets please visit www.uhb.nhs.uk/patient-information-leaflets.htm

# Your insulin Quick acting / bolus ..... Background / basal ..... Your Insulin to Carbohydrate Ratio (ICR) Morning ..... Evening ..... Your Insulin Sensitivity Factor (ISF) Your target blood glucose levels Refore breakfast ..... Before other meals .....

Before bed .....

### Blood glucose, carbohydrate and insulin record

As you first start to practise carbohdyrate (CHO) counting, writing down the meals you eat and calculating the amount of carbohydrate in each food can help you become more accurate in your estimation of carbohydrate content and calculation of the amount of insulin you require.

Even once you feel confident at carbohydrate counting it may still be useful to record your CHO intake and your actions. This is particularly useful if you are planning on making changes to your diet and/or lifestyle.

For example, key points to test your glucose around exercise are;

**Before:** two readings taken 10 mins apart; the second reading gives the direction in which your glucose levels are moving

During: check glucose levels every 30 mins during exercise if possible

After: check on finishing, one hour later and six hours later (or before bed)

You may have been advised to test your glucose levels at different times; always follow any specific advice provided by your Diabetes team.

#### **Glossary:**

BG blood glucose CHO carbohydrate

## Level of activity / intensity (Borg Scale)

0-6	rest – no exertion
7–11	extremely easy – very easy – light exertion
12–14	light exertion – moderate exertion
15–17	exhausting (can continue)
18–19	very exhausting (can continue with effort)
20	maximal exhaustion (unable to continue)

PI22\_1166\_07 Blood glucose, carbohydrate and insulin record I 3

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin (	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

Background/Basal insulin o	dose given(am)	(pm)
Day and date		
Time		
BG		
CHO consumed		
Total CHO		
Insulin for food		
Insulin to correct		
Comments e.g : Activity level, duration & action taken		

#### For further information/advice contact

Queen Elizabeth Hospital Birmingham

Diabetes Team

Telephone: **0121 371 4523 / 0121 371 4661** 

Heartlands Hospital, Solihull Hospital and Good Hope Hospital

**Diabetes Dietitians** 

Telephone: 0121 424 3146

Solihull Community Diabetes Service

Telephone: 0121 770 4432

**University Hospital Birmingham NHS Foundation Trust**