



Diabetes Zone Tool

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| Every Day | <ul style="list-style-type: none"> • Take your medications as prescribed at the same times each day. • Eat a balanced diet spread throughout your day – DON'T SKIP MEALS. • Be as active as you are able. • Test and control your blood sugar as ordered. |
| Green Zone | <p>ALL CLEAR! This zone is your goal. Keep up the good work!</p> <ul style="list-style-type: none"> • You DO NOT have symptoms of high or low blood sugar • You are able to take your medications as prescribed. • You are following your prescribed diet and exercise program. • You are testing your blood sugar regularly, as prescribed. • Your blood sugar is in the recommended range. • You are able to keep your Home Care Nurse and /or Doctor appointments. • Following the Rate your Plate guidelines. |
| Yellow Zone | <p>CAUTION!! This zone is a warning and you should call your doctor if...</p> <ul style="list-style-type: none"> • You are not able to take medications as prescribed or test your blood sugar. • Your blood sugar is under 70 and does not come up with increased carbohydrate intake (OJ, Milk, Glucose gel or tablets) • Blood glucose is over 200 on 3 tests in a row. • Your temperature is over 101 degrees Fahrenheit • Vomiting or diarrhea lasting for more than 6 hours. • You are not able to eat due to upset stomach or vomiting. • New sore or problem with your feet • Not able to do your normal activities and/or follow your exercise program. • Trouble with dizziness, confusion, increased thirst or urination, or blurred vision. |
| Red Zone | <p>EMERGENCY!!! Call 911 or have someone take you to the Emergency Room!!</p> <ul style="list-style-type: none"> • If your blood glucose is under 20. • You are unable to stay awake, even during the day. • You are very confused or not thinking clearly. • You have difficulty speaking or slurred words. |

References: www.ihl.org
CareNotes® **DIABETES MELLITUS TYPE 1 IN ADULTS - General Information**

Key Contacts- Fill in numbers for:

Primary Physician: _____

Endocrinologist: _____

VNA: _____

Other: _____
