

BLOOD GLUCOSE PATIENT LOG SHEET

REVIEWED 10/2024

Date Before Breakfast After Breakfast Before Lunch After Lunch Before Supper After Supper Bedtime Exercise/Other Comments						
	Date				Bedtime	

Patient Name:______Phone Number:_____

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Date	Before Breakfast	After Breakfast	Before Lunch	After Lunch	Before Supper	After Supper	Bedtime	Exercise/Other Comments

Patient Name: _____Phone Number: _____

Becki Franks RN, CDCES

Certified Diabetes Care & Education Specialist Questions? Call: 712.542.8263