

NAME _____

Instructions:

Blood glucose log

Day	Breakfast		Lunch		Evening meal		Bedtime	2 am
	Pre (fasting)	Post	Pre	Post	Pre	Post		
1								
2								
3								
4								
5								
6								
7								

Pre meal		Post meal	
Below 70	Low	Below 70	
70 to 130	Goal	70 to 180	
130 to 240	Above Goal	180 to 240	
Above 240	High	Above 240	

NOTES