

What DCP Discovery Can Do For You

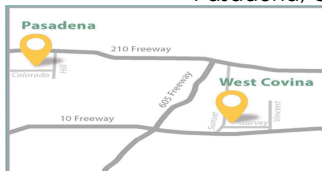
Few people achieve the blood sugar (BS) targets that experts recommend. There are many reasons for this, including:

- ♦ **Getting general information about diabetes, not specific advice** about how to manage diabetes in their own life – their foods, their medicines, and their priorities.
- ♦ **Gathering just the numbers when they test.** When they or their doctor review the numbers, they do not know the conditions surrounding each number. If you do not know exactly what produced a number, you cannot know what to do to make it better.
- ♦ **Testing too little** to discover patterns & relationships.

With the DCP Discovery process, you can learn exactly how your diabetes works and take specific actions to reach your goals. No more testing without improvement. And no more living in the “diabetes cookie cutter box.” Call us to register for our next diabetes program.

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WE ACCEPT MOST INSURANCE AND CASH PATIENTS

A Guide for New and Experienced People Living with Diabetes



Discover Your Diabetes

Are you frustrated by testing your blood sugar but seeing no improvement?

Do you feel like your life doesn't fit in the “diabetes Cookie cutter box?”

Then use this simple tool to Discover how your diabetes actually works.

FROM DIABETES CARE PARTNERS

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How to make Blood Glucose Checks Your “Tool of Discovery”

Step 1: Decide to Do It

If you are not sure why you should, read the **What DCP Discovery Can Do for You** section of this brochure.

Step 2: Gather Information

Use the record form on the back to gather detailed information about your diabetes for at least 3-4 days. Repeat as needed. In addition to your BS's (Blood sugars), record the things that contribute to the results, such as what you eat, your medicines, exercise, and illness or stress. Go about your usual life. Eat the foods you enjoy and normally eat in amounts normal for you. This is how to learn the most about your diabetes – to see what is working and what is not.

Make Sure It Is the Right Information

BS's at different times give different information. In combination, they can show exactly how both your treatment and your own actions affect your BS.

Fasting & before meal checks tell you if you have enough insulin* to control BS when you are NOT eating. They are also the starting point for seeing the effect of what you eat.

After meal checks show you if your insulin* matched what you ate.

Bedtime and nighttime checks show the pattern of BS's over night and can reveal unrecognized lows.

Checks before driving or exercising can show when you are at risk of lows or high blood sugar.

When you have your records, move on to **Step 3**.

* whether from your body or from injections

Step 3: Use What You Find

Once you **Discover** a problem, take steps to correct it. As each problem is fixed, your overall control will improve.

Start with the Morning Fasting – if your BS averages over 100 before breakfast, especially if it rises over night, it can mean your body is releasing extra sugar at night. This problem is best treated with medicines. See your doctor. Starting high each morning makes it hard to control BS the rest of the day.

Highs Before Other Meals – if your BS averages above 100 before lunch or dinner after the morning fasting has been fixed, check to see if the BS two hours after the previous meal was too high also. If so, work on that.

Look at Each Meal – If your BS rises more than 50 points when you eat, it means there was not enough insulin* to match what you ate. Consider reducing carbohydrate to better match insulin*. This makes most sense if you are eating more than 45-60 grams of carb** at a meal. If your BG rises over 50 points when you eat less than 45-60 grams, your mealtime insulin* levels are too low. Talk to your doctor about adjusting medicines or doses. If after meal BS stays high, A1c will be above target.

If You Find Lows – BS of 70 or less means there was too much insulin* for the current need. This can happen if you delay or skip a meal or snack or you are more active. If that was not the case, your medicines may need adjustment.

* If you do not know how to identify and count carbohydrate foods, ask your doctor for a referral to diabetes education.