

My Diabetes **Logbook**



i·sens Sensing Ahead, Caring More

My Diabetes
Logbook

Thank you for choosing our system

Our system provides you with fast, safe and convenient blood glucose *in vitro* (i.e., outside the body) diagnostic monitoring.

You can obtain accurate results with a small (0.5 µL) blood sample.

Conversion

mmol/L	mg/dL	mmol/L	mg/dL	mmol/L	mg/dL	mmol/L	mg/dL				
1.1	↔	20	6.0	↔	108	10.5	↔	189	22.2	↔	400
1.5	↔	27	6.1	↔	110	11.0	↔	198	23.0	↔	414
2.0	↔	36	6.7	↔	120	11.5	↔	207	24.0	↔	432
2.2	↔	40	7.0	↔	126	12.0	↔	216	25.0	↔	450
2.5	↔	45	7.2	↔	130	12.5	↔	225	26.4	↔	475
2.8	↔	50	7.5	↔	135	13.9	↔	250	27.8	↔	500
3.0	↔	54	7.8	↔	140	14.4	↔	260	30.0	↔	540
3.3	↔	60	8.0	↔	145	15.0	↔	270	33.3	↔	600
3.9	↔	70	8.1	↔	146	16.0	↔	288			
4.0	↔	72	8.3	↔	150	17.0	↔	306			
4.4	↔	80	9.0	↔	162	18.0	↔	325			
4.7	↔	85	9.4	↔	170	19.0	↔	342			
5.0	↔	90	10.0	↔	180	20.0	↔	360			
5.6	↔	100	10.1	↔	182	20.8	↔	375			

Fill in the following information for quick and easy reference. This logbook covers the period from

____ / ____ to ____ / ____ / ____

Name: _____

Address:

City: _____ County/State:

Post Code/Zip:

Phone:

I have diabetes. For medical assistance, please contact:

Doctor's Name:

Doctor's Phone:

Address:

City: _____ County/State:

Post Code/Zip:

*I take the following medications:

Blood Glucose Test Result Chart Example

The following provides an example of how to chart your blood glucose test results and related information.

Day	Breakfast			Lunch			Dinner			Bedtime		
	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After
Date	Insulin/ Medication	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose
Mon.	●			●			●					
Comments	[Shaded area with a line graph showing blood glucose fluctuations]											
Tue.												
Comments												
Wed.												
Comments												

Record the test date

Record the type and the amount of insulin you take each time

Record your blood glucose result of "Before" / "After" meal test into the proper space

Record any particular condition like diet, exercise or stress

Record the test time

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime			
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime		
		Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																	
Comments																	

Tue.																	
Comments																	

Wed.																	
Comments																	

Thu.																	
Comments																	

Fri.																	
Comments																	

Sat.																	
Comments																	

Sun.																	
Comments																	

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime			
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime		
		Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																	

Comments

Tue.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Wed.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Thu.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fri.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sat.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sun.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Memo

		Breakfast				Lunch				Dinner				Bedtime			
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime		
		Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																	

Comments

Tue.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Wed.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Thu.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fri.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sat.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sun.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Memo

		Breakfast				Lunch				Dinner				Bedtime			
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime		
		Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																	

Comments

Tue.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Wed.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Thu.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fri.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sat.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Sun.																	
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments																
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments															
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments															
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments															
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Comments															
----------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose	Insulin/ Medication	Time	Blood Glucose	Time	Blood Glucose
Mon.																
Comments																
Tue.																
Comments																
Wed.																
Comments																
Thu.																
Comments																
Fri.																
Comments																
Sat.																
Comments																
Sun.																
Comments																
Memo																

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Memo

		Breakfast				Lunch				Dinner				Bedtime		
Day	Date	Time	Before	After	Time	Before	After	Time	Before	After	Time	Before	After	Time	Bedtime	
		Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose	Time	Insulin/ Medication	Time	Blood Glucose
Mon.																
Comments																

Tue.																
Comments																

Wed.																
Comments																

Thu.																
Comments																

Fri.																
Comments																

Sat.																
Comments																

Sun.																
Comments																

Memo

Memo
