Daily Diabetes Log

Patient's Name: _____

Date of Birth: _____

Home Phone # : _____

Work Phone # : _____

Cell Phone # : _____

Insulin Types:

Washington University Physicians

Washington University School of Medicine in St. Louis

Garry S. Tobin, M.D., Gaye Knutsen, APRN.

Janet McGill, M.D., ***Kim Carmichael, M.D*** . *, Julie Silverstein, M.D.

Internal Medicine - Diabetes Center

4921 Parkview Place Ste.13 B, St. Louis, MO 63110

Scheduling: 314-747-7300 Fax: 314-747-7065

PLEASE CIRCLE YOUR PROVIDER'S NAME

Date	AM			2 Hours	Noon			2 Hours	Dinner			2 Hours	Bedtime	Comments/Etc.
	S	I	C		S	I	C		S	I	C			*Reactions, Illness, Activities*

S-I-C Guide

S = Sugar/Blood Glucose

I = Insulin Dose

C = Carbohydrates

List of Medications: