

GOOD TO KNOW



Making Sense of BGM Data for a Basal-Bolus Insulin User

DATE		Fasting or Pre-breakfast	Post-breakfast or Pre-lunch	Post-lunch or Pre-dinner	Post-dinner or Bedtime
	TIME				
	GLUCOSE				
	CARBS				
	INSULIN				
NOTES					

Standard fasting or pre-meal glucose target range:
80–130 mg/dL or custom range:

Standard post-meal glucose target range:
80–180 mg/dL or custom range:

DATE		Fasting or Pre-breakfast	Post-breakfast or Pre-lunch	Post-lunch or Pre-dinner	Post-dinner or Bedtime
	TIME				
	GLUCOSE				
	CARBS				
	INSULIN				
NOTES					

When your fasting or pre-breakfast glucose is consistently high:
Consider eating fewer carbs with dinner. Consider being more active in the evening. If the glucose doesn't come down with your own efforts, discuss an adjustment of your insulin dose with your diabetes care team.

DATE		Fasting or Pre-breakfast	Post-breakfast or Pre-lunch	Post-lunch or Pre-dinner	Post-dinner or Bedtime
	TIME				
	GLUCOSE				
	CARBS				
	INSULIN				
NOTES					

When your post-meal glucose is consistently high:
Consider eating fewer carbs with your meals. Discuss an adjustment of your insulin dose with your care team.

When you have frequent hypoglycemia:
Discuss an adjustment of your insulin dose with your care team.

Basal insulin name: _____ Morning dose: _____ units
Evening dose: _____ units

Bolus insulin name: _____ Dosing type: fixed dose with meals
 insulin-to-carb ratio
 correctional scale

Fixed dose
Breakfast dose: ___ units
Lunch dose: ___ units
Dinner dose: ___ units

Insulin-to-carb ratio
Breakfast dose: ___ units/g
Lunch dose: ___ units/g
Dinner dose: ___ units/g

Correctional scale
Add 1 unit of insulin for every ___ mg/dL over ___ mg/dL.

Always follow the instructions for taking your insulin provided to you by your health care team. Have a plan to treat hypoglycemia (glucose <70 mg/dL) and a plan for days when you are sick. Report all serious hypoglycemia.

Making Sense of CGM Data for a Basal-Bolus Insulin User

	TIME IN RANGE	TIME BELOW RANGE	TIME ABOVE RANGE
Definition	The percentage of your readings between 70 and 180 mg/dL	The percentage of your readings <70 mg/dL (low) or <54 mg/dL (very low)	The percentage of your readings >180 mg/dL (high) or >250 mg/dL (very high)
Standard Target	>70%	<4% low; <1% very low	<25% high; <5% very high
Custom Target			
Your data/date			
Your data/date			
Your data/date			

- Before meals, use current glucose data and trend arrow in calculating insulin doses and deciding whether to deliver doses before or after eating.
- Two hours after meals, determine whether correctional insulin is needed.
- At bedtime, use current glucose data and trend arrow to decide whether corrective action is needed to prevent nighttime hypoglycemia or hyperglycemia.
- During and after exercise, monitor glucose every 15–30 minutes to prevent hypoglycemia.
- During sick days, monitor glucose levels at least every 4 hours. Vitamin C and aspirin may affect the accuracy of glucose readings with FreeStyle Libre and Medtronic CGM devices. (FreeStyle Libre 2 is not affected by aspirin.)

Medtronic	Dexcom	FreeStyle Libre	Trend Meaning	Glucose Value	Actions to Help You Stay or Get in Range
↑↑↑↑	↑↑		Glucose rising >3 mg/dL/min	High	<ul style="list-style-type: none"> ▶ Take correctional insulin if you have not already done so in the past 2 hours. ▶ If you will eat, you can take your bolus insulin for your meal before you start eating; do not consume food, snacks, or drinks containing carbs until the trend arrow levels off.
↑↑	↑	↑	Glucose rising 2–3 mg/dL/min (>2 mg/dL/min for FreeStyle Libre)	In range	<ul style="list-style-type: none"> ▶ Your glucose is fine right now but rising; check back in 15 minutes. ▶ If you will eat, you can take your bolus insulin for your meal before you start eating; do not consume food, snacks, or drinks containing carbs until the trend arrow levels off.
↑	↗	↗	Glucose rising 1–2 mg/dL/min	Low	<ul style="list-style-type: none"> ▶ Your glucose is currently low but moving in the right direction; check back in 5 minutes. ▶ If you will eat, you can take your bolus insulin for your meal after you start eating; do not take your bolus until your glucose is out of the low range.
No arrow	→	→	Glucose changing slowly <1 mg/dL/min	High	<ul style="list-style-type: none"> ▶ Take correctional insulin if you have not already done so in the past 2 hours. ▶ If you will eat, you can take your bolus insulin for your meal before you start eating; do not consume food, snacks, or drinks containing carbs until the trend arrow levels off.
				In range	<ul style="list-style-type: none"> ▶ If you will eat, you can take your bolus insulin for your meal before you start eating.
				Low	<ul style="list-style-type: none"> ▶ Your glucose is currently low; to correct it, consume fast-acting carbs (usually 4 oz of juice or 3–4 glucose tablets); check back in 5 minutes. ▶ If you will eat, you can take your bolus insulin for your meal after you start eating; do not take your bolus until your glucose is out of the low range.
↓	↘	↘	Glucose falling 1–2 mg/dL/min	High	<ul style="list-style-type: none"> ▶ Your glucose is currently high but moving in the right direction; check back in 15 minutes. ▶ If you will eat, you can take your bolus insulin for your meal after you start eating; do not take your bolus until the trend arrow levels off.
↓↓	↓	↓	Glucose falling 2–3 mg/dL/min (>2 mg/dL/min for FreeStyle Libre)	In range	<ul style="list-style-type: none"> ▶ Your glucose is fine right now but falling; check back in 5 minutes. ▶ If you will eat, you can take your bolus insulin for your meal after you start eating; do not take your bolus until the trend arrow levels off.
↓↓↓	↓↓↓		Glucose falling >3mg/dL/min	Low	<ul style="list-style-type: none"> ▶ Your glucose is currently low; to correct it, consume fast-acting carbs (usually 8 oz of juice or 6–8 glucose tablets); check back in 5 minutes. ▶ If you will eat, you can take your bolus insulin for your meal after you start eating; do not take your bolus until your glucose is out of the low range.

Basal insulin name: _____ Morning dose: _____ units
Evening dose: _____ units

Bolus insulin name: _____ Dosing type: fixed dose with meals
 insulin-to-carb ratio
 correctional scale

Fixed dose
Breakfast dose: _____ units
Lunch dose: _____ units
Dinner dose: _____ units

Insulin-to-carb ratio
Breakfast dose: _____ units/g
Lunch dose: _____ units/g
Dinner dose: _____ units/g

Correctional scale*
Add 1 unit of insulin for every _____ mg/dL over _____ mg/dL.

Always follow the instructions for taking your insulin provided to you by your health care team. Have a plan to treat hypoglycemia (glucose <70 mg/dL) and a plan for days when you are sick. Report all serious hypoglycemia.

*Some CGM users may adjust their insulin dose using the trend arrow. Discuss whether you should do this with your diabetes care team.

