# DIABETES SELF-MANAGEMENT EDUCATION RECORD

**NAME:** ____________________________________________ **DATE:** __________/________/________

**Diabetes Type (check):**
- [ ] Type 1
- [ ] Type 2
- [ ] Pre-diabetes
- [ ] Preconception
- [ ] Pregnancy
- [ ] Gestational

## INITIAL VISIT (Date):

- [ ] Yes
- [ ] No

**CHANGES IN READINESS/BARRIERS**

<table>
<thead>
<tr>
<th>Date</th>
<th>Initials</th>
<th>Comments</th>
</tr>
</thead>
</table>

**INSTRUCTIONS GIVEN TO:** ________________________________

**INDIVIDUAL EDUCATION**

**GROUP EDUCATION**

**CLASS**

## BARRIERS TO SELF-CARE/LEARNING/LIMITATIONS:

- [ ] None Identified
- [ ] Hearing
- [ ] Psychosocial
- [ ] Speech
- [ ] Physical
- [ ] Emotional
- [ ] Literacy
- [ ] Visual
- [ ] Cultural/Religious
- [ ] Speech
- [ ] Disability
- [ ] Other

**CHANGES IN READINESS/BARRIERS**

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## LEARNING NEEDS:

- [ ] Verbalizes/demonstrates
- [ ] Initial
- [ ] Reinforce
- [ ] Reinforce
- [ ] Reinforce

**Teaching Activity Key (TAK) Pre-Program Assessment/Post-Program Outcome Codes**

<table>
<thead>
<tr>
<th>I = Instructed</th>
<th>AV = Audiovisual</th>
<th>+ Yes, verbalizes understanding or performs skill</th>
</tr>
</thead>
<tbody>
<tr>
<td>R = Review/Reinstruct</td>
<td>D = Demonstrated</td>
<td>- No, unable to verbalize/perform skill</td>
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<tr>
<td>H = Handout</td>
<td>* = See comments/note</td>
<td></td>
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</tbody>
</table>

## Topic/Outcome

<table>
<thead>
<tr>
<th>Topic/Outcome</th>
<th>Pre-Program Assessment code/initial/date</th>
<th>Teaching Activity Key (code/initial/dates)</th>
<th>Post-Program Outcomes code/initial/date</th>
<th>Comments</th>
</tr>
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</table>

### A. Disease Process and Overview
- Definition, types, diagnostic criteria
- Causes, risk factors, symptoms
- Self-management education/MNT/DSME
- Treatment options and need for control
- Importance of diabetes control, ongoing education, and possible treatment changes

### B. Psychosocial
- Effect of stress on blood glucose
- Healthy coping strategies
- Community resources and support systems
- Depression risk screening

### C. Nutrition*
- Effect of timing, amt, and type of carb on BG
- Effect of weight status
- Strategies for weight management
- Understanding of personalized meal plan
- Nutrition strategies for lipid, BP management
- Understanding of nutrition labels in meal planning
- Effects of alcohol on BG (hypoglycemia)
- Understanding of healthy food prep (cooking methods, recipe modification)
- Healthy dining out practices
- Skills for adapting meal plan to altered meal times, travel, holidays, sick days, schedule changes, unplanned physical activity
- Understanding of nutritional/herbal supplements on diabetes control

### D. Physical Activity
- Effects of physical activity on BG (general health benefits)
- Develop a physical activity plan/goals (types, frequency, duration, intensity)
- Guidelines for a safe activity (stress test, hypoglycemia prevention)
- Adjusting food and BG testing for planned or unplanned activity
### E. Medication – Insulin*/Oral Medication(s)/Other Injectables

- **Insulin** (type, dose, schedule, action, preparation, injection technique, delivery devices, side effects)
- **Storage of insulin and disposal of sharps**
- **Pattern management**
- **Pre-meal correction bolus; insulin:carb ratio**
- **Insulin adjustments/supplements (meals, activity, changes, travel, surgery)**
- **Basic pump information**
- **Oral medication(s) (name, dose, action, schedule, side effects)**
- **OTC medications**
- **Other injectables**

### F. Monitoring*

- **Blood Glucose** (purpose, testing times, care of meter/strips, correct technique, log, meter Q/A, alternative site testing, lancet disposal)
- **Blood glucose targets:**
- **Factors affecting BG levels**
- **Action for results outside target range**
- **A1C (define, state goal, test schedule)**
- **Urine Ketone Testing (why, when, how)**

### G. Acute complications* (prevent, detect, treat)

- **Hypoglycemia** (risk, causes, signs, symptoms, treatment, prevention)
- **Hypoglycemia unawareness**
- **Problem solving: contact MD/diabetes team**
- **Glucagon (prescription); support person instructed**
- **Safe driving practices; need for medical ID use**
- **Hyperglycemia** (risk, causes, signs, symptoms, treatment, prevention)
- **Sick Day (effect of illness on BG and guidelines for sick day self-care)**
- **Problem solving: contacting medical provider**

### H. Chronic Complications (prevent, detect, treat)

- **Risk reduction strategies (controlling BG and HTN, smoking cessation, increased activity, diet, wt/BMI reduction)**
- **DM-focused visits every 3-6 months**
- **Tests (A1C, lipids, albumin/creatinine ratio, eGFR)**
- **Annual dilated eye (with drops in eyes)**
- **Dental visits and proper oral health care**
- **Annual comprehensive lower extremity exam**
- **Teach self-foot exam, routine foot care/foot wear; S/S of problems/infection and contact MD/team**
- **Immunizations**
- **Skin care/hygiene**

### I. Goal setting and problem solving

- **Problem solving strategies**
- **Behavior change strategies**
- **Personal self-care goals (AADE7™)**

### J. Preconception care/pregnancy/gestational

- **Preconception counseling/care, good BG control**
- **BG control prior to conception and during pg**
- **Maternal and fetal risk and complications with poor control**
- **Monitoring and care frequency when pregnant**
- **Gestational: treatment, BG monitoring/goals, F/U testing postpartum, risk reduction**

* denotes survival skills

**Signature/Initial/Date**

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