

Name: _____ CDE: _____

Date	12m			6a	7a	8a	9a	10a	11a	12n	1p	2p	3p	4p	5p	6p	7p	8p	9p	10p	11p	
Blood Sugar																						
Carb (grams)																						
Meal Dose																						
Correction Dose																						
Basal Rate																						
Exercise																						
Breakfast				Lunch					Dinner					Notes								
Snack				Snack					Snack													

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