

## Diabetes Care Plan

### A: DETAILS OF SERVICE USER

<b>Name:</b>	<b>Age:</b>	<b>DOB:</b>
<b>DISABILITIES:</b>	<b>WEIGHT:</b>	<b>HEIGHT:</b>

### B: OBJECTIVES & REVIEWS

<b>Objectives:</b>	<ol style="list-style-type: none"> <li>To achieve good diabetic control (maintain BG 5 - 9 mmol/l) whilst minimising the risk of hypoglycaemia.</li> <li>To prevent undesirable weight loss or weight gain, and prevent complications of diabetes.</li> <li>To prevent unnecessary hyperglycaemia.</li> </ol>
<b>Date of Care Plan:</b>	<b>Date of next Review of Care Plan:</b>

### C: CARE PLAN ACTIONS

1	Implement catering advice for diabetes.
2	Encourage 3 meals daily with one standard portion of starchy food with each meal
3	Ensure medication is taken at appropriate time in relation to food.
4	Based on medication and weight assess need for snacks between meals, and maintain good blood glucose control.
5	Encourage service user to avoid foods which contain large quantities of sugar.
6	Agree with GP glycaemic targets, type, frequency and timing of glucose monitoring, and frequency of weight monitoring.
7	Repeat nutrition screening and re-evaluate Care Plan on _____ / _____ / _____ .
8	Assess foot health and report any problems to the appropriate clinician.

### C: CARE PLAN ACTIONS

Date	Weight	Observation	Signature