

# Diabetes Record Book

Local Health Board  
Carmarthenshire



**Carmarthenshire** NHS TRUST  
YMDDIRIEDOLAETH GIG **Sir Gaerfyrddin**



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# Contact Details

This record book will help you receive the best care for your diabetes, and could provide vital information if you are taken ill. Please complete all the relevant details, or ask the nurse or doctor to do so for you. You should bring it to all appointments related to your diabetes **and ask the person who sees you to fill it in.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No: \_\_\_\_\_

NHS No: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone No: \_\_\_\_\_

GP Name: \_\_\_\_\_

Practice Nurse: \_\_\_\_\_

Surgery Address: \_\_\_\_\_

Phone No: \_\_\_\_\_

Pharmacist: \_\_\_\_\_

Phone No: \_\_\_\_\_

Dietitian: \_\_\_\_\_

Phone No: \_\_\_\_\_

Podiatrist: \_\_\_\_\_

Phone No: \_\_\_\_\_

# Medical Details

Type of diabetes: \_\_\_\_\_

Year diagnosed: \_\_\_\_\_

Symptoms at diagnosis: \_\_\_\_\_

Weight at diagnosis: \_\_\_\_\_

Year tablets started (if applicable): \_\_\_\_\_

Year insulin started (if applicable): \_\_\_\_\_

Family history of diabetes: \_\_\_\_\_

## Specific diabetic complications (with year of onset)

Diabetic eye disease: \_\_\_\_\_

Diabetic kidney disease: \_\_\_\_\_

Diabetic foot disease: \_\_\_\_\_

## Other medical conditions (with year of onset)

High blood pressure: \_\_\_\_\_

High cholesterol: \_\_\_\_\_

Angina: \_\_\_\_\_

Heart attack: \_\_\_\_\_

Transient ischaemic attack: \_\_\_\_\_

Stroke: \_\_\_\_\_

Peripheral vascular disease: \_\_\_\_\_

Other (specify): \_\_\_\_\_

\_\_\_\_\_

# Diabetes UK

This organisation looks after the interests of people with diabetes. It produces very useful information including a bimonthly magazine designed for people with diabetes. It has many branches throughout the UK. Activities include meetings where topics relating to diabetes are discussed as well as fundraising for diabetes equipment and research at both local and national levels. You are encouraged to join Diabetes UK as soon as you are diagnosed with diabetes.

Details of your local Diabetes UK branches are as follows:

<b>Branch</b>	<b>Contact</b>	<b>Phone</b>	<b>Meeting location</b>	<b>Meeting times</b>
<b>Ammanford</b>	Cynthia Hill	01558 668767	Pensioners Hall Ammanford	Sat pm Every 2 months
<b>Llanelli</b>	Marion Thomas	01554 773775	Caemaen Centre Llanelli	Last Thurs- day pm monthly
<b>Carmarthen</b>	Ralph & Mary Tucker	01994 427479	Communal Lounge Woods Row Carmarthen	First Sat am in Feb, Apr, Jun, Oct & Dec
<b>Llanybydder</b>	Bet Davies	01570 480456	Aberduar Chapel Vestry	2nd Tue pm Mar, May, Jul, Sept, Nov

# Hospital Diabetes Services

## Prince Philip Hospital

The following information will be useful to you if you are under the care of Prince Philip or Amman Valley Hospital for your diabetes.

Please use the contact numbers below if you wish to speak to the Diabetes Nurse Specialist or to make an appointment to see her.

The Diabetes Centre at PPH is situated in the Outpatient Department opposite Green Suite.

If you are concerned and are unable to contact the Diabetes Nurse Specialist, please get in touch with your own surgery.

### Useful contacts

Diabetes Nurse Specialists:	Ann Lewis Lynne Thomas Ann Tanner
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Diabetes Centre Phone No:	01554 783453
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Dietitian	01554 783061
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Podiatrist	01554 783266
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Outpatient Appointment Call Centre:	01267 227020
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# Hospital Diabetes Services

## West Wales General Hospital

The following information will be useful to you if you are under the care of West Wales General Hospital for your diabetes.

Please use the contact numbers below if you wish to speak to the Diabetes Nurse Specialist or to make an appointment to see her.

The Diabetes Centre is situated behind the main hospital building and opposite to the kidney dialysis building.

If you are concerned and are unable to contact the Diabetes Nurse Specialist, please get in touch with your own surgery.

### Useful contacts

Diabetes Nurse Specialists: Janet Thomas  
Iris Reynolds  
Rachel Davies

Diabetes Centre Phone No: 01267 227746

Dietitian 01267 227067

Podiatrist 01267 227058

Outpatient Appointment Call Centre: 01267 227020

# Diabetes Website

If you would like to know more about how to manage your diabetes you should visit the diabetes website at:

**[www.diabetes-carmarthenshire.com](http://www.diabetes-carmarthenshire.com)**

Information on a wide range of diabetes topics can be accessed and printed including:

- Diabetes Services
- Understanding Diabetes
- Managing Diabetes
- Living with Diabetes
- Complications
- Young Persons Section
- Children's Area
- Health Professionals' Section
- News and Events
- Quiz

# What to Bring for Appointments

Please ensure you have done your blood and urine tests one or two weeks before your diabetic clinic appointment date. This can be done either at the hospital Pathology Department or by arrangement with your local surgery. You should bring along the first urine sample of the day in the bottle provided.

If you are **not** taking insulin, please do not eat or drink from midnight the night before and come along for your blood test at 9-10 am. If you are taking insulin, you may have your breakfast as usual before the blood test.

**On the day of the diabetic clinic appointment**, please bring the following:

- Your diabetes record book

- All your current medications

- Your glucose meter, if applicable

- Your insulin pens or injection devices, if applicable

If you are unable to attend for your appointment, please telephone to arrange a more suitable date.

# Appointments

Type	Day	Date	Time	Place
Doctor				
Nurse				
Podiatrist				

# Appointments

Type	Day	Date	Time	Place
Dietitian				
Eye Clinic				
Eye Screening				
Other				

# What Care to Expect

When you have been diagnosed you should have:

- An explanation of what diabetes is and what treatment you are likely to need: diet alone, diet and tablets or diet, tablets and insulin
- An opportunity to discuss, with the dietitian, your diet with diabetes
- If you are on insulin, sessions for instruction on injection technique, injection devices, blood glucose, hypoglycaemia and how to deal with it and ketone testing and what the results mean
- If appropriate, instruction on blood testing and what the results mean, and supplies of relevant equipment
- A discussion of the implications of diabetes on your job, driving insurance, prescription charges, etc. and whether you need to inform the DVLA and your insurance company if you are a driver
- Information about Diabetes UK and its services
- On-going education about your diabetes and assessment of your control
- An annual check of the eyes, feet and kidneys for the complications of diabetes

You should be able to take a close friend or relative with you to these sessions, if you wish.

# Your Responsibilities

Effective diabetes care is normally achieved by teamwork with your diabetes care team. Looking after your diabetes and changing your lifestyle to fit in with the demands of diabetes is hard work. It is your responsibility to:

- Adopt a healthy lifestyle including **healthy eating, weight control, regular physical activity, abstinence from smoking and moderating alcohol intake**
- Keep your appointments and ensure you have your pre-clinic blood and urine tests done when requested
- Take as much control of your diabetes on a day-to-day basis as you can. The more you know about your diabetes, the easier this will become
- Practice self-care including monitoring blood glucose levels if you have been advised to do this
- Examine your feet regularly or have someone check them for you
- Know how to manage your diabetes and when to ask for help when you are ill, eg chest infection, flu or diarrhoea and vomiting
- Know when or how to contact your diabetes care team
- Talk regularly with your diabetes care team, ask questions and make a list of points to raise at appointments, if you find it helpful

# Emergencies and Illnesses

**Hypoglycaemia ('hypo')** - This occurs when the blood glucose is too low, usually when a meal or snack has been missed, too much insulin has been taken or after unaccustomed exercise. It comes on SUDDENLY in a person who was not unwell. Symptoms may include sweating, shaking, irritability, confusion, and feeling faint.

**Action: Take a sugary drink immediately** (such as 7 dextrose tablets or half a cupful of Lucozade), stop exercising and follow up with some long-acting carbohydrate (eg sandwich, biscuit, or next meal if due).

**Hyperglycaemia** - This occurs when the blood glucose level is very high. The person may have been feeling unwell for a few days with excessive thirst. They become drowsy and their breath may smell sweet. **Action:** If the blood glucose level is consistently greater than 16 seek advice.

**Illness** - If you are taking insulin and become ill, you need more insulin not less. **Never stop insulin treatment.** If you do not feel like eating you must continue to drink fluids or else seek medical help. Check blood glucose and (if you have Type 1 diabetes) urine ketones regularly and seek medical advice if urine ketones are positive

# Education Checklist

Below is a list of topics that you may need to know about. Some are very important; the nurse or doctor should discuss them with you regularly. Some may not be relevant to you.

Topic	Dates Discussed		
What is diabetes?			
Diet			
Tablets			
Physical activity			
Insulin and injecting			
Hypoglycaemia			
Hyperglycaemia			
Illness			
Blood testing			
Foot care			
Eye checks			
Smoking			
Alcohol			
Complications			
Driving/insurance			
Travel			
Sexual health/contraception			
Planning pregnancy			
Diabetes UK			









# Care Plan

This is a plan agreed between the person with diabetes and the health professional giving targets for diet, physical activity, diabetes education, risk factor control and other goals

## **Dietary goals:**

### **Weight target**

### **Comments (with dates):**

## **Physical activity goals:**

(minimum/light/moderate/heavy/exercise impossible)

### **Comments (with dates):**

# Care Plan

<b>Risk factor goals:</b>
<b>HbA1c target</b>
<b>BP target</b>
<b>Cholesterol target</b>
<b>Comments (with dates):</b>
<b>Other goals:</b>
<b>Comments (with dates):</b>
<b>Date Care Plan agreed:</b>
<b>Review date:</b>

# Self Monitored Blood Glucose

- Your doctor or nurse will arrange a blood test for HbA1 level every few months. This indicates the average level of your blood glucose during the past three months.
- In addition, most people with diabetes should be shown how to check their own blood glucose levels. Glucose meters are available free of charge from the hospital or surgery.
- Testing your blood glucose enables you to make the right adjustments to your diet or medications to keep your levels well controlled especially when you are ill or doing strenuous activity.
- Your blood glucose readings also provides the doctor or nurse with the information they need to advise you about medications.
- If you are treated with diet alone or with tablets that do not cause hypoglycaemia, you only need to check your blood glucose once a week. The best time is before breakfast in the fasting state.
- If you are taking insulin or tablets that may cause hypoglycaemia then you should test at least once a day at different pre-meal times, and more often if you are ill.
- If you are on intensive insulin treatment, typically 4 injections a day, then it is best to test before each main meal and before bed time.
- **The results of the tests should be entered on the following pages and discussed at the next appointment with the nurse or doctor.**
- Make sure that your glucose testing strips are not out of date and that your meter is calibrated.
- Lancets should be disposed of in special “sharps” containers supplied by your GP and collected by your local council (phone: 0845 6580445).







































# Terms and Tests

**Body mass index (BMI)** - a measure of how overweight or underweight you are. A BMI above 25 kg/ m<sup>2</sup> means that you are overweight and above 30 is obese. It is calculated by

$$\text{BMI} = \text{Weight (kg)} / \text{Height}^2 \text{ (m}^2\text{)}$$

**Cataracts** - cloudiness and thickening of the lens of the eye.

**Cholesterol** - a type of fat in the blood. Too much cholesterol in the blood increases your risk of developing heart disease.

**Eye examination** – usually carried out annually, preferably by taking a digital photograph of the retina. These are graded into one of 4 categories: 0 = no retinopathy, 1 = background retinopathy, 2 = potentially sight threatening retinopathy, 3 = advanced diabetic eye disease

**Foot examination** – includes inspecting the feet and checking the sensation and the pulses. This enables the feet to be classified into one of 4 risk categories: low risk, increased risk, high risk and foot care emergency.

**HbA1c** - a blood test which indicates the average level of your blood glucose during the past three months.

**Hyperglycaemia** - high blood glucose level.

**Hypoglycaemia** - low blood glucose level.

**Microalbuminuria** - a test for very tiny amounts of urine protein, the first sign of diabetes causing damage to the kidneys.

**Retinopathy** - damage to the back of the eye (retina).

**Urea and creatinine** - blood tests to check for kidney damage.

**Visual acuity** - an eye test which involves reading a letter chart.