

DATES: FROM _____
 TO _____

DIABETIC GLUCOSE LOG

NAME: _____

	BREAKFAST		LUNCH		DINNER		BEDTIME	3:00 AM	INSULIN DOSE
	BEFORE	AFTER	BEFORE	AFTER	BEFORE	AFTER			
MONDAY									
TUESDAY									
WEDNESDAY									
THURSDAY									
FRIDAY									
SATURDAY									
SUNDAY									
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