

# Insulin Tracking Log for Seniors

*Your complete insulin management system*

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## How to Use This Log

1. **Record every injection** - even if you think you'll remember
2. **Note injection sites** - prevents lipodystrophy (lumpy skin)
3. **Track patterns** - helps your doctor adjust doses
4. **Keep with supplies** - make logging a habit
5. **Bring to appointments** - shows your management history

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## My Medical Information

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

**Date of Birth:** \_\_\_\_\_

**Doctor:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Pharmacy:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

## My Insulin Types:

**Long-Acting (Basal):** \_\_\_\_\_

**Usual Dose:** \_\_\_\_\_ units at \_\_\_\_\_ AM/PM

**Fast-Acting (Bolus):** \_\_\_\_\_

**Sliding Scale:**

- Blood sugar \_\_\_\_\_ to \_\_\_\_\_ : \_\_\_\_\_ units
- Blood sugar \_\_\_\_\_ to \_\_\_\_\_ : \_\_\_\_\_ units
- Blood sugar \_\_\_\_\_ to \_\_\_\_\_ : \_\_\_\_\_ units
- Blood sugar over \_\_\_\_\_ : \_\_\_\_\_ units + call doctor

**Insulin-to-Carb Ratio:** 1 unit per \_\_\_\_\_ grams

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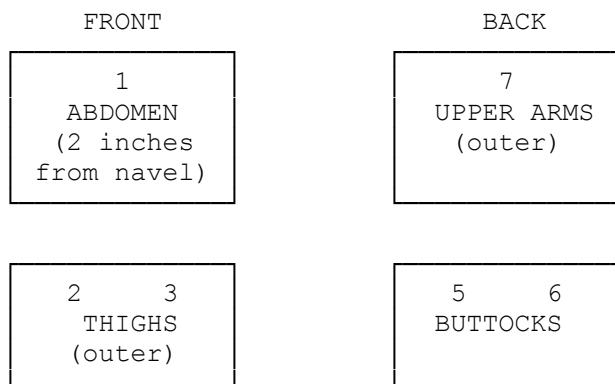


## Injection Site Rotation Guide

## Why Rotate Sites?

- Prevents scar tissue
- Ensures consistent absorption
- Reduces pain
- Prevents lumps/dents

## Rotation Pattern (Use Different Area Each Day):



## Site Codes for Log:

- **A** = Abdomen (avoid 2 inches around navel)
- **RT** = Right Thigh (outer part)
- **LT** = Left Thigh (outer part)
- **RB** = Right Buttock
- **LB** = Left Buttock
- **RA** = Right Arm (outer upper)
- **LA** = Left Arm (outer upper)

## ⚠ Never Inject Into:

- Scars or moles
- Bruised areas
- Lumps or swollen areas
- Within 2 inches of last injection



## Low Blood Sugar Action Plan

### Symptoms to Watch For:

- [ ] Shaking or trembling

- [ ] Sweating
- [ ] Confusion
- [ ] Dizziness
- [ ] Hunger
- [ ] Headache
- [ ] Blurred vision
- [ ] Weakness

### 15-15 Rule:

1. **Check blood sugar** - if below 70 mg/dL
2. **Eat 15 grams** of fast-acting carbs:
  - 3-4 glucose tablets
  - 1/2 cup juice or regular soda
  - 1 tablespoon honey or sugar
  - 6-7 hard candies
3. **Wait 15 minutes**
4. **Recheck blood sugar**
5. **Repeat if still below 70**
6. **Eat a snack** once normalized

### Emergency Kit Contents:

- [ ] Glucose tablets
- [ ] Juice boxes
- [ ] Hard candy
- [ ] Glucagon kit
- [ ] Medical ID bracelet
- [ ] Emergency contacts card

## Daily Insulin Log

**Date:** /\_\_\_\_ **Day:** \_\_\_\_\_

**Morning**

**Blood Sugar:** \_\_\_\_\_ mg/dL at \_\_\_\_\_ AM

**Long-Acting Insulin:**

- Type: \_\_\_\_\_
- Dose: \_\_\_\_\_ units
- Time: \_\_\_\_\_ AM

- Site: \_\_\_\_\_ (use code)

**Fast-Acting Insulin (if needed):**

- Dose: \_\_\_\_\_ units
- Time: \_\_\_\_\_ AM
- Site: \_\_\_\_\_ (use code)
- Reason: [ ] High BG [ ] Meal (\_\_\_g carbs)

**Breakfast Notes:** \_\_\_\_\_

**Midday**

**Blood Sugar:** \_\_\_\_\_ mg/dL at \_\_\_\_\_ PM

**Fast-Acting Insulin (if needed):**

- Dose: \_\_\_\_\_ units
- Time: \_\_\_\_\_ PM
- Site: \_\_\_\_\_ (use code)
- Reason: [ ] High BG [ ] Meal (\_\_\_g carbs)

**Lunch Notes:** \_\_\_\_\_

**Evening**

**Blood Sugar:** \_\_\_\_\_ mg/dL at \_\_\_\_\_ PM

**Fast-Acting Insulin (if needed):**

- Dose: \_\_\_\_\_ units
- Time: \_\_\_\_\_ PM
- Site: \_\_\_\_\_ (use code)
- Reason: [ ] High BG [ ] Meal (\_\_\_g carbs)

**Dinner Notes:** \_\_\_\_\_

**Bedtime**

**Blood Sugar:** \_\_\_\_\_ mg/dL at \_\_\_\_\_ PM

**Long-Acting Insulin (if using PM dose):**

- Type: \_\_\_\_\_
- Dose: \_\_\_\_\_ units
- Time: \_\_\_\_\_ PM

- Site: \_\_\_\_\_ (use code)

**Bedtime Snack:** [ ] Yes [ ] No

### **Daily Summary:**

**Total Insulin Used:** \_\_\_\_\_ units

**Low Blood Sugars:** [ ] None [ ] # of episodes: \_\_\_\_\_

**High Blood Sugars:** [ ] None [ ] # over 250: \_\_\_\_\_

**Today I Felt:** [ ] Great [ ] Good [ ] OK [ ] Tired [ ] Unwell

**Exercise Today:** [ ] Yes - Type: \_\_\_\_\_ [ ] No

**Unusual Stress:** [ ] Yes - Note: \_\_\_\_\_ [ ] No

**Sick Today:** [ ] Yes [ ] No

**Notes for Doctor:** \_\_\_\_\_

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## **Weekly Summary Page**

**Week of:** //\_\_\_\_ to //\_\_\_\_

### **Insulin Totals:**

- **Long-Acting:** \_\_\_\_\_ units/week
- **Fast-Acting:** \_\_\_\_\_ units/week
- **Daily Average:** \_\_\_\_\_ units

### **Blood Sugar Patterns:**

**Morning Averages:** \_\_\_\_\_ mg/dL

**Before Lunch:** \_\_\_\_\_ mg/dL

**Before Dinner:** \_\_\_\_\_ mg/dL

**Bedtime:** \_\_\_\_\_ mg/dL

### **Episodes This Week:**

**Lows (<70):** \_\_\_\_\_ times

**Highs (>250):** \_\_\_\_\_ times

### **Site Rotation Check:**

- [ ] Used all 7 areas
- [ ] No site used more than once
- [ ] No irritation/lumps noted

### Questions for Doctor:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

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## Troubleshooting Guide

### Blood Sugar Too High?

#### Check:

- Did insulin expire?
- Was dose correct?
- Injection site problem?
- Getting sick?
- Extra stress?
- Forgot to take?

### Blood Sugar Too Low?

#### Check:

- Too much insulin?
- Missed meal?
- Extra exercise?
- Alcohol?
- Hot shower/bath after injection?

### Injection Problems:

**Bruising:** Use new needle each time

**Leaking:** Count to 10 before removing needle

**Pain:** Rotate sites, room temperature insulin

**Lumps:** Avoid area until healed

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### Monthly Doctor Visit Prep

## **Bring to Appointment:**

- [ ] This log book
- [ ] Glucose meter
- [ ] List of all medications
- [ ] Questions written down

## **Information to Share:**

- Average blood sugars
- Number of low episodes
- Any pattern noticed
- Injection site concerns
- Life changes affecting control

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## **Important Reminders**

### **Insulin Storage:**

- **In use:** Room temperature up to 28 days
- **Unopened:** Refrigerator (not freezer)
- **Never:** In direct sunlight or hot car
- **Discard if:** Cloudy, clumped, or discolored

### **Needle Safety:**

- New needle every injection
- Never share needles
- Dispose in sharps container
- Keep out of regular trash

### **Travel Tips:**

- Carry insulin in carry-on
- Bring doctor's letter
- Pack extra supplies
- Keep insulin cool
- Adjust for time zones

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## **Emergency Information**

**Endocrinologist:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

**Primary Doctor:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

**Pharmacy:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_

**Insurance:** \_\_\_\_\_  
**Member ID:** \_\_\_\_\_

**In Emergency, I Take:**

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## Quick Reference Card (Cut Out)

### My Insulin Routine

- Long-Acting: \_\_\_\_\_ units at \_\_\_\_\_
- Meal Insulin: \_\_\_\_\_ units per \_\_\_\_\_ carbs
- Correction: 1 unit lowers BG by \_\_\_\_\_

**Low Blood Sugar Treatment** If below 70: Take 15g carbs, wait 15 min, recheck

**Emergency Contact:** \_\_\_\_\_ **Doctor:** \_\_\_\_\_

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**Log #** \_\_\_\_\_ **of 90 Days** | **Start Date:** /\_\_\_\_ | **End Date:** /\_\_\_\_