

# Diabetes: Daily Self-Care

## Self-Care Checklist

Use this checklist to become engaged in your health care and gain confidence in managing your diabetes. Consider using the action plan on the next page for an activity where you see room for improvement.

I do this well    I will do this

		<b>Gain and share support:</b> Join a local diabetes support group, or ask friends and family to support you with your lifestyle improvements.
		<b>Keep up-to-date about diabetes:</b> News about diabetes self-care is updated often, and your needs change over time. Visit <a href="http://HillPhysicians.com/Diabetes">HillPhysicians.com/Diabetes</a> to learn about a variety of resources, browse our nutrition and diabetes-friendly recipes or to download self-care tips.
		<b>Know your ABCs!</b> Check with your doctor to get these ABCs checked or tested regularly: <b>A1c:</b> (your average blood glucose over a 3 month period) aim for below 8. <b>Blood Pressure:</b> Keep track of your blood pressure to reduce the risk of heart attack and stroke - aim for below 130/80. <b>Cholesterol Tests:</b> are needed once a year. Aim for an LDL less than 100; ideally less than 70.
		<b>Visit your dentist:</b> Blood sugar and gum health go hand in hand, so make sure to see the dentist twice a year for your dental exams.
		<b>Examine your feet:</b> Diabetes reduces sensation and circulation in your feet, so wounds can go unnoticed and infections can be hard to treat. Take your shoes and socks off at every visit with your doctor regardless of the reasons for your appointment. Check your feet at home daily.
		<b>Check for signs of depression:</b> Depression is not uncommon when managing a health condition. Your physician and Hill Physicians is here to help. Visit <a href="http://HillPhysicians.com/Depression">HillPhysicians.com/Depression</a> for tips, tools and resources or to find a mental health provider.
		<b>Perform home glucose testing:</b> Ask your doctor if you need to test your blood sugar at home and when to track your blood sugars (e.g. after meals or exercise). Discuss your results with your physician, a dietitian, or a diabetes educator.
		<b>Get a flu shot:</b> Getting vaccinated annually with the flu shot is recommended for those with diabetes.
		<b>Have a retinal eye exam:</b> Self-refer once a year to an ophthalmologist for a retinal (dilated) eye exam.
		<b>Exercise regularly:</b> If you don't already exercise regularly, start small (about 10 minutes a day) and commit to a plan for how, over time, you will increase this up to 30 minutes for most days of the week. Any form of exercise you enjoy is easier to maintain. Use your support team to help keep you motivated.
		<b>Reduce your weight:</b> If you are overweight, losing just a few pounds can significantly reduce your risk of diabetes complications and may affect how much medication you need to take. A support person, a dietitian appointment or exercise program can help you reach your goals.

This tip sheet is provided by Hill Physicians Medical Group for informational purposes only. It is not intended to replace the advice or care given by your physician. Talk to your doctor if you are experiencing symptoms or have questions or concerns.

# Creating an Action Plan for Change

**"I want to lose weight to improve my health"**

**"I'd like to reduce my stress."**

**"I'm going to make better eating choices."**

**"I'm going to be ore physically active."**

We all have changes we'd like to make. Goals around health, relationships, and career are common. Coming up with goals isn't hard, the difficulty is obtaining them. In order to make a successful, lasting change, you'll need effort, persistence, and a good plan.

**Start by clarifying your goal.** What, exactly, do you want to accomplish? How will you know you've accomplished it?

**How important is it to you?** Choose a goal because it is important to you, not just because someone else wants if for you.

**Make you plan specific and take small, measurable steps.** When, where, or how will you work toward the goal? Most goals can be broken down into a series of small steps. Start with the first small step to make your goal more manageable. You'll move to the next step after you've achieved success with the one before it.

**Be prepared for setbacks.** Most of us don't achieve our goals on the first try. Stay positive and confident that you'll reach your goal in the end, but anticipate mistakes, failures, and setbacks along the way. Brainstorm any barriers that might come between you and success. Decide now how you'll deal with them if they come up.

**Enlist a support person.** Who will you tell about you goal? Discussing your plan with another person can help solidify your commitment to following through - and you" have someone to help you celebrate your success.

**Rate your confidence.** On a scale from 1 to 10, how confident are you that you can achieve your goal? If your confidence is below 7, adjust your plan to be more realistic for you right now.

**Review your progress.** At each step, take a moment to evaluate how you're doing. If your not making the progress you'd like, ask why. Did you take on too much? Is there something else in your life that's interfering? Here's where persistence is key: modify your plan and start again. In time, you will succeed.

**Use the Action Plan** on the following page for help with creating a plan for lasting change.

If you have any self-care questions,  
please contact your physician.

# My Action Plan

**To improve my health I will:**

1. Choose one of the activities below:

- ☐ Stay more physically active
- ☐ Use my medications / medical equipment
- ☐ Improve my food choices
- ☐ Reduce my stress
- ☐ Cut down on smoking



2. Chosen activity (what): \_\_\_\_\_

3. On a scale from 1 to 10, how important is this to you? \_\_\_\_\_

10: Very important

5: Somewhat important

1: Not very important

4. When, where and how often will you participate in your chosen activity? \_\_\_\_\_

5. Possible challenges: \_\_\_\_\_

6. Plan to overcome challenges: \_\_\_\_\_

7. Support person(s): \_\_\_\_\_

8. On a scale from 1 to 10, what is your confidence level? \_\_\_\_\_

10: Very important

5: Somewhat important

1: Not very important