Workshop Cases

- Work with your partner on cases
- Apply systematic approaches to BGM & CGM reports
 - Adequate data?
 - ➤ 14 days of data or at least 70% or ~10 days of CGM wear
 - Mark directly on the profile sheet:
 - Insulin type(s) & dose times under the curve
 - Usual times for waketime (W), breakfast (B), lunch (L), dinner (D) & bedtime (BT).
 - Look for patterns of low & high glucose readings.
- You'll have 25 minutes before case review

Case 1

62 yo with a PMH of T2DM, CAD s/p CABG, s/p Heart transplant, HTN, HLD, Stage 3a CKD (eGFR 53)

DM Rx:

- Insulin degludec 35 U at HS (basal insulin)
- Insulin lispro Ou/5u/12u for B/L/D pre-meals (bolus insulin)
- Empagliflozin 10mg daily (SGLT2i)

Glucose Monitoring:

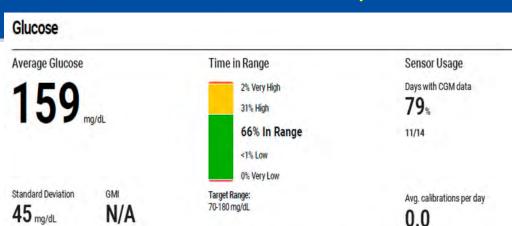
Uses DexCom G6 CGM

VS / Data:

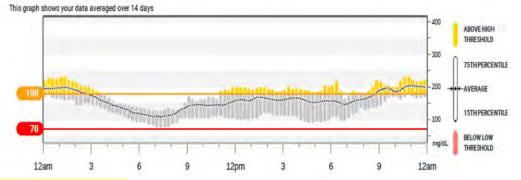
- 120/68
- Chol 150 | LDL 70 | TG 110 HDL 54 | eGFR 53 (all > 1 year ago)



Case 1 – CGM Data period: 9-23-21 to 10-6-2021







Glucose Data Report:

Date of Interpretation: 10/6/2021

Data period: 9/23/21-10/6/2021

Readings: ~4000 Mean BG (mg/dL): 159 Range BG mg/dL): 68-204

% Hyperglycemia (>180): ____%
% at Target (70-180): ____%
% Hypoglycemia (<70): %</pre>

Average BG (mg/dL) values by meals:

	_		•	_
AC	Breakfas	t (FBC	S):	
AC	Lunch:			
AC	Dinner:			
HS:	•			

Assessment:

1.

2.

Case 1 – Assessment/Plan

Lab Results		
Component	Value	Date
HGBA1C	6.7	10/07/2021
HGBA1C	6.4	06/18/2021
HGBA1C	8.7 (H)	03/16/2021

AGP -

A1c –

Assessment:

*T2DM – controlled vs. not controlled?

1.

2.

Plan:

T2DM:

1. 2. 3. 4. 5. • **CKD**:

CVD:

RTC in 3 months

Case 2

62 yo with a PMH of T2DM, CAD, Obesity (BMI 33), Kidney stones & UTIs. DM Rx:

- Glipizide XL 10mg daily before PM meal (SU)
- Metformin XR 2000mg daily (Biguanide)
- Pioglitazone 30mg daily (TZD)

DM Rx Intolerances/Contraindications:

- Empaglifozin UTI's (SGLT2i)
- Previously tried semaglutide (GLP-1) x 1 week but stopped after mild GI upset

Glucose Monitoring:

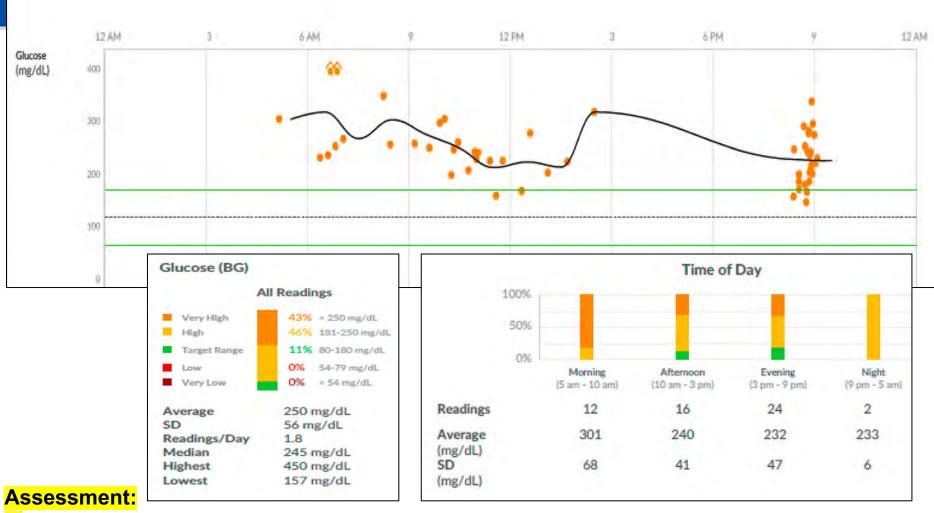
Using Libre isCGM

Data:

Weight: 150 kgs | 330lbs | BMI 33kg/m2



Case 2 – isCGM Data period: 9-8-21 to 10-7-2021



1.

2

3. Yale school of medicine



Case 2 – Assessment/Plan

Component	10/7/2021	3/26/2021	1/22/20 21
HbA1C, POC 4.0 - 6.0 %	10.1	7.6	7.0

Assessment:

T2DM –

3.

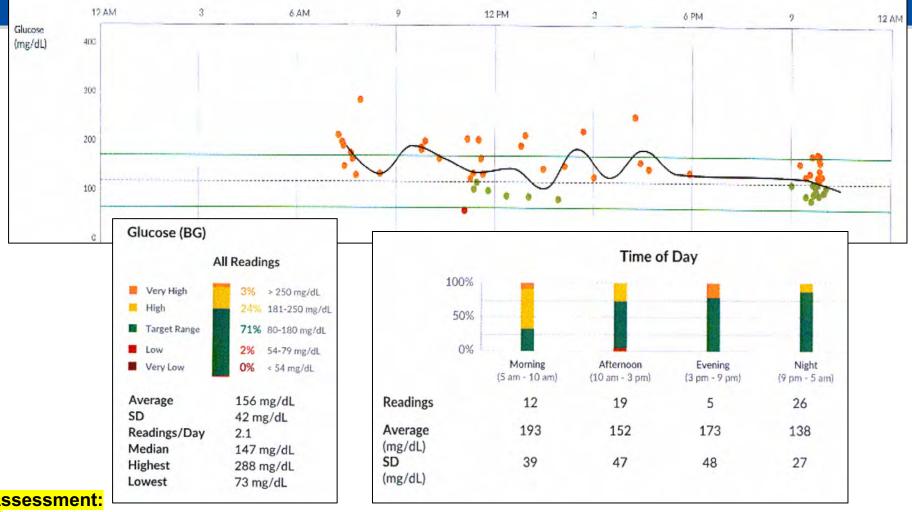
Plan:

T2DM:

1. 2. 3. 4. 5. 6.

RTC in 3 months

Case 2 — 3 Month Follow-up: 12-23-21 to 1-21-2021



Assessment:

Case 2 – 3 Month Follow-up

HPI: Patient reports "improved BG numbers" & 5lb weight loss.

Component	1/21/2022	10/7/2021	3/26/2021	Assessment: T2DM - 1.
A1C, POC 4.0 - 6.0 %	7.7	10.1	7.6	2. 3. 4. 5.

Plan:

T2DM:

1.

2.

3

4

5

6

7

RTC in 3 months

Case 3

60 yo with a PMH of T2DM, HTN, HLD, PE/DVT & Obesity.

DM Rx:

- Metformin XR 2000mg daily
- Insulin glargine 60 units in PM (basal)
- Insulin lispro 5 units with meals PLUS BG correction by sliding scale
 - Sliding Scale: 2 units/50mg/dL > 150

Glucose Monitoring:

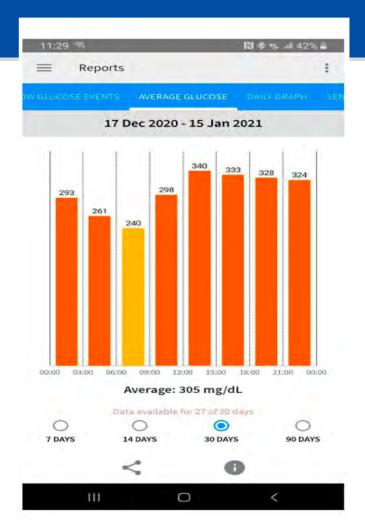
Using rtCGM

FHx:

Father: MI/CAD (62)

Case 3 - rtCGM Data period: 12-17-20 to 1-15-2021





Assessment:

1.

2.

Yale SCHOOL OF MEDICINE
Physician Associate Program



Case 3 – Assessment/Plan

	4 /4 4 /0004	10/0//0000	0.100.10000	Assessme
Component	1/14/2021	10/26/2020	9/02/2020	T2DM –
				<mark>1.</mark>
A1C, POC	11.1	10.5	9.9	<mark>2.</mark>
4.0 - 6.0 %				<mark>3.</mark>
				<mark>4.</mark>

ent:

Plan:

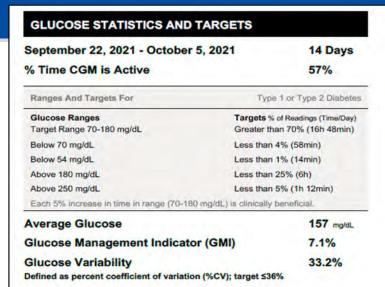
T2DM:

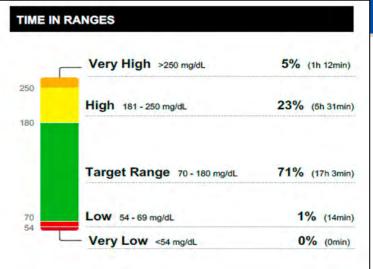
RTC in 3 months

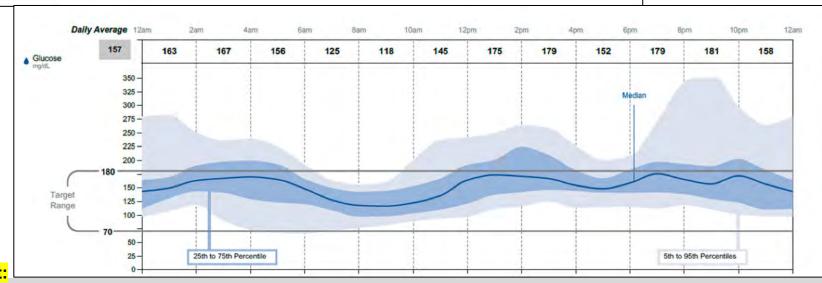
BBC: Basal-Bolus-Correction insulin; MTF: Metformin



Case 3 — 8 Month Follow-up: 9-22-21 to 10-5-21







Assessment:



Case 3 – 8 Month Follow-up

Component	11/16/2021	1/14/2021
A1C, POC 4.0 - 6.0 %	7.8	11.1

Assessment: T2DM –

1.

2.

3.

4.

Plan:

- T2DM:
 - 1.
 - 2.
 - 3
 - 4
 - т. Г
 - ე.

RTC in 3 months

BBC: Basal-Bolus-Correction insulin; MTF: Metformin



Case 4 - 42 yo with T2DM on MDI therapy here for f/u

- Did not bring a BG log or meter
- Reports the following perceived BG readings for "several months":
 - FBG: 110-120's range
 - PM pre-meal: 120-150's range
- DM Rx:
 - Insulin Glargine 30 units at HS
 - Insulin Lispro 8 units with meals

Data: POC A1c: 9.2%

Assessment:

HbA1c & Estimated Average BG 5% - 90 mg/dL

6% - 120 mg/dL

7% - 150 mg/dL

8% - 180 mg/dL

9% - 210 mg/dL

10% - 240 mg/dL

11% - 270 mg/dL

12% - 300 mg/dL

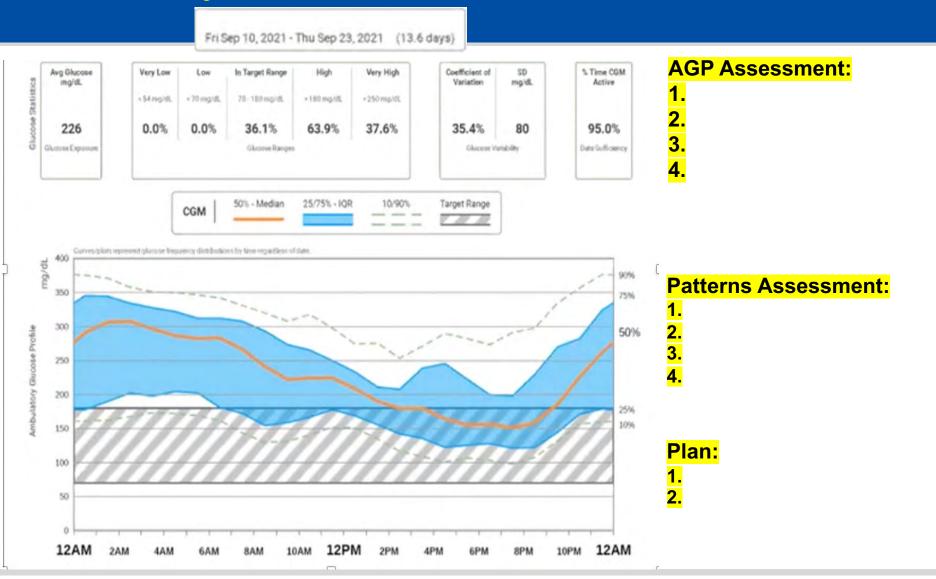
13% - 330 mg/dL

14% - 360 mg/dL

FBG: Fasting blood glucose; AGP: Ambulatory Glucose Profile



Case 4 - 42 yo with T2DM returns for Professional CGM review





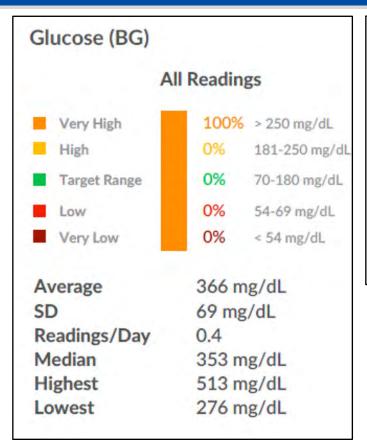
Case 5

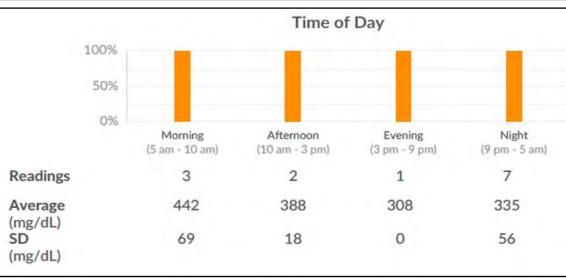
- 58 yo with PMH of T2DM (x 3 yrs), Overweight (BMI 26kg/m²|64 kg) presents for f/u & reports persistent symptomatic hyperglycemia.
- DM Meds:
 - Metformin XR 500mg twice daily before meals
- FamHx: Brother with T1DM
- Data: BG 395 & Udip NEG for ketones
- POC A1c & trends:

Lab Results

Component	Value	Date
HGBA1C	13.8 (H)	11/28/2021
HGBA1C	6.1	09/13/2021
HGBA1C	6.2	03/15/2021
HGBA1C	5.8	09/14/2020

Case 5 – Patient with T2DM & persistent, symptomatic hyperglycemia





Glycemia Report:

Date of Interpretation: 12/3/2021

11/20/21-12/3/2021 Data period:

Readings:

Mean BG (mg/dL):

Range BG mg/dL):

% Hyperglycemia (>180):

% at Target (70-180):

% Hypoglycemia (<70):

Assessment:

1. 2. 3.



Case 5 – Assessment and/or Other Suspicions?

<u> Assessment:</u>

1.

a. A1c trend:

b. AGP:

c. Other salient info:

2. Suspicions for etiologies of hyperglycemia:

a.

b.

C

Case 5 – Plan for Significantly Changed A1c & AGP

Assessment:

1.

Plan:

1

2.

3.

4.

5.

6.

7.

Case 5 —One Month Follow-up via Telehealth

Data:

- POC A1c now 11.3%
- DM Rx: MTF XR 1000mg 2x daily & Lantus 20 units daily (up-titrated between visits)
- BG Meter readings presented by patient:

	Pre-Meals & HS (mg/dL)
Breakfast	232,136,198,183,170, (Lantus 17->20),153,138,108,141
Lunch	205,195,162,198,171,104,215, (Lantus 17->20),141,140,150
Supper	272,200,198, (Lantus 17->20),104,140
Bedtime	272, (Lantus 17->20),162,104,141

Labs: NL range C-peptide & NEGATIVE auto-antibodies

AGP from BG Readings:

•

<u>Assessment:</u>

•

<u>Plan:</u>

1

2

3.

4

Case 6

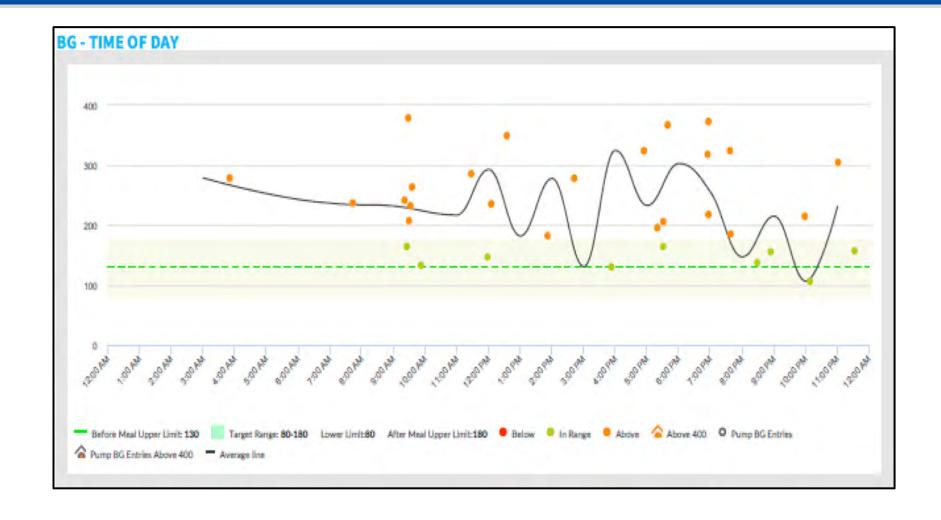
 62yo with T2DM ('20), NICVD & BMI of 38. Complains she's only lost a few pounds after multiple unsuccessful attempts at lifestyle changes including stricter BG monitoring, activity & diet changes.

- DM Meds:
 - Metformin XR 2000mg twice daily before meals
- Data: A1c trends (A1c drawn ~1 month before visit; Goal of A1c 6-7%):

Lab Results		
Component	Value	Date
HGBA1C	7.8	09/15/2021
HGBA1C	7.9	03/10/2021
HGBA1C	7.3	09/02/2020
HGBA1C	7.7 (H)	07/10/2020
HGBA1C	8.3 (H)	04/30/2020
HGBA1C	12.0 (H)	02/10/2020



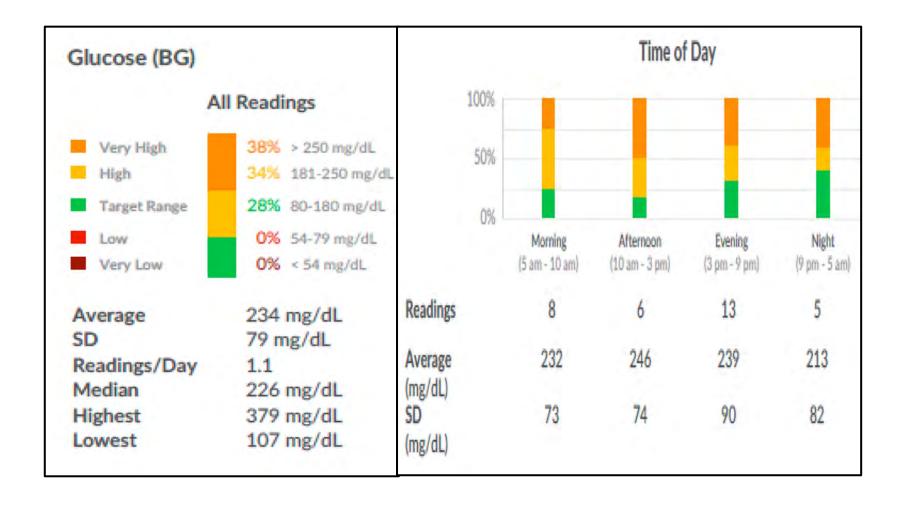
Case 6 - AGP



Case 6 - AGP



Case 6 - AGP



Case 6 – A/P: Above goal A1c, AGP & weight

Assessment:

<u>Plan:</u>



Case 6 - 3 Month Follow-up

DM Meds:

- Metformin XR 2000mg twice daily before meals
- Ozempic (Semaglutide) 0.5mg sc weekly

Lifestyle Vitals:

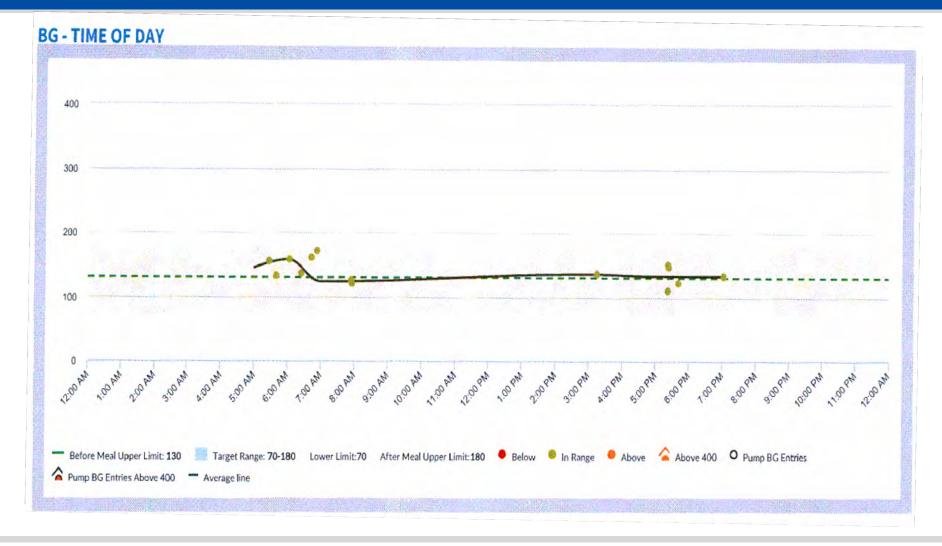
- Using smartphone pedometer & averaging 5-7 K steps/day
- Maintaining small portion sizes & healthier nutrient balance

Data:

- Wt loss 7lbs
- A1c 6.8%

AGP: (see next 3 pages)

Case 6 – AGP: 3 Month Follow-up



Case 6 – AGP: 3 Month Follow-up





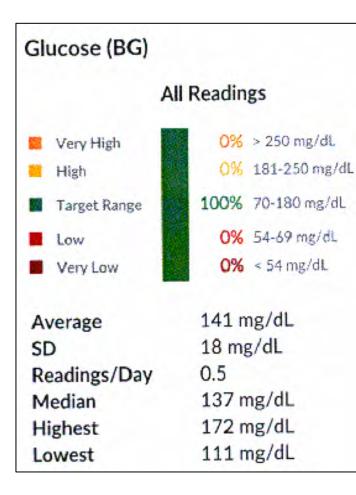
141 mg/dL AVERAGE

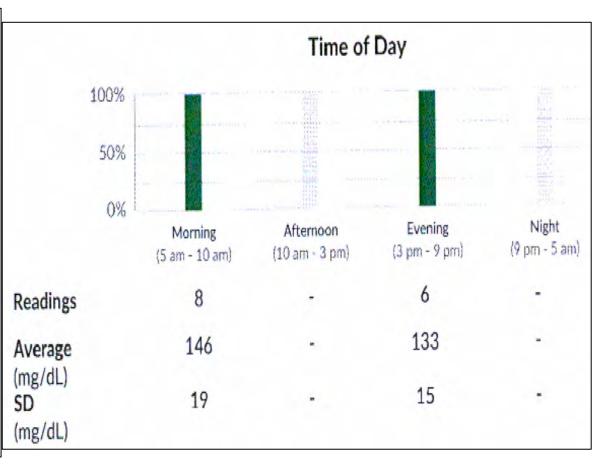
0.5 Readings/Day

172 mg/dL HIGHEST READING

111 mg/dL LOWEST READING

Case 6 – AGP: 3 Month Follow-up





Case 6 - 3 Month Follow-up A/P Summary

DM Meds:

- Metformin XR 2000mg twice daily before meals
- Semaglutide 0.5mg sc weekly

<u>Lifestyle Vitals:</u>

- Using smartphone pedometer & averaging 5-7 K steps/day
- Maintaining small portion sizes & healthier nutrient balance

Data:

- Wt loss: 7lbs
- A1c 6.8% & AGP 100% TIR with checking BG 2x/day

Assessment:

Plan:

- 1.
 2.
 3.
 4.
 5.

Case 7 - 26yo with T2DM using CGM presents to clinic:

HPI:

Complains of a warm & itchy rash at CGM site x 1 week. The infusion set was only used for 10 days "as usual". Area started as an itchy area followed by a red rash. Patient denies tenderness, increased warmth or d/c.

On exam, you observe this:

What is most likely reason for rash?

- A. Allergic reaction to CGM adhesive
- B. Fungal infection
- C. Dermatographia
- D. Cellulitis



60 yo with PMH of T2DM, CAD s/p MI (2015), HLD, COPD, Anxiety/Depression & smoker presents for DM f/u.

Meds:

- STOPPED Trulicity 0.75mg weekly --> patient stopped Rx 2 mos ago because of "pain all over my body"
- STOPPED Metformin 1000mg BID --> patient stopped Rx 2 mos ago because of "pain all over my body"
- -Lantus 12units at 8PM --> patient self-decreased from 16u to 12u (no reason offered)
- -Novolog (FOOD insulin) by sliding scale with BREAKFAST & LUNCH

If your blood sugar (BS) is < 100, eat your meal (no insulin)

If your BS 100-200, take 6 units

If your BS 201-300, take 8 units

If your BS 301-400, take 10 units

If your BS > 400, take 12 units

-Novolog (FOOD insulin) by sliding scale with DINNER

If your blood sugar (BS) is < 100, eat your meal (no insulin)

If your BS 100-200, take 8 units

If your BS 201-300, take 9 units

If your BS 301-400, take 11 units

If your BS > 400, take 12 units

AGP Report

October 7, 2022 - October 20, 2022 (14 Days)

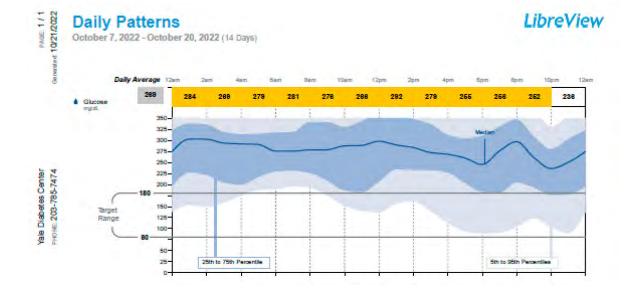
LibreView





AMBULATORY GLUCOSE PROFILE (AGP)

AGP is a summary of glucose values from the report period, with median (60%) and other percentiles shown as if occurring in a single day.



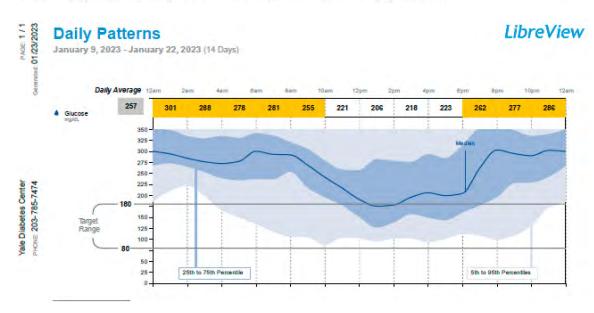
Date of Interpretation: Data period: Sensor active: Mean BG (mg/dL): % Hyperglycemia (>180): % at Target (70-180): % Hypoglycemia (<70): Average BG (mg/dL) value AC Brkfast (AM Fasting): AC Lunch: AC Dinner: HS:	10/20/2022 10/7/22-10/20/2022 % % % es by meals:		
Pertinent Labs:			
Lab Results			
Component	Value	Date	
HGBA1C	10.8	10/21/2022	
HGBA1C	10.6	07/18/2022	
HGBA1C	11.4	06/17/2022	
HGBA1C	10.0 (H)	05/04/2020	
HGBA1C HGBA1C	10.6 (H) 11.4 (H)	03/05/2019 10/03/2018	
A/P: T2DM			
1			
2			
3			
4			
CASE #8 F/U #1			
60 yo with PMH of T2DM, CAD s/p MI (2	ປີ15), HLD, COPD, Anxiety/Depressi	<mark>on & smoker (current 1/2 ppd) pres</mark>	ents for DM f/u.
3-month follow-up DM Rx: -Did not start Trulicity 0.75mg weekly -Lantus 14 units at 8PM -Novolog (FOOD insulin) by sliding scallf your blood sugar (BS) is < 100 If your BS 100-200, take 6 units held your BS 201-300, take 8 units held your BS 301-400, take 10 units lif your BS > 400, take 12 units held.	, eat your meal (no insulin) numalog numalog humalog	sing pre-meal ~75% of time	
-Novolog (FOOD insulin) by sliding scall f your blood sugar (BS) is < 100 lf your BS 100-200, take 8 units reference BS 201-300, take 9 units reference BS 301-400, take 11 units lf your BS > 400, take 12 units not be sufficiently by the second statement of the second st	, eat your meal (no insulin) novolog novolog novolog	25% of time	



AMBULATORY GLUCOSE PROFILE (AGP)

CGM Data Report:

AGP is a summary of glucose values from the report period, with median (50%) and other percentiles shown as if occurring in a single day.



Date of Interpretation:	1/22/2023	
Data period:	1/9/23-1/22/2023	Previous:
Sensor active:	%	%
Mean BG (mg/dL):		
% Hyperglycemia (>180):	<u></u> %	%
% at Target (70-180):	<u></u> %	%
% Hypoglycemia (<70):	%	%
% Hypoglycemia (<70):	%	

Average BG (mg/dL) values by meals:	
AC Brkfast (AM Fasting):	
AC Lunch:	
AC Dinner:	
HS:	

A1c trend:

Pertinent Labs:

Lab Results

Component	Value	Date	
HGBA1C	11.1	01/23/2023	
HGBA1C	10.8	10/21/2022	
HGBA1C	10.0 (H)	05/04/2020	
HGBA1C	10.6 (H)	03/05/2019	
HGBA1C	11.4 (H)	10/03/2018	
A/P:			

Recon	nmendations:		
1			
2			
3.			

CASE #8 F/U #2

60 yo with PMH of T2DM, CAD s/p MI (2015), HLD, COPD, Anxiety/Depression & smoker (current 1/2 ppd) presents for DM f/u.

3-month follow-up

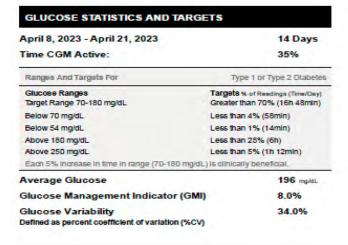
DM Rx:

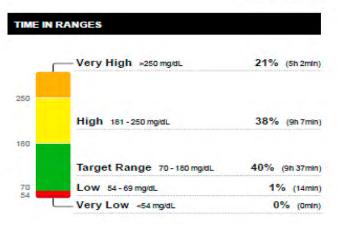
- -Trulicity 0.75mg weekly
- -Lantus 16units at 8PM
- -Novolog (FOOD insulin) 5 units with BREAKFAST & LUNCH
- -Novolog (FOOD insulin) 9 units with DINNER
 - -If your blood sugar is >250 before you eat, add 2 units to this dose

AGP Report

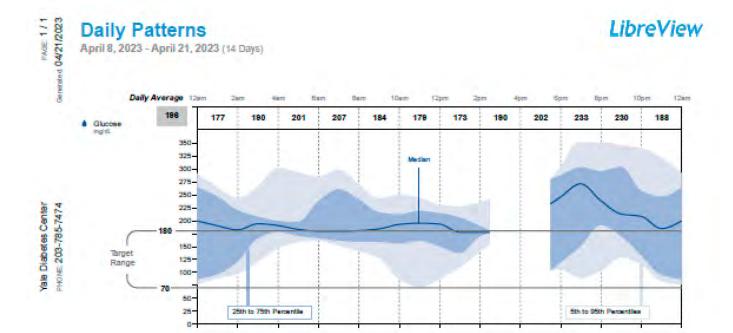
April 8, 2023 - April 21, 2023 (14 Days)

LibreView





AMBULATORY GLUCOSE PROFILE (AGP)



Why do I have a gap in my data?_

CGM Data Report:

Date of Interpretation: 4/21/2023

Data period: 4/8/23-4/21/2023 Previous:

 Sensor active:
 _____%
 95%

 Mean BG (mg/dL):

 257

% Hyperglycemia (>180): _____% 79% % at Target (70-180): _____% 21%

% Hypoglycemia (<70): _____% 0%

Average BG (mg/dL) values by meals:

AC Brkfast (AM Fasting): _____ 276
AC Lunch: ____ 292
AC Dinner: ____ 256
HS: 236

A1c trend:

Pertinent Labs:

Lab Results

Component	Value	Date
HGBA1C	9.5	04/21/2023
HGBA1C	11.1	01/23/2023
HGBA1C	10.8	10/21/2022
HGBA1C	10.0 (H)	05/04/2020
HGBA1C	10.6 (H)	03/05/2019
HGBA1C	11.4 (H)	10/03/2018

A/P:	
Plan:	
Medication Planning	
1	
2	
3	
4	

CASE #9

49 yoM with PMH of Brain AVMs s/p Cyber-knife interventions (2010), CAD s/p cath x 2, CVA (ischemic 2019), HLD, HTN, chronic pain syndrome, smoker (1ppd) & poorly controlled T2DM (Hx A1c 7.1-10.8%) presents for DM f/u. Last seen by this provider in Oct '22.

DM Rx:

- *STOPPED Ozempic 0.25mg ~2 months ago --> "I didn't feel like it was working."
- -Jardiance 25 mg daily in AM
- -Tresiba 40 units daily in AM
- -Novolog pre-meal insulin (Food insulin)
 - 10 units for breakfast PLUS "BG correction"
 - 10 units for lunch PLUS "BG correction"
 - 12 units for dinner PLUS "BG correction"
- -Novolog BG correction scale: (Correction insulin)
- 1u for 150-199
- 2u for 200-249
- 3u for 250-299
- 4u for 300-349
- 5u for 350-399
- 6u for 400 or higher & CALL the YDC at 203-785-7474

SMBG:

- -Checks BG 4-6X/day via Libre CGM.
- -LibreView account shared with YDC, however, patient has not uploaded recent CGM data to account.
- -Hypos: Reports 1-2 hypos to 60's in AMs after PM meal BG correction endorses not following BG correction scale. Denies a frequent pattern.



CGM Data Report: Date of Interpretation: Data period: Mean BG (mg/dL): % Hyperglycemia (>180): % at Target (70-180): % Hypoglycemia (<70):	4/21/2023 % %	Previous: 167 32% 67% <1%
Average BG (mg/dL) values AC Breakfast (FBG): AC Lunch: AC Dinner: HS:		161 170 183 162
Plan: <u>Medication Planning</u> 1.		
2.		

5.

CASE #10

67 yoF with a PMH of T1DM, CAD, MI s/p CABG, HTN, Stage 3 CKD, Asthma, PVD, Thyroid nodule & Depression presents for DM f/u appt in Dec '22. Reports giving bolus insulin for highs without following the specific sliding scale & that she is inconsistent pre-meal boluses.

DM Rx:

- -Tresiba 26 units once daily at night
- -Humalog "meal-size" dosing (below) PLUS ADDED "BG Correction"
 - 5 units for "small" meal with carbs (20-30gm)
 - 6 units for "medium" meal with carbs (31-40gm)
 - 7 units for "large" meal with carbs (41-60gm)
- -Humalog "BG Correction" scale below:
 - If blood sugar is less than 200, no added Humalog
 - If blood sugar is 200-249, add 1 unit
 - If blood sugar is 250-299, add 2 units
 - If blood sugar is 300-350, add 3 units

AGP Report

November 19, 2022 - December 2, 2022 (14 Days)

LibreView





AMBULATORY GLUCOSE PROFILE (AGP) P is a summary of plucose values from the report period, with median (50%) and other percentiles shown as if occurring in a single day. LibreView **Daily Patterns** November 19, 2022 - December 2, 2022 (14 Days) Daily Average 12 234 225 222 222 229 213 133 170 246 325 -300 -Yale Diabetes Center PHONE 203-785-7474 200 -125 -

CGM Data Report:

Date of Interpretation:	
Data period:	
Sensor active:	%
Mean BG (mg/dL):	
% Hyperglycemia (>180):	%
% at Target (70-180):	%
% Hypoglycemia (<70):	%

Average BG (mg/dL) values AC Breakfast (FBG):	by meals:
AC Lunch:	
AC Dinner:	
HS:	

Pertinent Labs:

Lab Results

Component	Value	Date
HGBA1C	9.2	12/02/2022
HGBA1C	8.7 (H)	10/28/2022
HGBA1C	9.2 (H)	01/26/2022
HGBA1C	9.2 (H)	08/26/2021
HGBA1C	8.7 (H)	05/26/2021
A/P:		

Plan:

Medication Planning

1.

2.

3.

Case #10 F/U

67 yoF with a PMH of T1DM, CAD, MI s/p CABG, HTN, Stage 3 CKD, Asthma, PVD, Thyroid nodule & Depression presents for DM f/u appt in Dec '22. Patient reports increasing her pre-noon & pre-PM meal boluses on her own.

DM Rx:

- -Tresiba 28 units once daily at night
- -Humalog "meal-size" dosing (below) PLUS ADDED "BG Correction"
 - 5 units for "small" meal with carbs (20-30gm)
 - 7 units for "medium" meal with carbs (31-40gm)
 - 9 units for "large" meal with carbs (41-60gm)

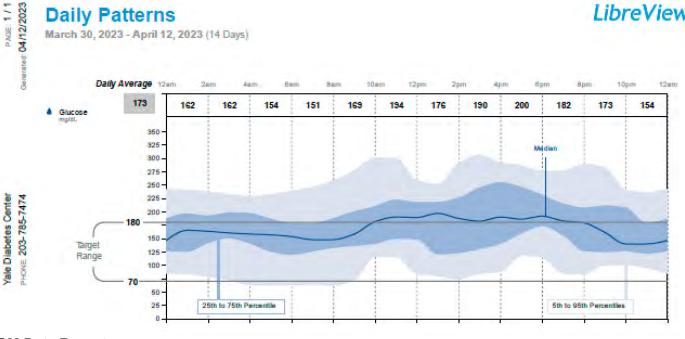
AGP Report

March 30, 2023 - April 12, 2023 (14 Days)





AMBULATORY GLUCOSE PROFILE (AGP)



CGM Data Report:

Date of Interpretation: 4/12/2023

Data period: 3/30/23-4/12/2023 **Previous visit: Sensor Activity** % 88% Mean BG (mg/dL): 219 % 8.5% % Hyperglycemia (>180): % 62% % at Target (70-180): % 34% % Hypoglycemia (<70): % 4%

Average BG (mg/dL) values by meals: **Previous visit:**

AC Brkfast (AM Fasting): 229 AC Lunch: 133 **AC Dinner:** 258 HS: 265

Pertinent Labs:

Lab Results

Lab Results		
Component	Value	Date
HGBA1C	8.9	04/12/2023
HGBA1C	8.7 (H)	03/18/2023
HGBA1C	11.1	01/11/2023
HGBA1C	9.2	12/02/2022
HGBA1C	8.7 (H)	10/28/2022
HGBA1C	9.2 (H)	01/26/2022
HGBA1C	9.2 (H)	08/26/2021
HGBA1C	8.7 (H)	05/26/2021

A/P:				

Plan:

Medication Planning 1.

- 2.
- 3.
- 4.
- 5.

CASE #11

59 yoM with a PMH of with T2DM, CAD, s/p MI, s/p CABG ('19), HTN, HLD, CKD-Stage 2 presents from STR facility for New Patient appointment. D/C'd from hospital to STR in May '22 on the following diabetes meds.

HPI: Meals: Breakfast is highest carb portion & biggest meal of the day

DM Rx:

- -Linaglipitin 5mg daily (DPP4i)
- -Insulin Detemir 46 units before AM meal & 20 units before PM meal (Basal insulin)
- -Insulin lispro pre-meal dosing PLUS low-dose BG Correction (1 unit / 50md/dL > 150) (Bolus insulin)
 - 1. 7 units for breakfast
 - 2. 5 units for lunch

DATE RANGE: 7/12-7/19 TO_

209

194

3. 5 units for dinner

Labs: A1c 8.9%

7/18

7/19

6.

Examples of "3-minute Drill"

July 2022

1270

Noon meal PM Meal **Bedtime** DAY Fasting AM XX XX XX XX 412 252 (4) (2) (3) 1630 221 192 (3) (3) 7/13 227 (4) 294 1220 214 7/14 183 (2) 214 1550 228 152 1050 7/15 221 1520 (3) 7/16 215 206 193 196 (2) 3 1430 7/17 248 159V 241

1270

BGM Data Report:			
Date of Interpretation:			
Data period:			
Mean BG (mg/dL):			
% Hyperglycemia (>180):	%		
% at Target (70-180):	<u></u> %		
% Hypoglycemia (<70):	<u></u> %		
Average BG (mg/dL) value	s by meals:		
AC Breakfast (FBG):			
AC Lunch:			
AC Dinner:			
HS:			

192

246

<u>A/P:</u>		
<u>Plan:</u> 1.		
2.		
3.		
4.		
5.		

CASE #11 F/U #1

DM Rx:

3.

- -Dulaglutide 0.75mg weekly
- Insulin Glargine 60 units at HS
 - 1. 9 units for breakfast
 - 2. 5 units for lunch
 - 3. 5 units for dinner

Labs: A1c 7.6%

Examples of "3-minute Drill"

Sept 2022

DATE RANGE: 9/9/22-92/20

DAY	Fasting AM	xx	Noon meal	XX	PM Meal	xx	Bedtime	xx
19/9	213		181		173		161	
2 10	218		192		208		143	
3 [(195		213		132		138	
4 1 2	133		127		102		144	
5 (3	181		196		170		151	
6 14	102		166		145		169	
7 15	166		93		141		155	
8 16	149		196		134		129	
9 17	179		167	6.35	151		116	
10 18	154		136		140		102	
11 19	195		130		116		95	
12 20	186		225		151		108	
13 21	183		182					

BGM Data Report: Date of Interpretation: Data period: Mean BG (mg/dL): % Hyperglycemia (>180): % at Target (70-180): % Hypoglycemia (<70):	Previous: 7/12/22-7/19/22
Average BG (mg/dL) values by meals: AC Breakfast (FBG): AC Lunch: AC Dinner: HS:	
<u>A/P:</u> <u>Plan:</u> I.	

CASE #11 F/U #2

DM Rx:

2.

3.

4.

5.

- 1. Dulaglutide 1.5mg weekly
 2. Insulin glargine 54 units at HS
 3. Insulin lispro (bolus)
 a. AM meal: 8 units
 - b. Noon meal: 4 units c. PM meal: 4 units

2 3 4 5 6 7	Fasting AM (30 (14) (35) (50) (95)	TO	10/31 Noon meal 70 151 146 147	xx	PM Meal	xx	Bedtime	. xx
1 2 3 4 5 6 7	13° 114 135 150	xx	151	xx		xx	Bedtime	1 - 2007
1 2 3 4 5 6 7 8	130		151		1.73			-,
3 4 5 6 7	130		146		1 2			
4 5 6 7	114		146		153		144	
4 5 6 7	135				160		112	
5 6 7	150				107		153	
7	105		182		133		164	
7			199		165	-	89	
	155		171		178		120	
	176		18.9		125		176	
9	146		185		130		170	
10	149		19.7		103		104	
11	183		169		124		157	
12	179		186		194		113	
13	166		155		148		149	
14	125		130	1	167		151	
15	155		166		147		144	
16	163	_	154		186		156	
ata period: ean BG (m Hyperglyd at Target	ng/dL): cemia (>180):				revious: 9/22-9/21/22 % %			
verage BG C Breakfas C Lunch: C Dinner: S:	i (mg/dL) value st (FBG):	es by me	als: 	_ _ _				
<u>:</u> n <u>:</u>								

31 DAY BLOOD GLUCOSE TESTING LOG - Mealtimes = PRE-MEAL (BEFORE EATING)

NAME:	DOB:	
DATE RANGE	TO	

DAY	Fasting AM	xx	Noon meal	xx	PM Meal	xx	Bedtime	XX
1								
2								
3								
4					1			
5								
6								
7								
8								
9								
10								
11								
12								
13								
14							1995	
15								
16								
17								_
18								-
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20								
21								
22								-
23								_
24								
25								
26								
27			The section of these					
28								
29								_
30								
31								

BGM Data Report:	
Date of Interpretation:	
Data period:	
Mean BG (mg/dL):	
% Hyperglycemia (>180):	<u></u> %
% at Target (70-180):	<u></u> %
% Hypoglycemia (<70):	%
Average BG (mg/dL) value	es by meals:
AC Breakfast (FBG):	
AC Lunch:	
AC Dinner:	<u></u>
HS:	