



Name: _____

DOB: _____

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My Glucose Log

Targets: Pre Meals: _____ mg/dL to _____ mg/dL
 Post Meals: _____ mg/dL to _____ mg/dL

	Date	AM	Lunch	PM	Comments
<i>Sample Day 1</i>	<i>1/1/2020</i>	<i>Time: 7am 4.63</i>	<i>Time: 1pm 4.63</i>	<i>Time: 8pm 5.2</i>	<i>AM: Meds at 9am PM: Did not sleep well/feeling tired</i>
Day 1					
Day 2					
Day 3					
Day 4					
Day 5					
Day 6					
Day 7					
Day 8					
Day 9					
Day 10					
Day 11					
Day 12					
Day 13					
Day 14					



Day 15					
Day 16					
Day 17					
Day 18					
Day 19					
Day 20					
Day 21					
Day 22					
Day 23					
Day 24					
Day 25					
Day 26					
Day 27					
Day 28					
Day 29					
Day 30					
Day 31					