



Diabetes D.E.S.T.I.N.Y.

Diabetes Exercise Strategies Together In Network with You

**Extreme Weekend For Children With Diabetes**

- Pre-Camp Blood Sugar and Insulin Log -

Camper Name: \_\_\_\_\_

**OFFICE USE ONLY:** Year: \_\_\_\_\_ Cabin: \_\_\_\_\_

Parents/Guardians: Please fill in this chart with **blood sugars and insulin doses from the week prior to your child's weekend at camp**. This information will help the healthcare team manage your child's diabetes while at camp. It is not necessary to perform extra blood sugar checks (for example, 2 am). **DO NOT MAIL THIS FORM. BRING IT WITH YOU ON OPENING DAY.**

Day	2 am (blood sugar)	Breakfast (blood sugar and insulin)	Lunch (blood sugar and insulin)	Supper (blood sugar and insulin)	Bed (blood sugar and insulin)	Low Blood Sugar (time, blood sugar and treatment given)	Comments
Friday							
Saturday							
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							



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Opening Day Friday							
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