



Blood Glucose Log

Ennis Endocrinology Clinic
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NAME:	
DOB:	

Date:	Breakfast	Lunch	Dinner	Bedtime
	(before meal)	(before meal)	(before meal)	
Glucose:				
Carbs/Insulin	/	/	/	/

Date:	Breakfast	Lunch	Dinner	Bedtime
	(before meal)	(before meal)	(before meal)	
Glucose:				
Carbs/Insulin	/	/	/	/

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Carbs/Insulin	/	/	/	/

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