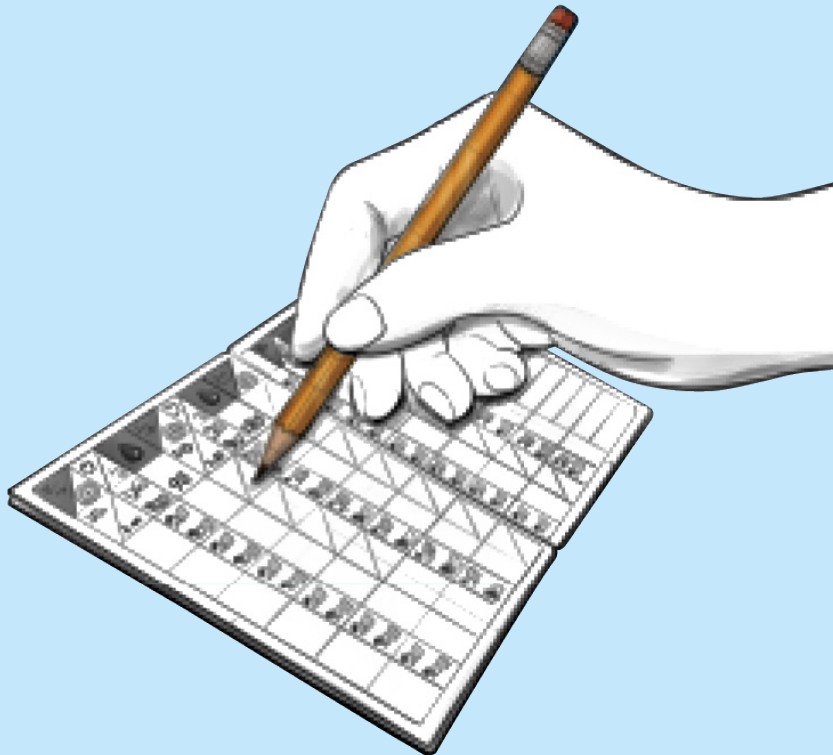


Contour next[®]

Portfolio



Clinilog[®]

Blood Sugar Logbook

Visit www.ContourNext.com/clinilog to download a printable logbook.

To purchase a value pack of printed Clinilogs,
visit www.ContourNextStore.com/clinilog.

Personal Information

Name _____
 Address _____
 City, State, Zip _____
 Phone number _____

Emergency Contact Information

Name _____
 Address _____
 City, State, Zip _____
 Phone number _____

Doctor's Name

Name _____
 Address _____
 City, State, Zip _____
 Phone number _____

Medication Needs

Daily Testing

I need to test my blood sugar _____ times a day at the following times _____

Target Ranges

Pre-meal Target Ranges _____

 Post-meal Target Ranges _____

Sample Log

Week of _____

= Pre-meal

= Post-meal

Day	Fasting	Breakfast			Lunch			Dinner			Other	Comments
			Medication/Insulin			Medication/Insulin			Medication/Insulin			
M	77	8:10 am 115			11:45 am 129		1:10 pm 155	5:00 pm 99		7:10 pm 157	9:30 pm 125	Walked 20 mins. after dinner
T												
W	75	7:50 am 125	5 u	9:50 am 139	12:15 pm 250	6 u	2:10 pm 125	5:00 pm 99	5 u	7:00 pm 155	10:00 pm 130	
Th												
F	72	7:00 am 101		10:10 am 145			1:25 pm 118					
S	71	99			110			129				
S	74			127			138			151		







Legend of Symbols

- Pre-meal test results
- Post-meal test results

Week of _____

 = Pre-meal







 = Post-meal

Day	Fasting	Breakfast			Lunch			Dinner			Other	Comments
			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal







 = Post-meal

Day	Fasting	Breakfast			Lunch			Dinner			Other	Comments
			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal







 = Post-meal

	Fasting	Breakfast			Lunch			Dinner			Other	Comments
Day			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												


Week of _____

 = Pre-meal







 = Post-meal

	Fasting	Breakfast			Lunch			Dinner			Other	Comments
Day			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal







 = Post-meal

Day	Fasting	Breakfast			Lunch			Dinner			Other	Comments
			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal







 = Post-meal

Day	Fasting	Breakfast			Lunch			Dinner			Other	Comments
			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal







 = Post-meal

	Fasting	Breakfast			Lunch			Dinner			Other	Comments
Day			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												

Week of _____

 = Pre-meal

 = Post-meal

	Fasting	Breakfast			Lunch			Dinner			Other	Comments
Day			Medication/ Insulin			Medication/ Insulin			Medication/ Insulin			
M												
T												
W												
Th												
F												
S												
S												