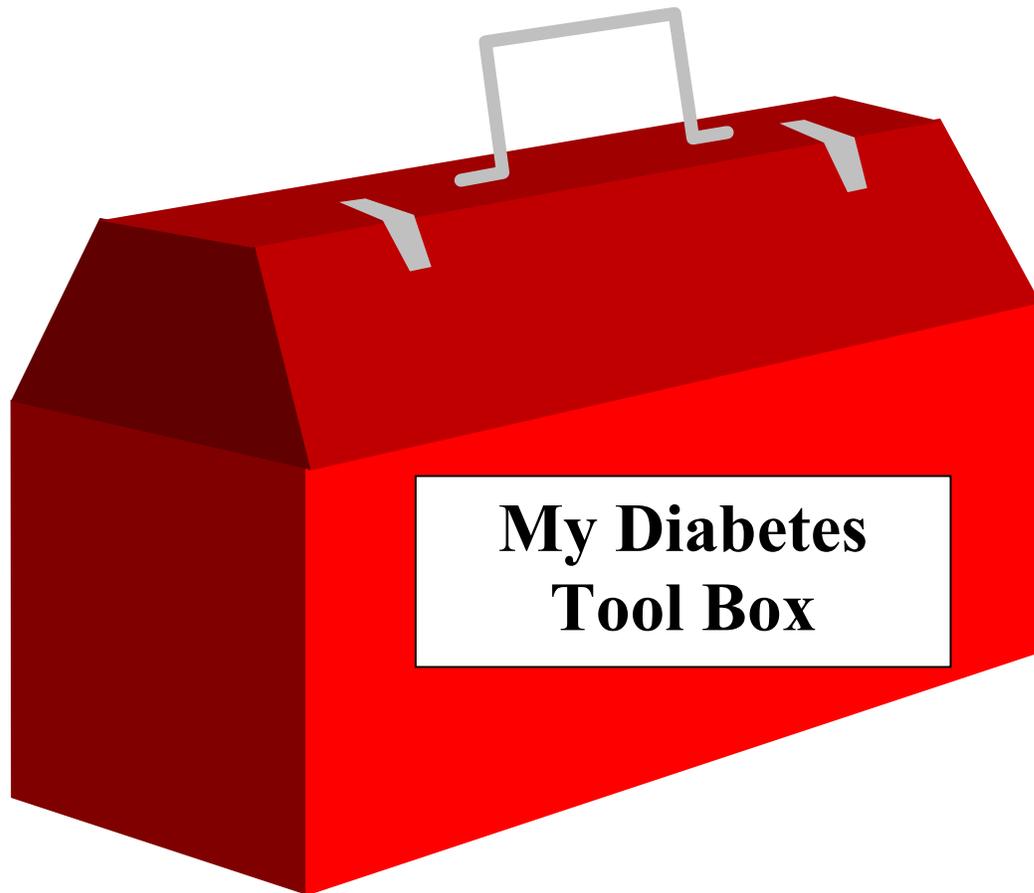


Diabetes Tool Box



My Name: _____

My Doctor: _____ My Nurse: _____

Table of Contents

Introduction

Introduction To Diabetes	1
Monitoring	2
How To Identify Your Blood Sugar Patterns	4
Trouble Shooting Your Blood Sugar Numbers	6
Changing The Time On Your Accu-Chek™ Meter	7
Notes	8

Self Management

Hemoglobin A1C	9
Comparison Of A1C And Blood Sugar Levels	10
Why Is Good Control Important?	11
Self Report	12
Log Sheet For Blood Sugar Readings	13
Notes	14

Complication Prevention

Check List To Manage Diabetes	15
Blood Pressure	16
Blood Pressure Record	17
Lipids: Another Name for Cholesterol and Blood Fats	18
Ways To Quit Smoking	19
Dealing With Stress	21
Symptoms and Treatment Of Low Blood Sugar, Hypoglycemia	22
Symptoms Of High Blood Sugar-Hyperglycemia	23
Sick Day Guidelines	24
Sick Day Record	25
Notes	26

Diet

Dietary Factors That Affect Blood Sugar	27
Plate Method for Meal Planning	28
Carbohydrate Counting	29
Menus And Cookbooks	30
Food Guide Pyramid	31
Weight Loss Tips	32
Alcohol	33
Notes	34

Exercise	
Exercise Principles	35
Exercise Pyramid	36
Leg Exercises	37
Foot Care	38
Conclusions	
Making the Mind-Body Connection	39
Goal Setting	40
Medication Tips	41
Medication List	42
Important Drug Information: Important Things to Remember	43
Instructions for Labs and Procedures	45
Sharps Disposal Information	46
Diabetes Self Management Classes	47
American Diabetes Association	48
Other Resources	49
Cascade Alliance Telephone Program	50

Introduction to Diabetes



What is diabetes?

Diabetes is disorder of metabolism. It is either a lack of insulin (type 1 – insulin requiring) or insufficient supply of insulin and the inability of the body to use the insulin correctly (type 2 – insulin resistant).

What is Insulin?

Insulin is a hormone. It is the key that unlocks the cell door. When the cell door is unlocked, blood sugar or glucose can enter.

What are the symptoms of diabetes?

Sometimes there are none
Increased urination
Fatigue
Frequent infections

Increased thirst
Weight loss or gain
Slow healing
Blurred vision

When is diabetes diagnosed?

Diagnosis	Fasting Blood Sugar	Blood Sugar 2 hours After Eating
Normal Blood Sugar	70-110	140 or less
Impaired Glucose Regulation	110-126	141-200
Diabetes	126 or more	200 or more

Monitoring



What does CBG mean?

CBG is the abbreviation for capillary blood glucose(blood sugar). It is a measure of how well your diabetes is controlled.

Who should monitor their CBGs?

Everyone with diabetes should monitor their blood sugar by measuring their capillary blood glucose(CBG).

Why should I monitor my CBGs?

Monitoring your CBGs will:

- Help in making decisions about your diabetes
- Show patterns in order to identify ways to improve your numbers
- Show the effects of food, activity, medication
- Show the effects of stress, illness, and infection
- Confirm a low blood sugar

How often should I monitor?

- Check with your provider for instructions on how often and at what time of the day you should monitor your CBGs.
- Alternate times. Test before a meal or before bed time.
- Occasionally you will need to check after eating, **but** wait for 2 hours to do this and record this in the comment section of your log.

Are there standard recommendations for testing?

Yes. It depends upon the type of medication you are taking, the treatment plan you develop with your provider and the severity of your condition.

- No diabetes medications-ranges from **no** testing to **no more** than twice a week
- Diabetes medications/pill- twice a week, if stable.
- Insulin-three or four times a day, may be less if stable, or on very little insulin.

Is there a limit on the number of testing strips I receive?

Yes. It depends upon the type of treatment.

- No diabetes medication 50 strips for 150 days(if testing is part of your treatment plan)
- Diabetes medications/pills 50 strips for 150 days
- Insulin 300 strips for 90 days

Will I ever need more strips?

Yes, you might.

If you need to check your CBGs more frequently, such as when your provider is adjusting or changing your medications, OR when your health changes, such as during times of illness or stress, OR when your CBGs are becoming uncontrolled.

How do I get more strips?

When you need more strips during these times, call the telephone advice line and ask your provider for a temporary increase. Let your provider know why you need these.

If you have other insurance or Medicare, ask your provider for a prescription. This prescription can be filled at a pharmacy outside of the VA.



Do you know how to monitor your CBGs?

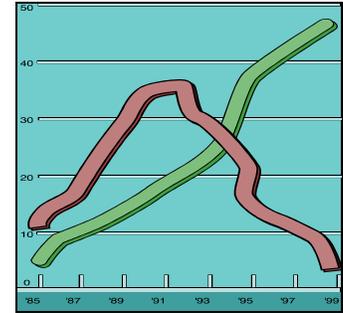
If not, or if you have questions about monitoring,:

- Read the instruction booklet
- Call the Accu-Chek™ Company 1-800-858-8072
- Ask for an appointment with a nurse for review

How To Identify Your Blood Sugar Patterns

How do I identify a pattern?

1. Record the information in **columns** so it is easy to compare the same time each day.
Alternate your test times: before meals and at bedtime.
2. **Circle** or **highlight** all of the glucose values that are higher than your goal in one color of highlighter.
3. **Circle** or **highlight** all of the glucose values that are lower than your goal, with another color highlighter.
4. Look for a pattern of glucose values that are too high or too low.



What is an example of a pattern I should look for?

Examples of patterns

- Low most days before lunch or after a walk.
- High after eating certain foods
- High all the time in the morning

What is My Blood Sugar Goal ?

<p>Healthy Diabetic (No other medical problems)</p> <p>90 – 130 fasting in the am 90 – 190 the rest of the day</p>	<p>Diabetic with Chronic Illness: (Other medical problems such as heart disease, strokes, seizures or elderly and/or you have no symptoms when low)</p> <p>110 – 140 fasting in the am 110 – 200 the rest of the day</p>	<p>Individualized Goal: Check with your provider</p> <p>_____ fasting in the am _____ the rest of the day</p>
---	---	--

How do I change a blood sugar pattern?

- Decide **what happened** prior to the numbers you circled. Perhaps you ate a different food, or made a change in your activity or missed a diabetic medication, etc
- Ask yourself **what you could do** the next time so that you are within your goal when that situation happens.
- **If you can identify a change** you can make on your own, such as avoiding the problem foods, or taking a snack for walks, **make the change**.
- **If there is nothing that you can do and the pattern remains**, then contact your primary care provider. You may need a change in your diabetes medication regimen.

What can affect my blood sugar?

Raise Blood Sugar	Lower Blood sugar
Too much food	Too little food
Infections, surgeries	Exercise
Stress, pain	Diabetes medications
A severe low blood sugar (rebound)	Alcohol can cause a severe low
Some medications such as steroids can raise blood sugars	Some medications can make your diabetes medications work better, and lower sugars
Sugar or starch on fingertips	

Trouble Shooting Your Blood Sugar Numbers

1. The CBG result you get on the new Accu-Chek™ meter is close to the LAB value. This result is higher than other manufacturer's meters, but no longer different from the lab tests that you normally get when you go to your appointments.
2. Do not compare results from meter to meter or finger to finger.
3. To get a good reliable, accurate test do the following:
 - ♥ Get a good drop of blood. No yellow should be showing on the strip
 - ♥ Do the quality control check with the meter and strips following directions in your book. This should be done each time you open a new bottle of strips or whenever you question the numbers.
 - ♥ To check results, ONLY use a lab blood sugar number that has been drawn EXACTLY at the same time you stick your finger. This result should be very close to your number
 - ♥ If you have any questions on the accuracy of your test after you have done the above. Call the company at 1-800-858-8072. The number is also on the back of the meter. They are open 24 hours a day, seven days of the week and are there for your call.

What kind of batteries do I need and where can I get them?

The VA is NOT responsible for replacing batteries.

The beige/black model uses (2) lithium # 3 batteries.

The blue/beige model uses (2) triple A batteries.

Batteries are available at Radio Shack, Fred Meyer and the VA Canteen store.



What if my meter is damaged?

The Accu-Chek™ company will replace a damaged meter.

Call the company at 1-800-858-8072.

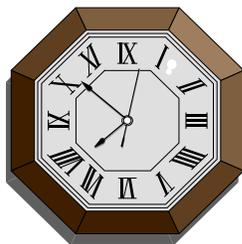
What happens if I lose my meter?

The VA pharmacy will replace one meter. You will need to call Telephone Advice Line. If you lose the second meter, you will need to purchase it on your own.

Accu-Chek™ company can be very helpful.

Call Accu-Chek™ with your meter questions.

Changing The Time In Your Accu-Chek™ Meter



Why is it important to have the time correct in my Accu-Chek™ meter?

If you DO NOT have a date and time set in your meter, your blood sugar readings will not be able to be “downloaded” in our computer.

If the date and time is set INCORRECTLY the information will be “downloaded” incorrectly.

How often do I need to change the date and time?

You will need to RESET the date and time, when you change the battery.

You may need to do this any time you open the BATTERY door or drop your machine.

You will also need to do this for DAY LIGHT SAVINGS TIME in the SPRING and FALL.

How do I set the date and time in my meter?

1. Turn meter on and wait for the flashing strip.
2. Press both ON/OFF and MEMORY buttons at the same time.
3. The word “SET” will appear in the window. Now anything that is flashing in the window can be changed with the ON/OFF button. The MEMORY button now moves to the next choice.
4. You can change the following in this mode: BEEP on or off, TIME/DATE.
5. When finished changing information, press both the ON/OFF and MEMORY buttons at the same time again. This brings you back to the flashing strip and the regular functions of the machine.

NOTE:

Always be sure you have a **correct date/time** in the window, when you prepare to do a test. If you don't have the date/time in the window or if it is incorrect, the information will either not download, or it will download incorrectly.

Call the Accu-Chek™ company at 1-800-858-8072 if you are unable to follow these instructions or the instructions that came with your meter to change the date/time.

Notes:

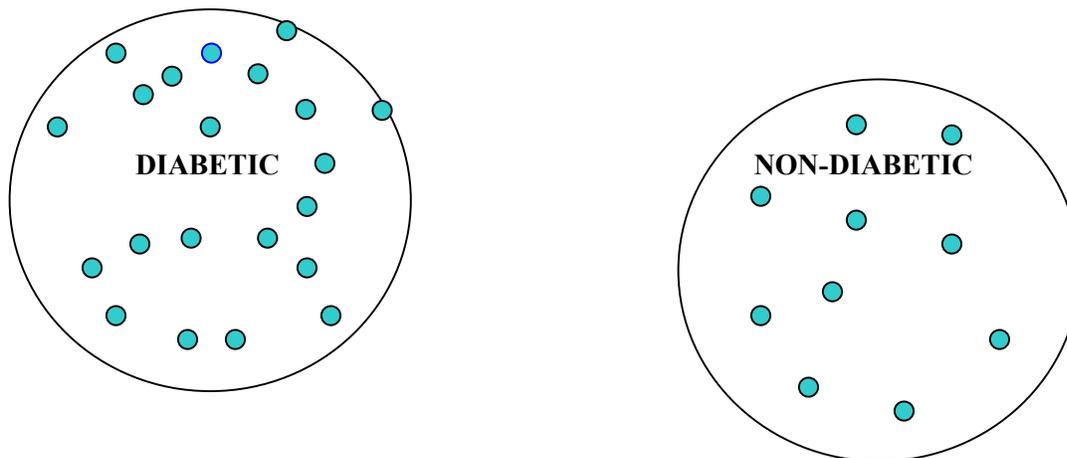
Hemoglobin A1C

Hemoglobin A1C or A1C for short is used as a measure of your overall diabetes control. It measures the average reading over the previous 3 to 4 months. Sort of a “batting average” for your blood sugars. It is used in combination with your daily readings to determine how well controlled your diabetes is.

How does the A1C come up with this "batting average?"

- Glucose or sugar attaches to the hemoglobin in the red cells in your blood.
- The higher your glucose level, the more glucose coating there is on the hemoglobin and therefore the higher the A1C will be.

A hemoglobin molecule with glucose attached in a diabetic and a non-diabetic.



What is a "normal " A1C?

“Normal” values for people without diabetes varies with different labs. At our lab a "normal" A1C is 3.4 to 6.1.

What should my A1C be?

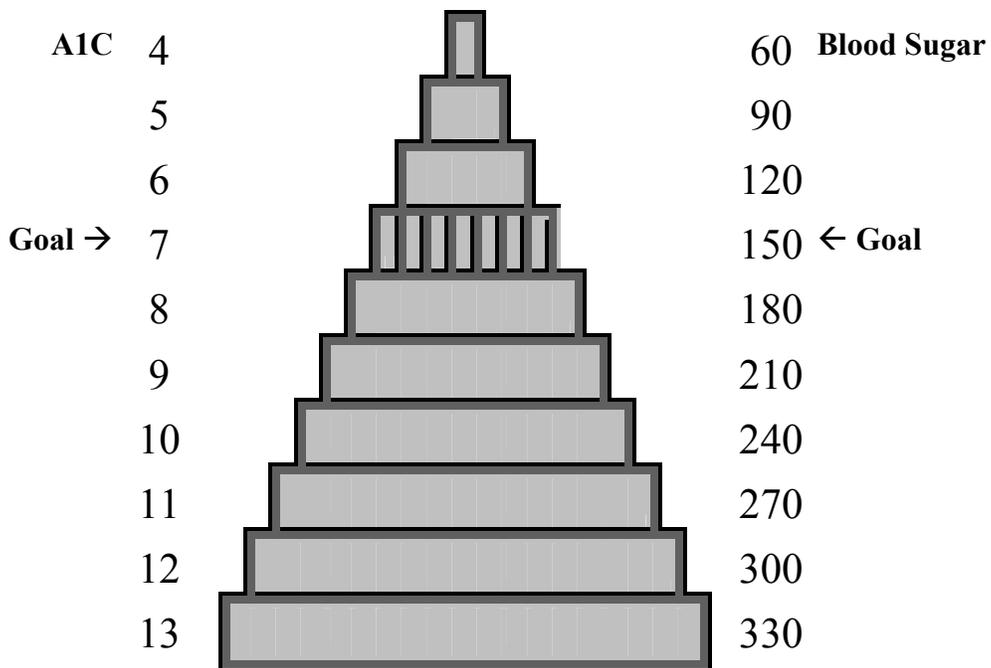
Your goal is to be under 7.0.

For the elderly or chronically ill, the goal may be slightly higher.

A measure over 8 indicates that your treatment needs to be changed.

You and your provider should identify your specific goal. An excellent range is between 6 and 7.

Comparison Of A1C And Blood Sugar Levels



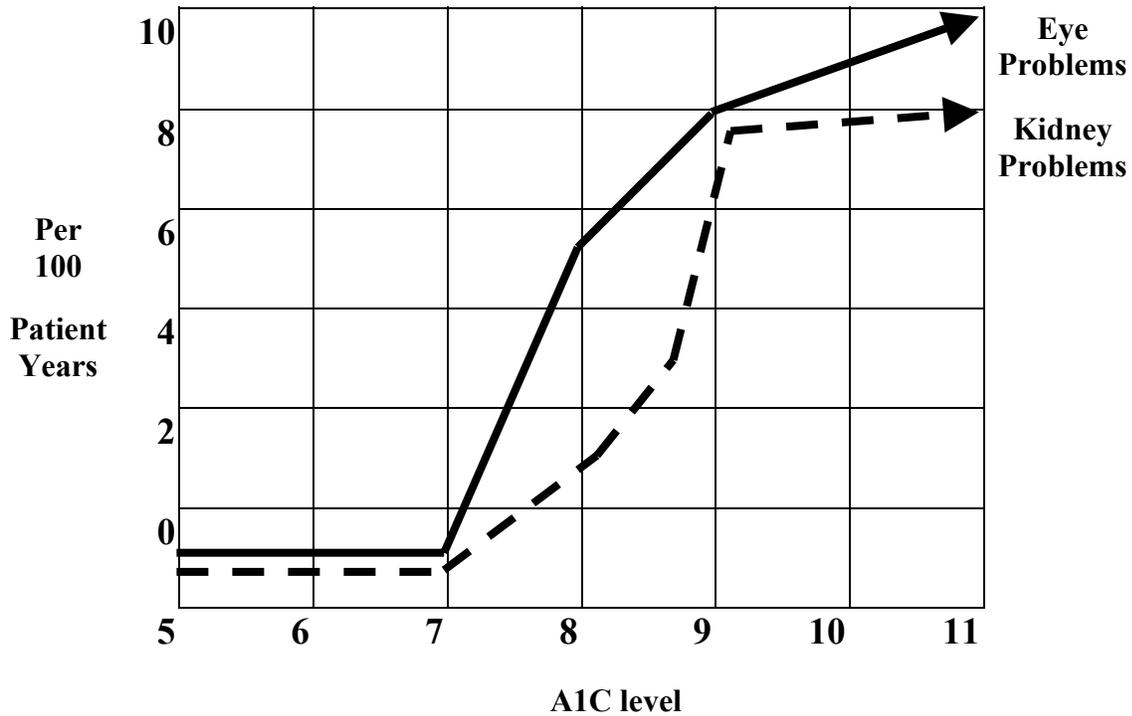
What is the goal for my A1C?

7.0 or below → Ideal
8.0 or above → Action Needed

Does Control Matter?
YES !

Studies identify that the risk of complications increases at an A1C level of 8.0 and above.

Why Is Good Control Important?



Poor control of blood sugar, over time, in people with Type 2 diabetes may **increase the risk of developing eye and kidney damage.**

Long term blood sugar **control** in people with Type 2 diabetes **may reduce the risk** of problems associated with diabetes.



**Keep Your
Blood Sugars Below 140
As Much As Possible.**

**Keep Your
A1C Below 7
As Much As Possible**

Self-Report Form: from veteran *or* person giving readings

Name: _____ Today's date: _____
SSN# _____ Patient's date of birth: _____
Phone Number where we can reach you: _____

These are questions meant for the veteran whose readings are being presented. *If given by someone other than veteran, please specify person and relationship to the veteran:*

1. How are you **feeling**? _____
2. Are you having any **problems**? Please be specific? _____
3. Do you have any signs of **infection**? Please be specific: _____
4. Have you had any unusual **stress** lately? Please be specific: _____
5. Circle the goal for your blood sugars: **110-200** **90-190** or specify _____
6. Use the chart on the next page to specify exactly the diabetic medication you are taking, the dosed, and the time you take your medications
Do you "self adjust" your diabetic medication? If so please explain how you do it. _____

Describe your typical day

Typical breakfast – usual time of day: _____

List what you usually eat _____

_____ Has there been a change? **Yes** **No**

Typical lunch – usual time of day: _____

List what you usually eat _____

_____ Has there been a change? **Yes** **No**

Typical dinner – usual time of day: _____

List what you usually eat _____

_____ Has there been a change? **Yes** **No**

Typical snacks – Usual time(s) of the day: _____

List what you usually eat? _____

_____ Has there been a change? **Yes** **No**

Usual daily activity or exercise

List your usual daily activities and exercise _____

_____ Has there been a change? **Yes** **No**

Copy This Page

Log Sheet for Blood Sugar Readings

SSN: _____						
Name: _____						
Blood Sugar Readings						
Circle your goal →					am	pm
					Healthy Diabetic	90-140 90-190
					Chronic Illness	110-150 110-200
Date	Breakfast	Lunch	Dinner	Bedtime	Night	Comments Please
Diabetic Med Schedule	Breakfast	Lunch	Dinner	Bedtime	Please Indicate if you missed any of your medications OR "adjusted" your medications Give reasons	
Your Thoughts Please:						
1. What do you think caused the low readings?						
2. What did you do to treat the low blood sugar readings?						
3. What could you have done to avoid the low blood sugar readings?						
4. What do you think may have caused the high blood sugar readings?						
5. What could you have done to avoid the high blood sugar readings??						

Copy This Page

Notes:

Check List To Manage Diabetes:

✓	Check List	Time Frame	Comments
	Know your (CBG) blood sugar goals	Always	
	Balance and spread out meals/snacks	Daily	
	Get regular exercise collect 30min/day	Daily	
	Get adequate rest	Daily	
	Look at your feet, report unusual things	Daily	
	Set lifestyle goals	Daily	
	Decrease stress in your life	Daily	
	Know your diabetes medication plan	Always	
	Know what to do when your CBGs go over or under goal	Always	
	Know what to do for low CBGs	Always	
	Know what to do for "sick" days	Always	
	Bring meter and log book to every appointment	Each physician appointment	
	Check and note your weight	Between visits and at appointments	
	Check and note your blood pressure	Between visits and at appointments	
	Make a list of questions for your provider	Before physician appointment	
	Quit tobacco use, if applicable	Now	
	Avoid excessive use of alcohol	Now	
	Things that you will need your doctor or nurse to help you arrange:		
	Get a pneumonia and tetanus shot	Every 6-10 years	
	Get a flu shot	Yearly	
	Get a dilated eye exam	Yearly	
	Have your feet examined by MD	Yearly	
	Get a dental exam	Yearly	
	Get your A1C checked	Every 3-12 months	
	Get your kidneys checked	Yearly	
	Get a fasting lipid(blood fat) test	Yearly	
	Get liver function tests (if applicable)	Frequency: _____	

Blood Pressure



Why is blood pressure important to someone who has diabetes?

Blood pressure is especially important for diabetic patients because of the high rate of heart disease and other circulatory problems. Diabetic patients don't die of diabetes; they die of heart disease.

What affects my blood pressure?

Many things affect your blood pressure: timing of medications, activity, stress, smoking, drinking caffeine or alcoholic beverages, etc.

How can I get my blood pressure checked between appointments?

Get your blood pressure checked locally at fire stations, senior centers, or ask your primary care provider to give you a blood pressure monitor.

Keep track of your blood pressures using the following form OR put the information in your diabetic logbook.

What should I do to get an accurate blood pressure reading?

Rest about 5 minutes before checking your blood pressure. If you haven't rested before your blood pressure check, use the comment section on the form to record the reasons you suspect your blood pressure would be up or down.

Sometimes it helps to take an average of 3 readings.

Always recheck highs or lows.

What is my goal for my blood pressure and my pulse?

Blood pressure goal for Non-Diabetic: (American Heart Association) 140/90 or less

Blood pressure goal for Diabetic: (American Diabetes Association) 130/80 or less

Pulse range: 60 – 100

Is there anything I should record in addition to the blood pressure measure?

Record which arm you used.

Record if you are using a regular or large blood pressure cuff.

Record you pulse when you take your blood pressure.

List your blood pressure medications.

My Blood Pressure Record

Date	Time	Arm	Blood Pressure	Pulse	Comments
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			
		R L			

Blood Pressure Medications	Medication Dosage	Time Taken	Comments

Note: If you are concerned about your numbers and need attention:
 Call the Telephone Advice number 1-888-233-8305.
 If you want to schedule an appointment with your PCP call: 503-220-3494.
 In an emergency call 911.

Copy this Page

Lipids: Another Name for Cholesterol And Blood Fats

Why should I lower my blood fats?

When you have diabetes, you are at greater risk of getting damage to your blood vessels. This can be caused by high blood glucose, high blood pressure and high blood fats (lipids), such as cholesterol and triglycerides. You can help avoid this by keeping these in **goal range**. If you already have heart disease, this is especially important.

	Goal Range
Blood pressure	Less than 130/80
Cholesterol	Less than 200
LDL (lousy cholesterol)	Less than 100
HDL (healthy cholesterol)	Greater than 60
Triglycerides	Less than 150

How Can I Lower My Cholesterol?

- Eat a diet low in total fat, saturated or animal fat and cholesterol.
- Use liquid vegetable oils instead of solid fats
- Use skim or lowfat milk, yogurts or cheese
- No more than 3 eggs per week
- Avoid cream sauces and butter added to food
- Eat more high fiber foods like oats, vegetables and legumes
- Increase your daily physical activity under your doctor's recommendations
- If you need to lose weight, check with your doctor or dietitian and increase your activity and decrease your daily intake by 250-500 calories per day. Avoid 'crash' diets
- If your doctor has given you medication for your blood fats, take it as directed and notify your doctor of any side effects or problems with the medication.
- Get your fasting* lipid panel done at least yearly, and more frequently if your doctor is adjusting your cholesterol medication.

*see instructions for fasting labs



My Cholesterol-Lowering Medicine Is: _____

IT'S NOT TOO LATE TO QUIT SMOKING.

Quitting smoking at any age helps your circulation, your stamina, your skin, and your general health. Your risk for coronary heart disease, a common cause of death and disability as people get older, is halved after only a year without smoking. Quitting smoking also reduces the likelihood of your getting respiratory problems and lung cancer. A survey of older former smokers showed that more than 90% managed to quit on their own. Smoking is an addictive habit though, and most former smokers made several attempts to quit before they were finally successful. So, never say, "I can't." Just keep trying.



WAYS TO QUIT SMOKING

Set A Quit Date. Set a date for when you will stop smoking. Don't buy cigarettes to carry with you beyond your last day. Tell your family and friends you plan to quit, and ask for their support and encouragement. Ask them not to offer you cigarettes.

Throw Your Cigarettes Away. If you keep cigarettes around, sooner or later you'll break down and smoke one, then another, then another, and so on. Throw them away. Make it less easy to start again. Try chewing gum as a substitute for cigarettes.

Spend Time With Nonsmokers Rather Than With Smokers. Think of yourself and identify yourself as a nonsmoker (for example, in restaurants). Avoid spending time with smokers. You can't tell others not to smoke, but you don't have to sit with them while they do. Old habits die hard and one of your old smoking buddies is sure to offer you a cigarette. Plan on walking away from cigarette smoke. Spend time with nonsmokers and sit in the nonsmoking section of restaurants.

Keep Your Hands Busy. You may find you don't know what to do with your hands for a while. Pick up a book or a magazine. Try knitting, drawing, making a plastic model, or doing a jigsaw puzzle.

Take On New Activities. Take on new activities that don't include smoking. Join an exercise group and work out regularly. Sign up for an evening class or join a study group at your church. Go on more outings with your family or friends.

Join Quit-Smoking Programs If It Helps. Some people do better in groups, or with a set of instructions to follow. That's fine, too. Remember, the aim is to quit smoking. It doesn't matter how you do it. Just do it.

Consider Using Nicotine Gum And Nicotine Patches. Nicotine is the drug that is in tobacco. You can use nicotine patches or gum, available without a prescription at your local pharmacy, to quit smoking. It is a two-step process. First you learn to live without smoking, but not without nicotine. Then, as you graduate to patches with less nicotine, or chew less of the nicotine gum, you wean yourself off the nicotine. You may prefer to be involved in an organized quit-smoking program while you are using the patches and gum. Neither the patches nor the gum is a miracle cure. You still need to learn to live without cigarettes in your daily life.

Developed by Ann Carter, M.D., for Clinical Reference Systems.

What are some resources I can use to get some more information?

- Ask your provider about ‘Stop Smoking’ programs available at PVAMC
- American Heart Association: 1-800-AHA-USA1 (1-800-242-8721)
<http://www.americanheart.org/>
- American Lung Association: 1-800-LUNG-USA (1-800-586-4872).
<http://www.lungusa.org/>
- Oregon’s Smoke Free Line 1-877-270-STOP(7867)

Dealing With Stress: Stress Can Affect Your Blood Sugars

Ideas and strategies for coping with stress:

1. Start off your day with breakfast.
2. Avoid drinking coffee. Drink non-sugar, non-caffeinated beverages.
3. Organize your daytime activities. Set priorities.
4. Allow time during the day for meditation or listening to music.
5. Occasionally change your routine by meeting with a friend.
6. Don't try to do 2 or 3 things at a time.
7. Don't try to be perfect.
8. Reduce the noise level.
9. Speak up about petty annoyances, while respecting other's feelings.
10. Develop a support network.
11. Always take a lunch break, preferably not at your desk.
12. Make a goal to have: good nutrition and adequate sleep.
13. Get regular exercise.
14. Develop time with family, friends, co-workers: i.e. happy hour, parties, celebrations, other events.
15. Look at unavoidable stress as an avenue for growth and change.
16. Avoid people who are "stress carriers" or "negaholics."
17. Don't watch the 11 PM news.
18. Give yourself praise.
19. Treat yourself.
20. Be assertive, learn to say "no" when appropriate.
21. Identify your emotional resources.
22. Ask questions and ask for help.
23. Allow 15 minutes of extra time to get to appointments.
24. Check your breathing during the day. Take deep breaths occasionally and when you feel stressed.
25. Humor is helpful. Try to find something funny in the situation.
26. Find ways to protect yourself – take a "mental health day."
27. If nothing seems to help, call the Mental Health Line at extension 56409.





a Johnson & Johnson company



HYPOGLYCEMIA (Low Blood Sugar)

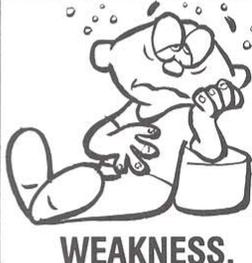
CAUSES: Too little food, too much insulin or diabetes medicine, or extra exercise.

ONSET: Sudden, may progress to insulin shock.

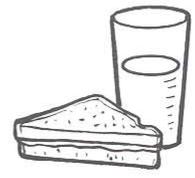
BLOOD SUGAR: Below 70 mg/dL.
Normal range: 70-115 mg/dL.

	
SHAKING	FAST HEARTBEAT

SYMPTOMS

			
SWEATING	ANXIOUS	DIZZINESS	HUNGER
			
IMPAIRED VISION	WEAKNESS, FATIGUE	HEADACHE	IRRITABLE

WHAT CAN YOU DO?

		
Drink a half a cup of orange juice or milk, or eat several hard candies.	TEST BLOOD SUGAR If symptoms don't stop, call your doctor.	Within 30 minutes after symptoms go away, eat a light snack (half a peanut butter or meat sandwich and a half glass of milk).

Concept developed by Rhoda Rogers, RN, BSN, CDE, Sunrise Community Health Center and Northern Colorado Medical Center
© Novo Nordisk Pharmaceuticals Inc. 000-114 1994 Printed in U.S.A.

Reprinted with Permission



a Johnson & Johnson company



HYPERGLYCEMIA

(High Blood Sugar)



CAUSES: Too much food, too little insulin, illness or stress.

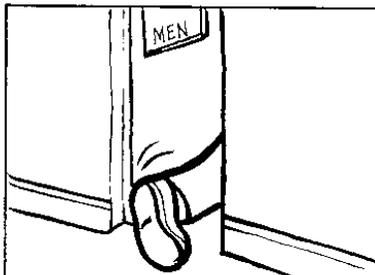
ONSET: Gradual, may progress to diabetic coma.

BLOOD SUGAR: Above 200 mg/dL.
Acceptable range: 115-200 mg/dL.



EXTREME THIRST

SYMPTOMS



FREQUENT URINATION



DRY SKIN



HUNGER



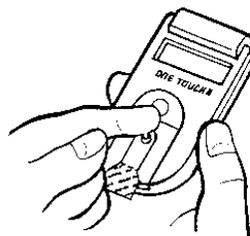
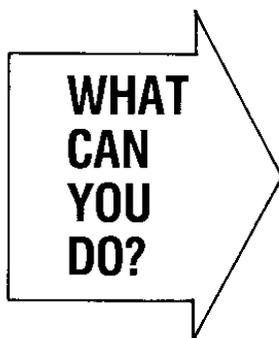
BLURRED VISION



DROWSINESS



NAUSEA



TEST BLOOD SUGAR



**If over 250 mg/dL for several tests
CALL YOUR DOCTOR**

Concept developed by Rhoda Rogers, RN, BSN, CDE, Sunrise Community Health Center and Northern Colorado Medical Center
© Novo Nordisk Pharmaceuticals Inc. 000-114 1994 Printed in U.S.A.

Reprinted with Permission

Sick Day Guidelines

1. Do not stop taking your insulin or diabetes pills even if you are not eating. Both stress and infection or illness **increase** your blood sugars
2. Check your blood sugar every 4 - 6 hours
3. If you have Type 1 and your sugar runs higher than 250, check your urine for ketones every 4 hours.
4. Drink clear liquids (at least 1/2 cup every hour)
5. Stick to your meal plan. If you are unable to do this, see the sick day menu below.
6. Get your rest
7. Monitor your weight for signs of excessive fluid loss.

Contact your health care provider if:

1. You have questions
 2. Your symptoms get worse
 3. Your illness lasts longer than 24 hours
 4. If you are running moderate or large on ketones.
 5. If you cannot keep your diabetes pills or food down and vomiting doesn't stop*
- *Consider going to the ECU



Meals for sick days:

	1000-1200 calories		1500-1800 calories		2000-2500 calories
Breakfast	2 servings	Breakfast	3 servings	Breakfast	4 servings
Midmorning	2 servings	Midmorning	2 servings	Midmorning	3 servings
Lunch	3 servings	Lunch	4 servings	Lunch	4 servings
Mid afternoon	2 servings	Mid afternoon	2 servings	Mid afternoon	2 servings
Supper	2 servings	Supper	3 servings	Supper	4 servings
Bedtime	2 servings	Bedtime	2 servings	Bedtime	2 servings

Sick day foods

Each food when eaten in the stated serving size = 1 carbohydrate

Food Item	Serving size	Food Item	Serving Size
Apple Juice	1/2 cup	Ice Cream (Vanilla)	1/2 cup
Cranberry Juice	1/3 cup	Sherbet	1/2 cup
Orange Juice	1/2 cup	Instant Pudding	1/2 cup
Regular 7-Up™	1/2 cup	Custard	1/2 cup
Regular Gelatin	1/2 cup	Fruit Flavor Yogurt	1/2 cup
Grape Juice	1/3 cup	Gatorade™	1 cup
Cooked Cereal	1/2 cup	Popsicle™	1 twin pop
Chicken Noodle Soup	1 cup	Saltines	6 crackers

Sick Day Record

How Often	Question	Morning	Evening
Every day	How much do you weigh today?	Weight: _____	Weight: _____
Every evening	How much did you drink today?	# of glasses: _____	_____
Every Morning and every evening	What is your temperature?	AM: _____	PM: _____
Every 4 hours or before every meal	How much diabetic medication did you take?	Time: _____ _____ _____ _____	Dose: _____ _____ _____ _____
Every 4 hours or before every meal	What is your CBG?	Time: _____ _____ _____ _____	CBG: _____ _____ _____ _____
Every 4 - 6 hours	How is your breathing? Other symptoms? such as abdominal pain, vomiting?	Time: _____ _____ _____ _____	Comment: _____ _____ _____ _____
If you are Type 1 diabetic: Every 4 hours or each time you pass urine	What is the level of ketones in your urine?	Time: _____ _____ _____ _____	Level: _____ _____ _____ _____

Copy This Page

Notes:

Dietary Factors That Affect Blood Sugar

1. Timing

- ❖ Eat at least 3 meals a day
- ❖ Eat at the same time
- ❖ Don't skip meals

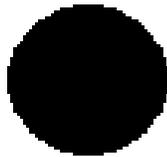
2. Portion sizes

- ❖ Eat about the same amount
- ❖ Too much food raises blood sugar
- ❖ Too much food increases body weight



3. What you eat

- ❖ **Carbohydrate** – main source of energy, 100% turns into sugar, affects blood sugar in **2 hours**, examples: grains, fruits, milk, sweets, starches



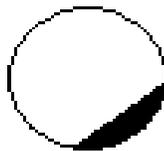
100 %

- ❖ **Protein** – 50% turns into sugar and affects blood sugar in **3 to 5 hours**, examples: meat, milk products



50 %

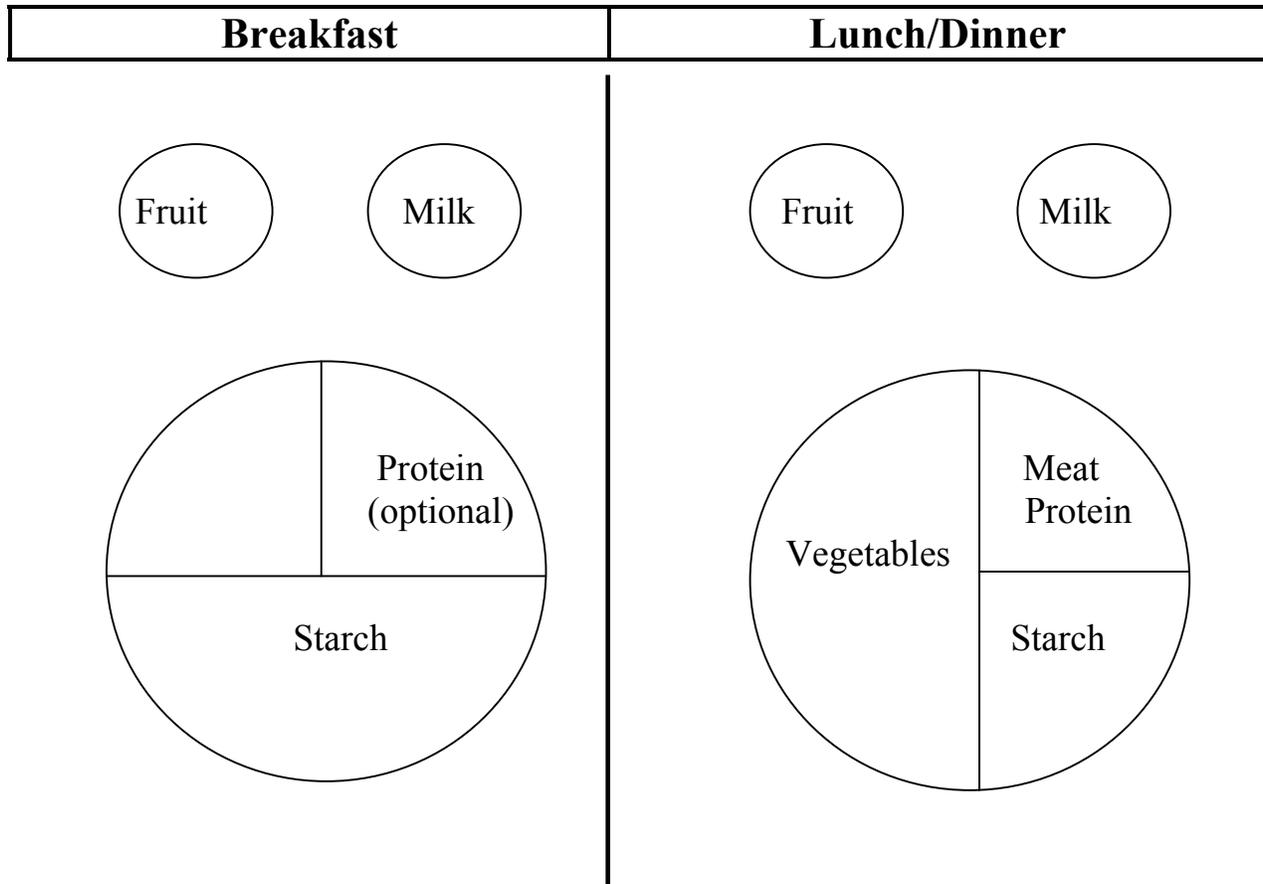
- ❖ **Fat** – 10% turns into sugar and affects blood sugar for **12 to 24 hours**, examples: oil, butter, nuts, and margarine



10 %

Plate Method for Meal Planning

A quick and easy meal planning technique,
A good starting point



If you can portion your foods in the patterns shown above, it will help you plan your meals simply and also help you stay in control on your diabetes.

Carbohydrate Counting

Newer flexible way to plan your meals that has had excellent results. Try to 3-4 carbohydrate servings at each meal and 1-2 at each snack.

- **One serving** of carbohydrate equals **15 grams of total carbohydrate**
- **4 carbohydrate servings at each meal is 60 grams total**
- **1-2 carbohydrate servings at a snack is 15-30 grams total**

Each food listed is one serving of carbohydrate

Starches		Dairy	
1/2	bagel	1	cup milk
1	slice bread	1	cup yogurt
1	tablespoon fruit spread	1/2	cup evaporated milk
1/2	hamburger bun		
1	6-7 inch tortilla		
1	4 ½ inch waffle		Fruit
2	4 inch pancakes	1/2	cup apple juice
3/4	cup unsweetened cereal	1/3	cup grape juice
1/2	cup shredded wheat	1/3	cup cranberry juice
1/4	cup grape nuts	1/2	cup orange juice
1/4	cup granola	1/3	cup prune juice
3	gingersnaps	1	small apple
1/3	cup cooked rice	1	small banana
1/2	cooked pasta	1/3	cantaloupe
1/3	cup baked beans	1/2	grapefruit
1/2	cup corn and peas	17	small grapes
1	small potato	1	small orange
1/2	cup mashed potato	1	cup raspberries
1/2	cup sweet potato	1/2	cup canned fruit
8	animal crackers	2	tablespoons raisins
6	saltines	1 ½	figs
3	cups popped popcorn		
1/2	cup beans		
1	small biscuit		

There are other references on carbohydrate counting available through your dietitian or nurse. Or contact the American Diabetes Association

Menus and Cookbooks from ADA

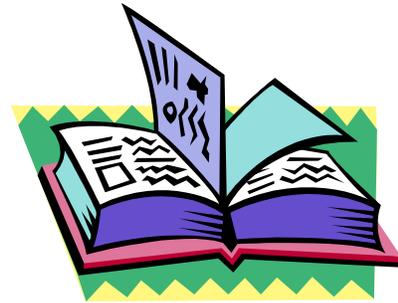
The most recommended reference

Month of Meals: *A Menu Planner Series*, is a pre-planned 28-day menu of meals and recipes. American Diabetes Association, Englewood Cliffs, NJ: Prentice-Hall; 1994.

Volumes 1-5: Classic Cooking, Meals in Minutes, Ethnic Delights, Vegetarian Pleasure, Old-Time Favorites

Other references available

- Express Lane Diabetic Cooking
- Forbidden Foods Diabetic Cooking
- Cooking with the Diabetic Chef
- The Great Chicken Cookbook for People with Diabetes
- The Complete Quick & Hearty Diabetic Cookbook
- The New Family Cookbook for People with Diabetes
- The New Soul Food Cookbook for People with Diabetes
- Diabetes Meal Planning on \$7 a Day or Less
- Robyn Webb's Memorable Menus Made Easy
- The Diabetes Snack, Munch, Nibble, and Nosh Book
- Diabetic Meals in 30 Minutes – Or Less!
- More Diabetic Meals in 30 Minutes – Or Less!
- Flavorful Seasons Cookbook
- Quick & Easy Diabetic Recipes for One
- Brand-Name Diabetic Meals in Minutes
- How to Cook for People with Diabetes
- Southern-Style Diabetic Cooking
- World-Class Diabetic Cooking
- The Healthy HomeStyle Cookbook



Cost Varies around \$10-\$20

Available through the American Diabetes Association

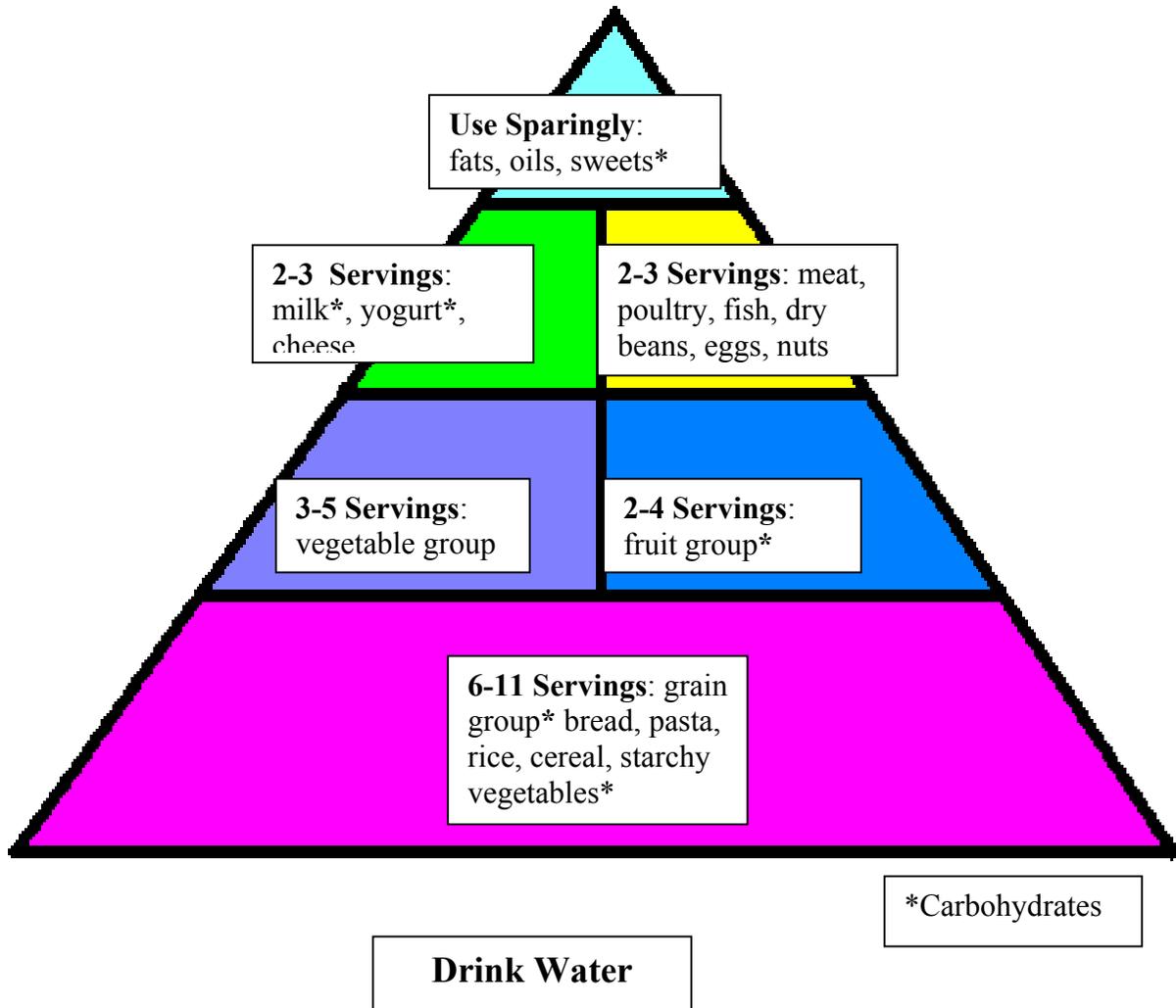
By mail: American Diabetes Association

380 SE Spokane Street, #110

Portland, OR 97202

By phone: 1-800-342-2383 *By Internet:* <http://www.diabetes.org>

Food Guide Pyramid



Read Labels

Identify what an actual serving is. Compare the actual serving size to the portion you would normally call a serving for yourself. Also, follow the instructions for serving size and the recommended amounts of the grain, fruit, and milk group.

Note: Just because a product is labeled low fat or reduced sugar, doesn't mean it is without these ingredients and the amount may surprise you.

Read labels!! You'll learn a lot.

Weight Loss Tips

The most important thing to do to loose weight is to cut back on calories. To have weight loss: **the calories you use** needs to be greater **than the calories you eat**. Increase the calories you use by increasing activity. Or reduce the calories you eat, by reducing the amount and/or type of foods eaten, **weight loss** will happen.

Ideas to work on to achieve weight loss:

- List the **reasons** you have to loose weight. Post the list where you can see it daily, such as on your refrigerator door or bathroom mirror.
- Identify a **reasonable weight loss goal**. Remember loosing only 10% of your body weight can do a lot to improve your blood sugars.
- Post **positive affirmations** such as: “I am successful at reaching my weight loss goal”, “I can do this, and I am in control”.
- Keep a record or **food diary** and note reasons why you ate:. Did you eat because you were hungry, or was it because you were bored, depressed, at a special event.
- **Wait out cravings**. Get your mind on something else. Take a walk, read a book, start that project you have been putting off. Drink water. We often confuse thirst for hunger. If you are still craving something after waiting 20 min, most likely it is true hunger and you should eat something good for you. If you decide to eat what you are craving, do it on a small scale.
- Cut back on **portion sizes**. Find out what a serving size really is.
- Cut back on **fat and alcohol**. Fat and alcohol are both very dense in calories.
 - Fat: 9 calories per gram
 - Alcohol: 7 calories per gram
 - Protein: 4 calories per gram
 - Carbohydrates: 4 calories per gram



- **Increase your activity** as tolerated. Even a relaxed walk can make a difference in how you feel, in your blood sugars, and your weight.
- Explore your **emotional feelings** involving food. Identify some other ways to deal with these feelings that doesn't involve food.
- Join a **support group**, such as: Weight Watchers, TOPS, Overeater's Anonymous or find a supportive person or buddy to help you.



Rules of thumb:

- Eat 10 calories a day for every pound you want to weigh. For example: if you want to weigh 150 pounds, you should eat about 1500 calories.
- If you want to loose or gain weight, choose a **realistic target weight**.
- About 50% of your calorie intake should be **carbohydrates**. That leaves 50% from a combination of fat and protein.

What About Alcohol?

Can I Drink Alcohol?

- Alcohol can **interact** with your diabetic medication. Check with your provider or pharmacist. If you are allowed to drink alcohol, drink in moderation.
- Alcohol may be added in **moderation**. Drink 1 - 2 drinks when: your blood sugars are well controlled and you are eating food at the same time.



What Happens When I Drink Alcohol?

- After drinking alcohol, blood sugar may rise and then fall. This results in low blood sugars or **hypoglycemia**. This response can occur up to 12 hours **after** your last drink.
- Symptoms of low blood sugar can be **similar to being drunk**. It is important to wear medical identification.
- Alcohol has calories and can cause **weight gain** (7 calories per gram).
- Alcohol may **cause or aggravate** ulcers, pancreatitis, liver disease, vitamin deficiencies, and diabetic neuropathy.

If you choose to drink, check with your dietitian on how to include it in your meal plan and be sure to discuss it with your doctor.

Table Of Alcoholic Beverages And Carbohydrate Content

Beverage	Fluid ounce	Calories	Carbohydrates(grams)
Beer - regular	12	151	13
Beer - light	12	112	5
Brandy	1	73	trace
Highball	8	166	trace
Wine - table	3.5	87	trace

Notes:

Exercise Principles

Why should I exercise?

Regular exercise 3-4 times per week or more can

- Lower blood sugar
- Help you lose weight
- Increase good cholesterol, reduce stress
- Improve the ability of the muscles to respond to insulin, which helps more glucose get into the cells
- Lower blood pressure
- Help reduce your risk for heart disease



What precautions should I take?

Before you start an exercise program discuss it with your doctor, to be safe and not cause damage.

Do not exercise when your blood sugar is greater than 250 and you have ketones in your urine. Prevent Hypoglycemia(Low Blood Sugar): Hypoglycemia is a potential problem and can occur up to 24 hours after exercise.

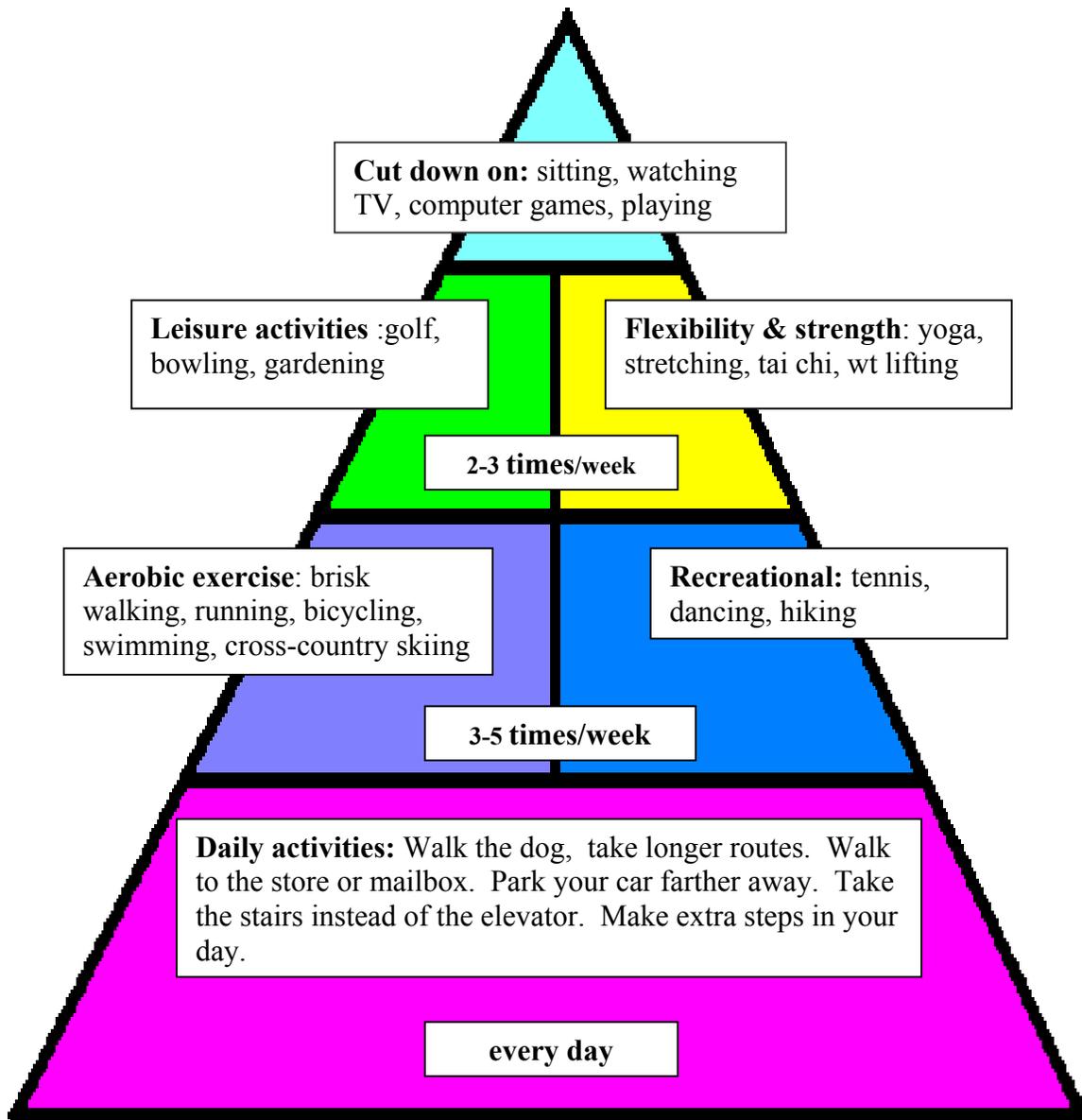
- Monitor your blood sugars before and after exercise. This is most important if you take diabetic pills or insulin.
- You may need to decrease your insulin or increase your carbohydrates for prolonged or strenuous exercise.
- Take extra emergency sugar and/or food with you.
- Avoid exercising during peak insulin action.
- Don't inject insulin into thigh or upper arm before exercising
- Wear medic alert identification.
- People with retinopathy should not use weights.

How can I get started?

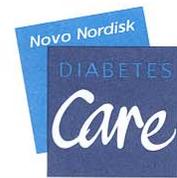
Start slowly. Walking or swimming is good exercises. Work up to more difficult exercises, and don't overdo it.

Do something you like. Make it a habit. Do it every day. Reward yourself. Make it fun. Get a friend to accompany you for safety and motivation.

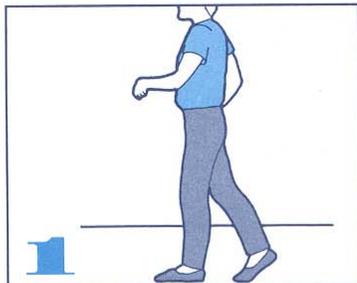
Exercise Pyramid



Leg Exercises for People with Diabetes



People with diabetes are more likely than others to develop problems in the legs and feet. Daily exercise and not smoking can help prevent serious damage.



1
Walking: Take a brisk daily walk of 1/2 - 1 hour. Try to increase the distance every day.



2
Staircase exercise: Walk briskly up a flight of stairs using only the balls of the feet.



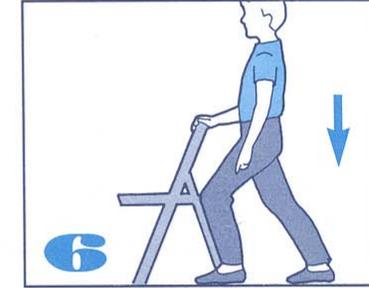
3
Stretching the calf muscles: Lean with the palms of your hands against a wall. Keep your feet some distance away, the heels firmly on the floor. Bend your arms 10 times, keeping your back and legs straight.



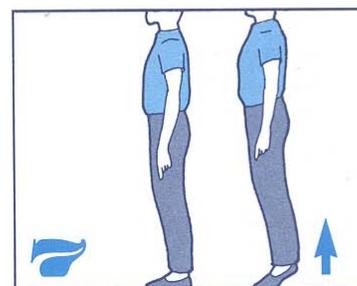
4
Chair exercise: Sit down on a chair and raise yourself up 10 times keeping your arms crossed.



5
Tiptoe exercise: Hold on to a chair and raise and lower yourself on the toes of one foot, then the other.



6
Leg bends: Hold chair. Put one foot forward as shown and lower body straight down, keeping both feet on floor. Raise and lower 10 times. Change legs.



7
Heel raising: Get up on your toes and then down on your heels, about 20 times. Also try putting your whole weight first on one leg and then on the other.



8
Leg sweeps: Stand with one leg slightly raised, on a book for example. While holding on to a chair or table swing the other leg back and forth 10 times. Change to the other leg and repeat.



9
Wave your feet: Sit down on the floor and lean backwards. Shake your feet until they are relaxed and warm.

For best results - walk or exercise every day

Reprinted with permission



a Johnson & Johnson company

Foot Care for People with Diabetes



People with diabetes have to take special care of their feet.



1 Wash your feet daily with lukewarm water and soap.



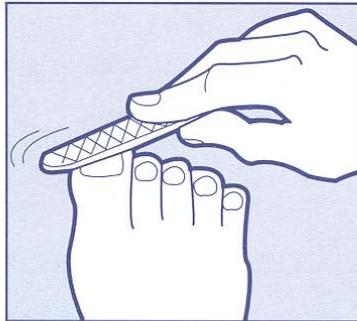
2 Dry your feet well, especially between the toes.



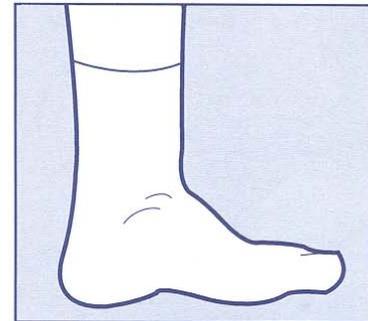
3 Keep the skin supple with a moisturizing lotion, but do not apply it between the toes.



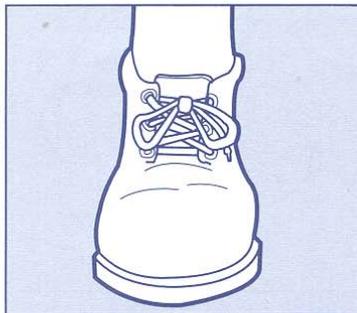
4 Check your feet for blisters, cuts or sores. Tell your doctor if you find something wrong.



5 Use emery board to shape toenails even with ends of your toes.



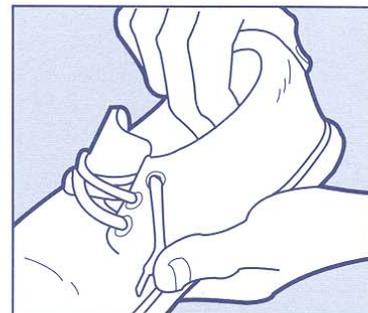
6 Change daily into clean, soft socks or stockings, not too big or too small.



7 Keep your feet warm and dry. Preferably wear special padded socks and always wear shoes that fit well.



8 Never walk barefoot indoors or outdoors.

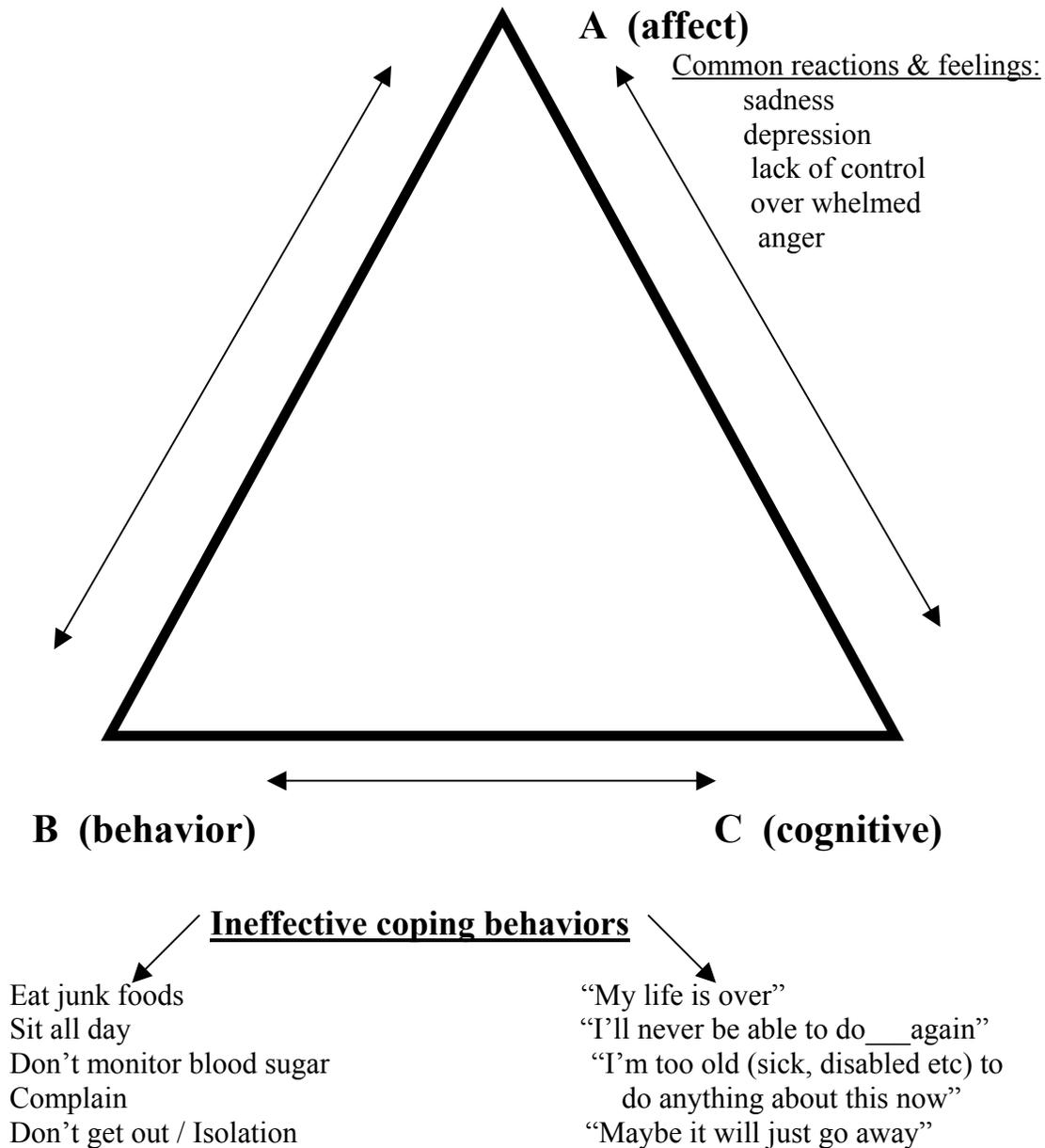


9 Examine your shoes every day for cracks, pebbles, nails or anything that could hurt your feet.

**Take good care of your feet - and use them.
A brisk walk every day stimulates the circulation.**

Reprinted with Permission

Making the Mind-Body Connection



Goal Setting

To get what you want out of life, you will want to set goals. Goals tell you what, how much, and when.

Example:

I will walk (what)
One mile (how much)
Tuesday, Thursday, and Saturday (when)



A well stated goal is easier to reach!!!

1. What part of living with diabetes is hardest for you?

2. What are your possible goals related to living with diabetes?

3. Pick one goal that you want to achieve over the next 1-3 months.

My Goal Is: _____

4. How will achieving this goal affect your health or the quality of your life?

5. What are some of the foreseeable problems that might keep you from achieving this goal?

6. What are some ways you can overcome these problems?

7. Are their family or friends that can help?

8. How will you keep track of progress towards your goal?

9. What will you do to reward yourself for achieving your goal?

Copy This Page

Medication Tips

Keep a current list of your medications. See the medication list following: Know what your medications are, why you are taking them, how to take them, and what to expect from them (both good and bad effects). Include any over-the-counter (OTC) or herbal medications that you may also be taking.



Take this list with you to each visit at the VA hospital. Do **not** assume your doctor or other health care providers are aware of ALL of your current medications.

Ask your provider or pharmacist for help to simplify your medication schedule. You should know what medications you can take together, and which can be taken with food.

Some medications can affect your blood sugar medications OR can directly affect your blood sugars. Many over the counter or herbal products can also affect your blood sugars and interfere with your medications. Do not take any other pills or remedies without consulting your provider or pharmacist.

Use a pillbox (often called a MEDISET™) as a 7-day reminder of what and when to take medications, and when you need to reorder them.

If you are visually impaired or have any other disabilities (i.e. recent stroke, amputations, and hand tremors) that would make it difficult for you to use standard equipment, please alert your health care provider. The VA has diabetic educators and low vision and rehab specialist who can help you with special equipment or other resources.

If you are unsure about a medication **Ask!**



Ordering renewals and refills

Your prescriptions will automatically expire each year. You will need to call Telephone Advice Line to have your doctor **renew** them. Try to do this at your regular appointments with your provider or send a letter.

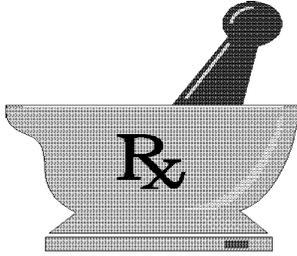
PVAMC encourages you to get your **refills** mailed. Send in the slips that you receive with your order OR call the automated refill line or Telephone Care.

Allow at least **2-3 weeks** for processing and delivery.



Do Not Let Your Medications Run Out.

Medication List			
Drug/Medication or Over-the-Counter Pill or Herbal Product Ex: Digoxin .125mg	How I take it Ex: 2 pills twice day	When I take it Ex: 6am and 6pm	Why I take it Ex: for my heart
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			



Important Things To Remember If You Are Taking These Diabetes Medicines

Metformin

- If you are taking the medication called Metformin (Glucophage©); you need to follow some special instructions.
Surgery or X-Ray Procedures: Do not take Metformin the day of your procedure. Talk to your provider when to restart your Metformin.
Acutely ill (nausea and vomiting): Stop Metformin and contact your provider for further instruction
- A rare, serious condition called lactic acidosis can occur, when your tissues do not get enough oxygen to survive.
To avoid this problem, Metformin should be used with extreme caution for people with kidney or liver disease, severe heart failure, or a history of alcohol abuse. It is important to tell your doctor if you have any of these conditions. In these cases, your provider may decide that Metformin is not the best drug for you.

Acarbose

- If your sugars go below 100mg/dl while on this medication, you need to treat your low blood sugar with a “simple” (dextrose, lactose, glucose) sugar source (i.e. orange juice, DEX4 tabs, milk) because this medication will prevent “complex” sugars (sucrose) from being absorbed (i.e. table sugar, candy bars)

Rosiglitazone

- When you start taking this medication, you will have to get a routine blood test. This test will tell us how your liver is working.
- By repeating this test, your provider can watch for any changes in liver function tests
- It is **very** important to get these lab tests regularly. You may be taken off this medication if these lab tests are not drawn on a consistent basis. You also will not receive any refills on this medication until you get your blood work done.
In rare cases this medication may be associated with serious liver problems.
You need to **immediately** report any type of nausea, vomiting, stomach pain, lack of appetite, fatigue, dark urine, or yellowing of the skin. These may be signs of a serious liver problem

Insulin:

- If you are on insulin, and your blood sugars go too high for no reason, check your injection sites for abnormal signs such as scarring, or changes in skin. Also, consider changing your insulin bottle, if it has been open too long, has been contaminated or exposed to heat or cold. The insulin may have gone bad.
- If you have trouble seeing the numbers on the syringe, there is a type of magnifying glass called a Magni-Guide™ that may help you read the insulin marking on the syringe more easily.
- Always have emergency sugar tabs available and wear a medic alert™ ID.



Instructions For Lab And Procedures From Diabetes And Endocrine Clinic

Are there different ways to prepare for a lab test?

Yes. There are two types of preparations for lab tests. There is a fasting lab test and a non-fasting lab test. Be sure you are aware of which kind of preparation you need to do for your lab test.

What do I do for a fasting lab test?

1. Eat your last food or beverage (except water) by 10 p.m. the night before your appointment.
2. You may have water to drink at anytime,
3. Bring your diabetes medication (insulin or pills) to take after your blood has been drawn.
4. Unless otherwise advised, you may take other early morning medicines.
5. Bring a sack breakfast or plan to buy breakfast in the canteen and bring back to the area.

What do I do for a non-fasting lab?

1. Eat and take medications as usual.
2. Remember the time you finish the last meal or food before the lab is drawn.
3. Remember what food you ate.

What do I do to prepare for procedures?

1. Ask the person who is setting up the procedure what you need to do about your diabetic medications.
2. This is especially important when you need to fast for the procedure.

**PLEASE
Be in the clinic area by the time your appointment is scheduled**

Sharps Disposal Information

Oregon and Washington law states that you cannot throw sharps (needles, lancets, etc) into the regular trash. They must be disposed of in special “**sharps containers**”. These are available where diabetic supplies are sold.

There is a maximum penalty under law for a fine of up to \$10,000 per day of violation.

Even if you do not use insulin, you must have a **sharps container** to dispose of lancets used for testing.

The VA does NOT provide containers OR dispose of containers.

“Sharps containers” may also be used to dispose of: syringes/needles, lancet devices, used glucose test strips, any item that may be blood soiled from testing, such as cotton balls, Kleenex, alcohol wipes, etc.

If I live in Portland, how to I dispose of my sharps container?

Contact Metro for disposal information. Metro has a recycling program available for very low cost. Call 505-234-3000. There is a \$5 one time fee, for an approved 1 gallon or 1 quart sharps container. Each time you bring in a full container to the hazardous waste facility for disposal, you will receive a new container. www.multnomah.lib.or.us/metro/rem/hazw/sharps.html

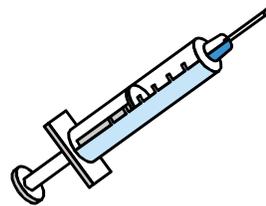
If I live in Vancouver, how do I dispose of my sharps container?

Contact Waste Management at: 360-737-2425. In this program, \$5 per sharps container is charged when the company picks up with your regular garbage. They will need 24-hour notice that you are requesting this service. If you would like the company to provide the sharps container and dispose of the old container there is a \$12.50 fee. Waste Connection of Clark county does **not** provide any sharps services.

Where can I get a sharps container?

Most local pharmacies sell sharps containers. The following pharmacies in the Portland and Vancouver area will sell AND dispose of sharps containers for low or no cost:

- Long’s Drugs
- Health Tek Pharmacy
- Hi-School Pharmacy
- Fred Meyer
- Marsh Medical Services
- Cent Wise Drugs



Diabetes Self-Management Classes

How Can I Learn More About Taking Care of My Diabetes?

Diabetes Self-Management class is a program that can help you manage your diabetes. It is a 4-day series of interactive class sessions that is held from 12-3pm on Tuesday and Wednesday, usually the 2nd and 3rd week of the month. It is held in the auditorium of the Portland VA Medical Center. Friends, family and caregivers are encouraged to attend. Bring a lunch or snack. Pop is provided.

You may choose one class, or more. You can split up the dates, however, we encourage you to complete all four days.

What Is Included In Each Class?

Week 1 –Tuesday:

- Introduction to diabetes
- Meal planning, including timing, portion sizes, carbohydrate counting and reading food labels.
- Benefits of exercise, guidelines for exercising, how to get started and keep motivated.

Week 1 --Wednesday:

- Diagnosis and treatment of diabetes
- CBG monitoring and record keeping
- Identification and treatment of hypoglycemia.
- Coping with diabetes
- Goal setting.

Week 2 –Tuesday

- Meal planning continued including heart-healthy diet education and use of sugar substitutes
- Sick day care
- Use of alcohol
- Foot, skin, and dental care.
- Complication of diabetes, including erectile dysfunction

Week 2 – Wednesday

- Medications, vitamins, and herbs.
- Pattern management and problem solving.

Call the telephone advice line to enroll. 1-888-233-8305

ADA - American Diabetes Association

**380 SE Spokane Street #110
Portland, Oregon 97202**

**For Your Answers Dial
1-800-342-2383**

web site: www.diabetes.org

You just dial the American Diabetes Association and the trained staff and volunteers will answer your questions, provide current information, and serve as guide to community resources. The staff and volunteers are not doctors, nurses, or dietitians. They are trained to answer your general questions, make referrals, and send you free information.

The action line is available Monday through Friday during business hours.

Easy access to information about diabetes, risk factors, preventive measures.

Services include:

- ❖ Hundreds of ADA publications
- ❖ Patient education programs
- ❖ Professional education programs
- ❖ Support groups
- ❖ Camping and other youth services
- ❖ Public awareness programs
- ❖ Speakers bureau
- ❖ Referral to medical and community resources.

Other Resources

American Association Of Diabetes
Educators
1-800-TEAM-UP-4
www.aadenet.org

American Dietetic Association National
Center
For Nutrition And Dietetics
1-800-366-1655
www.eatright.org

Juvenile Diabetes Foundation International
1-800-223-1138
www.jdfcure.com

National Diabetes Information
Clearinghouse
301-654-3327
www.niddk.nih.gov

International Diabetes Center (Idc)
612-993-3393
www.idcdiabetes.org

Joslin Diabetes Center
1-800-JOSLIN-1
www.joslin.org

International Diabetic Athletes Association
(Idaa)
1-800-898-4322
www.diabetes-exercise.org

Daily Care-The Magazine For Diabetes
1-888-777-1003
www.dailycareonline.com

National Institutes Of Health,
National Institute Of Diabetes And
Digestive And Kidney Diseases
www.niddk.nih.gov/

Novo-Nordisk
1-800-727-6500
www.novo-nordisk.com

Accu-Chek
1-800-858-8072
www.Accu-Chek.com

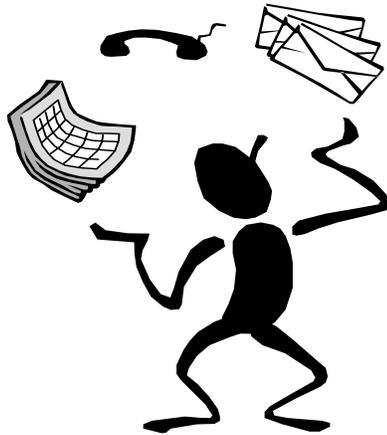
Medic Alert
1-800-432-5378
www.medicalert.org

Cascade Alliance Telephone Program

New National Toll Free Number:

1 (888) 233-8305

New Hours: 24 Hours/Day 7 Days/Week



Old TLC number is still usable

503-273-5300

1-360-696-4061 ext. 55300

1-800-949-1004 ext. 55300

Primary Care Open Access scheduling number:

503-220-3494

1-360-696-4061 ext. 53494

1-800-949-1004 ext. 53494

Automated Pharmacy Refill Line

503-273-5201

1-360-696-4061 ext.55201

1-800-949-1004 ext.55201

Portland VA Medical Center
3710 SW US Veterans Hospital Road

PO BOX 1034

Portland, Oregon 97207-1034

503-220-8262

Approved by the Patient and Family Education Subcommittee
Portland VA Medical Center
April, 2002
1st edition