**INSULIN CALCULATION WORKSHEET and DOCUMENTATION**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments: action taken, ketones, etc.** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carb grams** |  | **Insulin for carbs** |
|  |  |  |

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carbs eaten** |  | **Insulin for carbs** |
|  |  |  |

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carbs eaten** |  | **Insulin for carbs** |
|  |  |  |

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carbs eaten** |  | **Insulin for carbs** |
|  |  |  |

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carbs eaten** |  | **Insulin for carbs** |
|  |  |  |

| **DATE** | **TIME** | **Blood Sugar** | **CGM reading** | **Insulin correction** | **Total Units Insulin** | **Parent called** | **Supervising staff signature** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
| **Carbs eaten** |  | **Insulin for carbs** |
|  |  |  |



**Staff Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_**

**Staff Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_**

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