

**DIABETES TRACKER**

MEASURE	FREQUENCY*	WRITE DATE AND/OR VALUE OF YOUR RESULT			
<b>Blood Pressure (goal &lt;130/80)</b>	Every 3 months				
<b>Foot Exam</b>	Every 3 months				
<b>Glycosylated Hemoglobin (HbA1c) [Goal &lt;7%]</b>	Every 6 months				
<b>Eye Exam</b>	Every Year				
<b>Urine Microalbumin to Creatinine ratio</b>	Every Year				
<b>Cholesterol</b>	Every Year	Total:	LDL:	HDL:	Trig:

\*The Frequency of Tests May Vary Based On Your Unique Situation or Your Physician's Discretion