HAROLD HAMM OKLAHOMA DIABETES CENTER - Telephone: (918) 619-4803 - Fax: (918) 619-4801 **Return Phone Number: Patient Name:** DOB: Basal Rate Notes Insulin: Carb Ratio **Correction Factor** Date: 12am 2am 7am 8am 9am |10am |11am |12pm |1pm |2pm |3pm |4pm |5pm |6pm |7pm |8pm |9pm |10pm |11pm Glucose Carbs Meal Bolus High BS Bolus Exercise (Min) Urine Ketones Set Change Date: 12am 2am 10am 11am 12pm 1pm 2pm 3pm 4pm 5pm 10pm 11pm 6am 7am 8am 9am 6pm 7pm 8pm Glucose Carbs Meal Bolus High BS Bolus Exercise (Min) Urine Ketones Set Change Date: 12am 2am 6am 7am 8am 9am 10am | 11am | 12pm | 1pm | 2pm | 3pm 4pm 5pm 6pm 7pm 8pm 9pm 10pm | 11pm Glucose Carbs Meal Bolus High BS Bolus Exercise (Min) Urine Ketones Set Change Date: 10am 11am 12pm 1pm 2pm 10pm 11pm 12am 2am 6am 7am 8am 9am 3pm 4pm 5pm 6pm 7pm 8pm 9pm Glucose Carbs Meal Bolus High BS Bolus Exercise (Min) Urine Ketones Set Change