



# LONGMONT UNITED HOSPITAL

## Teach-Back Sheet: Diabetes

Patient : \_\_\_\_\_ Date: \_\_\_\_\_

It is very important that you understand how to take care of yourself once you get home! We want to teach you the *most important parts* of your care. Please take time to review the following information with your nurses.

Question & Answer
<p><b>1. What is your target blood sugar and how often do you need to test?</b></p> <ul style="list-style-type: none"><li>• Blood sugar target is 70-180</li><li>• <u>If you are controlled with diet and exercise</u>: test 3 times a week. Test before and 2 hours after any meal.</li><li>• <u>If you are controlled on diabetes pills</u>: test two times a day, before and 2 hours after any meal.</li><li>• <u>If you are on insulin</u>: test every day before each meal and once or two times a week 2 hours after a meal.</li><li>• Be sure to write your numbers in a log.</li></ul> <p>Your Questions:</p>
<p><b>2. How will you feel if your blood sugar is too high? Or too low? How would you treat it?</b></p> <ul style="list-style-type: none"><li>• <u>Too high</u>: Thirsty, hungry, blurred vision, going to the bathroom often, feeling confused, hard to wake up. If your blood sugar stays high for several days, let your doctor know.</li><li>• <u>Too low</u>: Sweaty, weak, dizzy, feeling confused, hard to wake up. Treat with a carb choice (1/2 cup fruit juice), and then once you feel better, follow it with a snack or meal.</li></ul> <p>Your Questions:</p>
<p><b>3. Tell us what a healthy plate would look like.</b></p> <ul style="list-style-type: none"><li>• 1/2 non-starchy vegetables, 1/4 protein or meat, 1/4 carbohydrate or starch. You can add fruit or milk on the side.</li></ul> <p><b>Carbohydrates affect the blood sugar the most with diabetes. Name a carbohydrate.</b></p> <ul style="list-style-type: none"><li>• Bread, cereal, grains, rice, fruit, milk, sugars, potatoes, green peas, corn.</li></ul> <p>Your Questions:</p>
<p><b>4. When should you call your doctor?</b></p> <ul style="list-style-type: none"><li>• Blood sugars out of target range (less than 70 or over 180) and you don't know how to correct it.</li><li>• If you are sick for 2 days or have a fever for more than 1 day.</li><li>• If you have a sore that isn't getting better.</li><li>• If you cannot fill your prescriptions.</li></ul> <p>Your Questions:</p>



# LONGMONT UNITED HOSPITAL

## Teach-Back Sheet: Medications

Patient: \_\_\_\_\_ Date: \_\_\_\_\_

It is very important that you understand how to take care of yourself once you get home! We want to teach you the *most important parts* of your care. Please take time to review the following information with your nurses.

Prescribed Medications: \_\_\_\_\_

Your nurse will give you a handout (called a Care Note) on your medications.

Question & Answer
<p>1. Tell me how you will take your medication at home.</p> <ul style="list-style-type: none"><li>• What times will you take your medication?</li><li>• Will you take it before or with food?</li></ul> <p>Your Questions:</p>
<p>2. Tell me why you take the medication.</p> <ul style="list-style-type: none"><li>• Purpose</li></ul> <p>Your Questions:</p>
<p>3. What side effects may you have while taking this medication? (See written information)</p> <ul style="list-style-type: none"><li>• Expected side effects:</li><li>• Unexpected side effects (call the doctor if you have these):</li></ul> <p>Your Questions:</p>
<p>4. What should you report to the doctor?</p> <ul style="list-style-type: none"><li>• If you can't fill your prescription.</li><li>• If any of the side effects are concerning to you.</li><li>• If you have a question about how you should take the medication.</li></ul> <p>Your Questions:</p>



# LONGMONT UNITED HOSPITAL

## Teach-Back Sheet: Heart Failure

Patient : \_\_\_\_\_ Date: \_\_\_\_\_

It is very important that you understand how to take care of yourself once you get home! We want to teach you the *most important parts* of your care. Please take time to review the following information with your nurses.

Question & Answer
<p><b>1. Tell me how you will take your water pill (diuretic). Why is it important?</b></p> <ul style="list-style-type: none"><li>• Every day according to your doctor's orders.</li><li>• More fluid in the body makes it harder for the heart to pump and makes the symptoms worse.</li></ul> <p>Your Questions:</p>
<p><b>2. Tell me how you will weigh yourself at home and why it is so important.</b></p> <ul style="list-style-type: none"><li>• At the same time every day. Write the weight down on a chart or paper.</li><li>• This will tell you if you're holding too much water and need to call the doctor.</li><li>• Call the doctor if you gain 2 pounds or more in a day or 3-5 pounds in a week. The doctor may need to adjust your medications.</li></ul> <p>Your Questions:</p>
<p><b>3. Why is it important to eat less salt when you have Heart Failure?</b></p> <ul style="list-style-type: none"><li>• Salt makes the body hold onto water.</li><li>• More fluid in the body makes it harder for the heart to pump.</li></ul> <p>Your Questions:</p>
<p><b>4. When should you call your doctor?</b></p> <ul style="list-style-type: none"><li>• Weight gain (as listed in #2)</li><li>• Swelling in your feet (especially if it's hard to put your shoes on)</li><li>• Trouble breathing</li><li>• Dizziness</li><li>• Chest pain</li><li>• Feeling more tired than usual</li><li>• If your symptoms get worse</li></ul> <p>Your Questions:</p>



PATIENT LABEL  
PLACE WITHIN BOUNDARIES FOR  
SCANNING PURPOSES

<b>Diabetes:</b> <b>Patient Assessment &amp; Teaching Sheet</b>	Barriers to Learning: <input type="checkbox"/> Non-English speaking <input type="checkbox"/> Low literacy <input type="checkbox"/> Unable to read <input type="checkbox"/> Visual <input type="checkbox"/> Hearing <input type="checkbox"/> None <input type="checkbox"/> Other _____
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Patient Assessment	Date	Initial	Notes: Follow up?
Is Diabetes a new diagnosis for you? <input type="checkbox"/> Yes <input type="checkbox"/> Not sure <input type="checkbox"/> No → What type do you have? <input type="checkbox"/> Two <input type="checkbox"/> One <input type="checkbox"/> Other _____			
Monitor: Do you have a glucose meter? <input type="checkbox"/> No <input type="checkbox"/> Yes When do you test? _____			
Meals: Do you count carbs? <input type="checkbox"/> No <input type="checkbox"/> Sometimes <input type="checkbox"/> Yes If no or sometimes, page dietician for a nutrition evaluation if there is a knowledge deficit.			
Movement: Do you exercise? <input type="checkbox"/> No <input type="checkbox"/> Yes: Problems? _____			
Medications: Are you taking diabetes medication? <input type="checkbox"/> No DM meds <input type="checkbox"/> Not sure Pills: <input type="checkbox"/> No <input type="checkbox"/> Yes → What pills? _____ Insulin: <input type="checkbox"/> No <input type="checkbox"/> Yes → What insulin? _____ <input type="checkbox"/> Not sure Who gives you your shots? <input type="checkbox"/> I do <input type="checkbox"/> Someone else			
MD: Who do you go to for your diabetes care? Name: _____ <input type="checkbox"/> Don't have a doctor for diabetes			

**Diabetes Teaching Needs**

*Special diabetes teaching needs:*  Meter,  Insulin  Outpatient Referral:  Diabetes Resource Team Contacted- 303-944-7153

Patient Teaching (Can patient just mention basics?)	Persons Taught	Comments (needs review, unable, refused, etc.)	Date/Initial
Q: How does diabetes affect your blood sugar? A: Blood sugar levels can go too high or low.	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other		
Q: What can you do to manage diabetes? A: (mention) Eat right; Exercise; Meds; Check BS; MD visits; Education	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other		
Q: When should you test your blood sugar? A: If Oral meds: fasting & 2 hours after one meal; If Insulin: before meals and bedtime	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other		
<b>New to Insulin or Insulin Pen Instruction</b> <input type="checkbox"/> RN to obtain Insulin Getting Started Kit <input type="checkbox"/> RN to obtain Insulin Pen Getting Started Kit			
Insulin return demo	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other		
Insulin Safety Needle & lancet disposal. Hypoglycemia – what to do	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Other		

DVDs Watched	Date	Initial	Written Material	Date	Initial
Basic Skills for Controlling DM <input type="checkbox"/> Eng <input type="checkbox"/> Span			Type 2 Diabetes Packet <input type="checkbox"/> Eng <input type="checkbox"/> Span		
Carbohydrate Counting <input type="checkbox"/> Eng <input type="checkbox"/> Span			Other: _____ <input type="checkbox"/> Eng <input type="checkbox"/> Span		
DM & Heart Disease <input type="checkbox"/> Eng <input type="checkbox"/> Span					
Other _____ <input type="checkbox"/> Eng <input type="checkbox"/> Span					

RN: initial _____   Signature _____	RN: initial _____   Signature _____
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## Diabetes Discharge Instructions

Diabetes:  Type 2  Type 1  Other \_\_\_\_\_

Medications: See Discharge Medication Sheet.

Monitoring: Check finger stick blood sugar everyday as marked below:

Breakfast		Lunch		Dinner		Bedtime	Other
<input type="checkbox"/> Fasting 70-110	<input type="checkbox"/> 2 hrs. after under 140	<input type="checkbox"/> Before 70-120	<input type="checkbox"/> 2 hrs. after under 140	<input type="checkbox"/> Before 70-120	<input type="checkbox"/> 2 hrs. after under 140	<input type="checkbox"/> 100-140	<input type="checkbox"/>

• If you are not reaching your blood sugar goals within 2 weeks, please contact your doctor.

Meals: follow your meal plan

One carbohydrate choice (15 grams of carbohydrate)			
Breakfast	Lunch	Dinner	Other
3-4 Carb Choices (45-60 grams)	3-4 Carb Choices (45-60 grams)	3-4 Carb Choices (45-60 grams)	

MD: Follow up appointment – see Discharge Instructions.

• For more education, your doctor can refer you to Outpatient Diabetes Education – ask for a referral from your doctor.

Movement/Exercise: Exercise helps to lower blood sugar. Ask your doctor and/or diabetes team about an exercise plan.

Insulin Pump Users: Remember to bring in pump supplies for at least two changes for any future hospitalizations.

**Manage your diabetes successfully at home. (Save this for your wallet or refrigerator.)**

<p>Recognize and treat low blood sugar <u>early</u> to prevent severe symptoms of confusion, passing out or convulsions.</p> <p>Mild Hypoglycemia (low blood sugar) Signs and Symptoms:</p> <ul style="list-style-type: none"> <li>• Feeling shaky, weak</li> <li>• Feeling very tired</li> <li>• Feeling very hungry or even nauseated</li> <li>• Headache</li> <li>• Nervous</li> <li>• Breaking out in cold sweat</li> </ul>	<p><b>Sick Day Rules:</b></p> <ul style="list-style-type: none"> <li>• Check your blood sugar more often than usual.</li> <li>• Always take your diabetes medication. Blood sugars usually go up with an illness.</li> <li>• Drink plenty of non-sugar fluids.</li> <li>• Keep emergency numbers nearby.</li> <li>• Call your doctor with any concerns.</li> </ul>
<p>Best treatment for low blood sugar is to drink 15 grams of carbohydrates, such as:</p> <ul style="list-style-type: none"> <li>• 4 oz. fruit juice</li> <li>• 4 oz. regular soda</li> <li>• 8 oz. low fat milk</li> <li>• 8 oz. sports drink, etc.</li> </ul>	<p><b>Instruct someone what to do if they find you unconscious:</b></p> <p><b>CALL 911</b></p> <ul style="list-style-type: none"> <li>• Call your doctor if your blood sugars are over 200 for 2 days OR low (under 70).</li> </ul>

**LUH Diabetes Support Group is open and free to all!  
Call 303.485.4195 for information!**

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Discharge Nurse Signature

