

Name: \_\_\_\_\_

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

### Today's video or telephone clinic menu

Please fill in the grid below and so we can discuss the topics that are important to you at your clinic appointment.

Please fill the first page prior to your time slot while you are downloading your devices. You can email it to: [tpa-tr.childrensdiabetesnursespah@nhs.net](mailto:tpa-tr.childrensdiabetesnursespah@nhs.net)

My weight today on my home scale	kg	My height today (ask someone to help you with the measuring tape)	cm
I have downloaded all my devices (Blood glucose meter, pump, Libre or CGM)	Yes	I could not download my devices but have completed a blood glucose diary	Yes
	I had a problem		
<b>What would you like to discuss today?</b>			
Blood glucose monitoring		Low or high blood glucose levels	Eating healthy and weight management
Carbohydrate counting		COVID-19 and my diabetes	Giving my injections or changing my cannula site
Stress/ low mood		Illness management	School and my care-when I return after the lock-down
Sports and exercise		Travel and holidays	Recent blood tests and urine results
Driving		Relationships and family planning	Insulin storage or any sharp disposal questions
Alcohol and other substances		Diabetes related technology (e.g. insulin pumps or CGM)	Reading and making sense of my downloads
Other:			
Just here for a check-up. I don't need to discuss anything specific today.			
<b>Please note: The dietitian will contact you after your virtual clinic.</b>			

We might not be able to discuss all of your topics today but will do our best. If we run short of time we will arrange a telephone or video call to discuss the rest.



## Set your goals

Write down the goals that you would like to work on until your next clinic appointment.

**Goal 1**

**Goal 2**

**Goal 3**

