

Section 5.1

1. Diabetes is a _____ disorder of the _____ system.

2. What is a metabolic disease?

3. What is the endocrine system?

4. Diabetes impairs the body's ability to produce or use _____.

5. Is there a cure for diabetes? _____

6. What are the two most common types of diabetes?

7. What is insulin? _____

8. What is a hormone?

9. Insulin is produced by the _____ in the

_____.

10. Insulin is how sugar (glucose) moves from _____
to _____.

11. What is the body's main source of energy?

12. How is sugar (glucose) circulated throughout the body?

13. Where does sugar (glucose) need to be for the body to use it as energy?

14. Can you function and live without insulin? _____

The two most common types of diabetes are Type 1 and Type 2. There are many similarities and differences between Type 1 and Type 2. Label the following qualities either Type 1, Type 2, or Both.

1. Usual age of onset is older than 40 years. _____
2. Risks for developing include: Injury to the pancreas and hereditary.

3. Affects about 5% of all people with diabetes.

4. Insulin does not work well or not enough insulin is produced.

5. Usual age of onset is younger than 40 years.

6. Treatment includes proper nutrition/exercise, optional insulin, and optional oral drugs. _____
7. Affects about 95% of all people with diabetes.

8. Risks for development include obesity, inactivity, and heredity.

9. Treatment includes proper nutrition/exercise and necessary insulin.

10. No insulin is produced by the body. _____
11. There is no cure. _____

Section 5.2

1. Managing diabetes is important because it improves the client's _____ and helps prevent or slow _____.
2. What are the three key components to treating diabetes?

3. What are the three goals of meal planning for the person with diabetes?

4. What are the three main sources of calories in the diet?

5. Which of the three sources of calories affect blood sugar the most?

6. What are the five types of food that should go on the client's plate?

7. The person with diabetes should eat a _____ diet.
8. Balancing a variety of choices, portion control, and predictable meal times are _____ for people with diabetes, BUT the recommended intake is _____ as people without diabetes.
9. What are some examples of non-starchy vegetables?

10. Look for _____!
11. Starches are also known as _____.
12. What are some examples of starches?

13. You want to look for what when selecting starches? _____
14. The more _____ the better?
15. In addition to meat, what are some other examples of protein?

16. What is the best choice when selecting fruit? _____
17. Dairy choices should be _____ or _____ fat.

18. What is important to check when selecting dairy, especially yogurt?

19. When exercise regimen changes, what happens to blood sugar?

20. What adjustments should be considered whenever physical exercise changes?

21. Goals of a good exercise plan include?

22. How much exercise should the client aim for each week? _____

23. What kind of exercise should they be doing?

24. Medications that treat diabetes are available in what three forms?

25. Is insulin available in an oral pill form? _____

26. Oral medications can treat _____ diabetes only.

27. Oral diabetes medications work on which five body systems?

28. What medication is always required for type 1 diabetics? _____

29. What route is insulin injected? _____

There are numerous types of insulin listed below. Label them according to the type: rapid acting, short acting, intermediate acting, or long acting.

1. Humulin NPH _____

2. Lantis _____

3. Humalog _____

4. Novolin NPH _____

5. Novolin Regular _____

6. Levamir _____

7. Novolog _____

8. Humalin Regular _____

Responsible monitoring of the diabetes client includes: watching for signs of blood sugar (glucose) control, regular contact with the physician and diabetes education program, ketone testing in type 1 clients, and monitoring for signs of complication from the disease.

1. The main tool for monitoring diabetes is checking _____.
2. Blood sugar testing gives immediate feedback on how the body is responding to _____.
3. How often should the client with diabetes see their physician?

4. Once a year the client should also:

5. Ketone testing is an important part of monitoring for which type of diabetes? _____
6. Ketones are the chemical by product of the body using _____ instead of _____ for energy.
7. When does the body burn fat instead of sugar for energy?

8. Build up of ketones in the blood can lead to what?

9. Ketones build up when there is not enough _____ available and the blood sugar (glucose) is higher then _____.
10. Ketones are checked in what bodily fluid? _____
11. If the ketone result is moderate to large, what should you do?

Section 5.3

1. High blood sugar is also called _____.
2. It occurs when blood sugar is over _____.
3. Other than diabetes, what causes hyperglycemia?

4. What are the three Ps of hyperglycemia?

5. What is Polydipsia? _____

6. What is Polyphagia? _____

7. What is Polyuria? _____

8. In addition to the three Ps what are some other symptoms of current hyperglycemia? _____

9. What are some signs of chronic hyperglycemia?

10. What four things could you see in a client who is developing ketoacidosis?

11. What things can help lower blood sugar that is greater than 200 most of the time?

12. Low blood sugar is called _____.

13. It occurs when blood sugar is _____.

14. Hypoglycemia is caused by what?

15. What are some mild symptoms of hypoglycemia?

16. Blood sugar that is less than 70 is considered *critically low*. To treat we follow the *rule of 15s*. First give _____.
17. Then in _____ we retest the _____.
18. If the blood sugar is still less than 70 we _____.
19. When the blood sugar reading is _____ give a _____.

There will be times when you need additional help caring for the client with diabetes. The following are scenarios when you will need to ask for help to care for the client. Next to each one write who you would call to escalate their care. Either the doctor or 911.

1. Client with type 1 diabetes and blood sugar greater than 240 with moderate to large amounts of ketones in the urine. _____
2. More than one unexplained low blood sugar (glucose) reading in a week. _____
3. Client with type 1 diabetes who has small amounts of ketones in their urine. _____
4. If the client is uncooperative or disoriented for more than 30 minutes with low blood sugars. _____
5. If the client is ill with symptoms of nausea, vomiting, diarrhea, or fever. _____
6. Blood sugar (glucose) levels below 70 more than 2-3 times in a row. _____
7. If the client's blood sugar (glucose) stays under 70 for more than 30 minutes. _____
8. If a client with type 2 diabetes has a blood sugar (glucose) greater than 400. _____
9. If the client is having a seizure or is unconscious. _____
10. Blood glucose levels higher than 300 more than 2-3 days of above 200 most of the time. _____