



BlueCross BlueShield of Western New York

Healthy guidelines for people with diabetes

My target blood sugar range is _____. I check it _____ times a day.

Provider's name: _____ Phone number: _____

Exam/test	How often	Date completed/results					
		Date	Result	Date	Result	Date	Result
Physical exam							
Height/Weight	Each doctor visit						
Foot	Each doctor visit Daily at home						
Blood Pressure	Each doctor visit						
Eye exams		Date	Result	Date	Result	Date	Result
Glaucoma	Once a year						
Retinopathy	Once a year						
Lab tests		Date	Result	Date	Result	Date	Result
A1C blood test	Up to four times a year						
Urine microalbumin	Once a year						
Fasting blood lipid profile	Once a year						
• HDL (good cholesterol)							
• LDL (bad cholesterol)							
• Triglycerides (blood fats)							
Immunizations		Date	Result	Date	Result	Date	Result
Influenza (flu shot) vaccine	Once a year						
Pneumococcal vaccine (pneumonia shot)	<ul style="list-style-type: none"> • > age 65, once • Every five years, if < age 64 when you received your first shot. 						

Member Services: 1-866-231-0847 (TTY 711)

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