

# Qorshaha Cuntada Guri Tagidda

Magaca \_\_\_\_\_ Taariikhda \_\_\_\_\_

## Maalin kaste:

- Qorshayso waqtiyada cuntada caadiga ah iyo cuwaafta
- Xadee cuntooyinka kaarbohaydareet ee dareere ah (tusaalooyin: casiir, cabbitaanno sonkor lagu daray, sharootooyin, malab). Waxaa kuwan loogu talagalay daawaynta gulukooska dhiigga ku yar.

## Ka hor inta aadan cunin ama cabbin waxyaabo leh kaarbohaydareet:

1. **Fiiri** gulukooska dhiigga
2. **Tiri** kaarbyada
3. **Xisaabi** qiyaasta daawada insulin (isticmaal shaxda qiyaasidda)
4. **Isku mud** daawada insulin
5. **Sug** 10 ilaa 15 daqiiqo ka hor inta aadan wax cunin (diiwaangeli)

Kaarbohaydareet dareere ah		Waxyaabaha aan ku beddelan karo kaarbohaydareet dareere ah				Maxaan isticmaali doonaa si aan u daaweeyo gulukooska dhiigga ku yar?	
<b>Waqti / Cunto</b>							
<b>Ficil</b>	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiigcccccccccccccccccc <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha	<input type="checkbox"/> Fiirin gulukoos dhiig <input type="checkbox"/> Daawo Insulin dhakhso u ficil gasha <input type="checkbox"/> Daawo Insulin waqti dheer ficil gasha

## Si aad uga warbixiso gulukooska dhiigga iyo wixii khuseeya isbeddellada qiyaasta daawada insulin:

- Iimayl: [endonurse@seattlechildrens.org](mailto:endonurse@seattlechildrens.org)
- Telefoon: 206-987-2640 (dooro xulashada gulukooska dhiigga)

## Adeegyo Afceliye Bilaash ah

- Isbitaalka gudihisa, weydii kalkaaliyahaaga caafimaadka.
- Isbitaalka dibaddiisa, soo wac Khadka Afcelinta Qoyska (Family Interpreting Line) ee bilaashka ah, 1-866-583-1527. Afceliyaha u sheeg magaca ama khadka gaarka ah ee aad u baahan tahay.



Cuntooyinka la isku daro iyo tirooyinka kaarb ee lagu talinayo

Saacadda							
Tixraaca kaarb							
Cuntada la isku daro iyo tirada kaarb							

# Going Home: Food Plan

Name \_\_\_\_\_ Date \_\_\_\_\_

## Each day:

- Schedule meal and snack times
- Limit liquid carbohydrates (examples: juice, sugar-added beverages, syrups, honey). These are for treating low blood glucoses.

## Before eating or drinking things with carbohydrates:

1. Check blood glucose
2. Count the carbs
3. Calculate insulin dose (use the dosing table)
4. Inject insulin
5. Wait 10 to 15 minutes before eating (log)

Liquid carbohydrates		My alternatives to liquid carbohydrates			What would I use to treat low blood glucose?		
<b>Time / Meal</b>							
<b>Action</b>	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin	<input type="checkbox"/> Blood glucose check <input type="checkbox"/> Fast acting insulin <input type="checkbox"/> Long acting insulin

### To report blood glucose numbers and for insulin dose changes:

- Send a MyChart message with "BG Review" as the subject line
- Phone: 206-987-2640 (select blood glucose option)

### Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



**Suggested food combinations and carb counts**

<b>Time</b>							
<b>Carb reference</b>							
<b>Food combination and carb count</b>							

Seattle Children's offers free interpreter services for patients, family members and legal representatives who are deaf or hard of hearing or speak a language other than English. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201. This handout has been reviewed by clinical staff at Seattle Children's. However, your needs are unique. Before you act or rely upon this information, please talk with your healthcare provider.

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