**Diabetes Awareness** Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1 - About Me**

Name

Birth Year Gender

Diabetes: Y/N Pre-diabetes: Y/N

**2 – My Body Reference Range BMI**

Height cm Optimal: 18.5-24.9

Weight kg High Risk: <18.5 or

BMI kg/m2 > 30

**3 – My Shape Increased Risk**

Waist cm S/E Asian: M >90cm

 F >80cm

All Other: M >102cm

 F >88cm

**4- My Lifestyle Habits (check if yes)**

🞎 Current tobacco use --- if yes, how much: \_\_\_\_\_\_/day

🞎 Physically active > 30 minutes most days of the week

🞎 Daily fruit and vegetable consumption

**5 – My Blood Pressure**

Arm L R Target (circle one)

 mmHg < or = 130/80 mmHg

 mmHg < or = 140/90 mmHg

**6 – My Symptoms**

**7 – My Risk Factors**

🞎 > 40 years old

🞎 History of elevated blood sugar test/or pre-diabetes

🞎 History gestational diabetes and/or baby >9 lbs/ 4.1 kg at birth

🞎 Family history of diabetes (mother, father, siblings, children)

🞎 Aboriginal, Hispanic, South Asian, Asian, African descent

🞎 Heart disease (History of heart attack, stroke, mini-stroke)

🞎 Overweight (BMI >24.9 km/m2)

🞎 Waist circumference

🞎 Blood pressure above target

🞎 Low HDL and/or high triglycerides (if known)

🞎 Hemoglobin A1C >6.0% (if known)

🞎 Sleep apnea or other condition \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 Take medications that can affect blood sugar \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8 – My Diabetes (CANRISK) Risk Score**

|  |  |  |
| --- | --- | --- |
| **Low****<21 points** | **Moderate** **21-32 points** | **High****>32 points** |

**8 – Current Medications (prescription, non-prescription,**

**supplement and natural health remedies)**

**9 – My Plan**

 Follow up with pharmacist, family doctor (circle)

 Other

**10 – Consulting Pharmacist**