ADVANCED HOME CARE

SWEET BALANCE™

Advanced Home Care's *Extraordinary Care™ Program* for Patients with Diabetes.

DAILY BLOOD SUGAR LOG

NAME: _____

Date	BREAKFAST		LUNCH		DINNER		Bedtime	What zone are you in today?
	Before	*After*	*Before*	*After*	*Before*	*After*		

ADVANCED HOME CARE

SWEET BALANCE™

Advanced Home Care's *Extraordinary Care™ Program* for Patients with Diabetes.

DAILY BLOOD SUGAR LOG

NAME: _____

Date	BREAKFAST		LUNCH		DINNER		Bedtime	What zone are you in today?
	Before	*After*	*Before*	*After*	*Before*	*After*		