



Monitor Your ABCs

Take results to your next appointment

| A1C (BLOOD GLUCOSE) | | | | | | | |
|----------------------------|--|--|--|--|--|--|---------|
| Preferred: Less than 7 | | | | | | | My Goal |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |

| BLOOD PRESSURE (BP) | | | | | | | |
|----------------------------|--|--|--|--|--|--|---------|
| Preferred: 130 / 80 | | | | | | | My Goal |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |

| CHOLESTEROL (LDL) | | | | | | | |
|--------------------------|--|--|--|--|--|--|---------|
| Preferred: Less than 100 | | | | | | | My Goal |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |
| Date: | | | | | | | |
| Result: | | | | | | | |

Ask your doctor for your **A1C**, **Blood Pressure** and **Cholesterol** goals, then fill out this chart to help you keep track.