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HERITAGE VALLEY
HEALTH SYSTEM

Heritage Valley Medical Group-Endocrinology

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<u>Patient Name:</u>	<u>Date of Birth:</u>
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BLOOD GLUCOSE READINGS

*****PLEASE FAX RESULTS TO 724-773-8982*****

DATE:	Breakfast	Lunch	Dinner	Bedtime	Comments
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DATE:	Breakfast	Lunch	Dinner	Bedtime	Comments
DATE:	Breakfast	Lunch	Dinner	Bedtime	Comments
<i>BREAKFAST</i> Diabetes medications and dosage		<i>LUNCH</i> Diabetes medications and dosage		<i>DINNER</i> Diabetes medications and dosage	