Camper Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR PARENT TO FILL OUT AT HOME BEFORE DAILY ARRIVAL:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Breakfast Time** | **Pre-Breakfast BG** | **Total Breakfast Grams Eaten** | **Insulin to Carb Ratio** | **Units of Insulin Given for Food** | **Units of Insulin for Correction, If Given (Indicate target BG used)** | **Total Amount of Insulin Given (Units)** |
| \_\_\_:\_\_\_\_AM | \_\_\_\_\_\_mg/dL | \_\_\_\_\_\_g | \_\_U:\_\_\_g | \_\_\_\_U | \_\_\_\_U | \_\_\_\_\_U |
| **\*Sensitivity/Correction Factor: \_\_\_\_\_\_\_\_\_\_\_ (if different sensitivity factor for different times of day, indicate here—i.e. Breakfast 40, Lunch 50, Bedtime 70)****\*\*Other Notes:** |

**LUNCH**

|  |  |  |
| --- | --- | --- |
| **Item** | **Quantity** | **Carbohydrate Content (g)** |
| *Ex. Bread* | *2 slices* | *30g* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **LUNCH TOTAL CARBOHYDATES (g):**  | \_\_\_\_\_\_\_g |
| **Insulin to Carb Ratio:**  | \_\_\_\_U:\_\_\_\_g |

**FOR CLINCIAN TO FILL OUT AT CAMP BEFORE DAILY DEPARTURE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mid-Morning BG and Time** | **Pre-Lunch BG** | **Lunch Carbs Eaten** | **Lunch Insulin Given** | **Afternoon BG and Carbs** |
| \_\_\_\_:\_\_\_\_AM\_\_\_\_\_\_mg/dL (BG) | \_\_\_\_\_mg/dL | \_\_\_\_\_\_\_\_g | For Carb Intake: \_\_\_\_\_\_UFor Correction: \_\_\_\_\_U | \_\_\_\_:\_\_\_\_PM\_\_\_\_\_mg/dL (BG)\_\_\_\_\_\_g in snack |
| **\*Other Notes:** |