

Blood Glucose Levels Test

PATIENT INFORMATION

Name: _____ Date of Birth: _____ dd / mm / yyyy
Gender: _____ Test Date: _____ dd / mm / yyyy

FASTING BLOOD SUGAR TEST

Time: _____ Blood Glucose Level (mg/dL): _____

POST-MEAL BLOOD SUGAR TEST

Time: _____ Blood Glucose Level (mg/dL): _____

Fasting Blood Sugar Test Results: Below 99 mg/dL: Normal 100 - 125 mg/dL: Prediabetes 126 mg/dL or higher: Diabetes

Post-Meal Blood Sugar Test Results: Below 140 mg/dL: Normal 140 - 199 mg/dL: Prediabetes 200 mg/dL or higher: Diabetes

Interpretation

Comments