|  |
| --- |
| vereinfachtes Insulinschema  Patientenetikette |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Datum Verordnung durch Ärztin / Arzt:** | | | | | | | | | | | |
| **Essensinsulin** Spritzort:  Bauch  Oberschenkel | | | | | | | | | | | |
| **Blutzucker** | **< 3** | **3 - 3.9** | | **4 - 4.9** | **5 - 7** | **7.1 - 10** | **10.1 - 13** | **13.1 - 15** | **15.1 - 17** | **17.1 - 19** | **> 19** |
| vor Frühstück |  |  | |  |  |  |  |  |  |  |  |
| vor Mittagessen |  |  | |  |  |  |  |  |  |  |  |
| vor Abendessen |  |  | |  |  |  |  |  |  |  |  |
| 22 Uhr Korrektur |  |  | |  |  |  |  |  |  |  |  |
| **Basisinsulin** | | | Spritzort:  Bauch  Oberschenkel | | | | | | | | |
| Uhr | | | IE | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Datum Verordnung durch Ärztin / Arzt:** | | | | | | | | | | | |
| **Essensinsulin** Spritzort:  Bauch  Oberschenkel | | | | | | | | | | | |
| **Blutzucker** | **< 3** | **3 - 3.9** | | **4 - 4.9** | **5 - 7** | **7.1 - 10** | **10.1 - 13** | **13.1 - 15** | **15.1 - 17** | **17.1 - 19** | **> 19** |
| vor Frühstück |  |  | |  |  |  |  |  |  |  |  |
| vor Mittagessen |  |  | |  |  |  |  |  |  |  |  |
| vor Abendessen |  |  | |  |  |  |  |  |  |  |  |
| 22 Uhr Korrektur |  |  | |  |  |  |  |  |  |  |  |
| **Basisinsulin** | | | Spritzort:  Bauch  Oberschenkel | | | | | | | | |
| Uhr | | | IE | | | | | | | | |