

PHYSICAL ACTIVITY

TOOL

for addressograph plate

Instructions: Keep track of your physical activity or exercise. Also, record your blood sugar and any symptoms you might have.

Physical Activity Record

	Date	Time of day	Duration	Type of activity (Aerobic, resistance or flexibility e.g., walking or stretching)	Symptoms (E.g., Low blood sugar, pain, dizziness)	Blood Glucose Before	Blood Glucose After
Sun							
Mon							
Tue							
Wed							
Thu							
Fri							
Sat							