A task force report by the ADA and Endocrine Society update hypoglycemia categories. A new way to classify hypoglycemia in the absence of blood glucose readings and to help customize diabetes treatments for hypoglycemia. **Hypoglycemia Patient Questionnaire**

**Hypoglycemia Patient Questionnaire**

Name ____________________________________________ Today’s date ____________
First Middle Last

1. To what extent can you tell by your symptoms that your blood glucose is LOW?
   _____ Never _____ Rarely _____ Sometimes _____ Often _____ Always

2. In a typical week, how many times will your blood glucose go below 70 mg/dL?
   ______ a week

3. When your blood glucose goes below 70 mg/dL, what is the usual reason for this?

4. How many times have you had a severe hypoglycemic episode (where you needed someone’s help and were unable to treat yourself)? Since the last visit _____ times
   In the last year ____ times

5. How many times have you had a moderate hypoglycemic episode (where you could not think clearly, properly control your body, had to stop what you were doing, but you were still able to treat yourself)? Since the last visit _____ times
   In the last year ______ times

6. How often do you carry a snack or glucose tablets (or gel) with you to treat low blood glucose?
   Check one of the following:
   Never ___ Rarely ___ Sometimes___ Often___ Almost always___

7. How LOW does your blood glucose need to go before you think you should treat it?
   Less than _____mg/dL

8. What and how much food or drink do you usually treat low blood glucose with?

9. Do you check your blood glucose before driving? Check one of the following:
   Yes, always____ Yes, sometimes ___ No___

10. How LOW does your blood glucose need to go before you think you should not drive?
    _____mg/dL

11. How many times have you had your blood glucose below 70 mg/dL while driving?
    Since the last visit _____ times
    In the last year ______ times

12. If you take insulin, do you have a glucagon emergency kit? Yes___/ No ___

13. Does a spouse, relative, or other person close to you know how to administer glucagon?
    Yes____/ No ___

*Diabetes Care* April 15, 2013
Hypoglycemia Provider Checklist

Name _____________________________________________________________________
First Middle Last

Today's date __________

1. __ Reviewed the Hypoglycemia Patient Questionnaire

2. __ Questioned the patient about circumstances surrounding severe or moderate hypoglycemia

3. __ Discussed strategies to avoid hypoglycemia with the patient

4. __ Made medication changes where clinically appropriate

5. __ Recommended carrying snack and/or glucose tablets where appropriate and provided instructions for how to use them (take 15 g glucose, wait 15 min, and remeasure blood glucose; repeat if hypoglycemia persists). A 1-page patient handout on treating hypoglycemia is available at http://clinical.diabetesjournals.org/content/30/1/38

5. __ Prescribed glucagon if appropriate

Diabetes Care April 15, 2013