



Self-Care Confidence

Pre-program Post-program

You will ask you to be answer these questions before you start the program and again after. Your answers will tell us how well we did in teaching you diabetes care. Please circle a number from 1 – 5 to rate how sure you are about doing the task listed. Number 1 represents that you have the least confidence and number 5, the most.

Self-Care Behavior	Confidence Level				
How sure are you that you can check your blood sugars correctly?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you know how to make healthy food choices?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you can tell which foods contain fiber?	1 Not at all sure	2	3	4	5 Very sure
If you are taking medicine - How sure are you that you know about your diabetes medicine and the possible side effects?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you know how to exercise safely and effectively?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you can find diabetes information and support when you need it?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you can notice and then do the right things for a low blood sugar reaction?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you can check your feet for problems and take care of them properly?	1 Not at all sure	2	3	4	5 Very sure
How sure are you that you can work with your doctor to get a complete diabetes exam?	1 Not at all sure	2	3	4	5 Very sure

My A1c level is _____ (write in) or I don't know.

The goal for my A1c is

- a) 7.5% or below c) below 6.5%
b) 10% d) don't know

The highest blood pressure for people with diabetes should be

- a) 130/80 c) 160/90
b) 140/90 d) don't know

When I first wake up, my blood sugar level should be

- a) under 70 c) 80-140
b) 70-110 d) don't know

I should see my doctor for diabetes every

- a) 3 to 6 months c) 2 years
b) year d) don't know

Two hours after I eat, my blood sugar should be

- a) under 70 c) 80-140
b) 70-110 d) don't know