Using the Flip Chart to Teach

Survival Skills for Patients with Diabetes

Learning Objectives: At the conclusion of this presentation, you should be able to:

- State being familiar and comfortable with the *Diabetes Survival Skills Flip-Chart* teaching tool.

- Recognize evidence of patient learning as well as "red flags" that indicate misconceptions.

- Understand how the flip chart can be used as a tool to provide survival skills education for patients with diabetes.

- Name additional materials that can be used to educate patients with diabetes.

Teaching Tips

- Consider Patient Readiness for learning: attitude, physical condition, attention span, learning ability

- Schedule timing and duration of teaching sessions for maximum effectiveness

- Focus on *most important* knowledge and skills for that particular patient (not extraneous information)

- Offer learning through multiple methods to maximize effectiveness(see, hear, touch, discuss, perform)

- Provide reinforcement material for patient to refer back to after the teaching session

Components of the Flip Chart

What to teach the patient:

1. High blood sugar is also called hyperglycemia, which means "too much sugar in the blood". Your provider will set your target ranges. The American Diabetes Association recommends that blood sugar not be higher than 130 mg/dl before a meals and not be higher than 180 mg/dl two hours after the first bite a meal.

2. Some signs of high blood sugar include thirst, having to go to the bathroom frequently, hunger, dry skin or mouth, and slow healing of wounds. Some people also feel tired, nauseous, of have headache.

3. If your blood sugar is higher than your target range, you may need adjustments in your medication, diet, activity level, or a combination of these factors. If you notice a trend of high blood sugars, you should contact your provider.

   - Illness and infection can also cause blood sugars to become too high. This is because the stress of illness and infection make the liver put extra sugar into your blood. Other kinds of stress can also cause your blood sugar to become elevated. If you think a high blood sugar may be due to infection or illness, you need to contact your provider right away.

4. To prevent and treat high blood sugar, take your diabetes medication as directed. Your provider will let you know if your diabetes medication is the kind you can adjust at home on your own.

   - Exercising may help your blood sugar come down. Your provider can give you more information on whether and when you should exercise to reduce blood sugar. In cases of very high blood sugar, exercise may not be appropriate.

   - Carbohydrates in foods will raise blood sugar. If your pre-meal bloods sugar is already high, eating fewer carbohydrates than you normally eat may help lower it.

   - If you have had repeated high blood sugars that are not coming down, you need to check urine ketone levels. This is done by dipping a strip into a urine sample and comparing the color of the strip to ce...

Checking for understanding:

- Can identify signs (or his or her own symptoms) of hyperglycemia.
- Can state reasons that his or her blood sugar may be high (not taking meds, eating too much, no activity, illness, etc.).
- Can state when he/she should contact the provider for hyperglycemia.
- Can describe how to check ketones.

Red Flags

▶ Cannot identify BG values that are above target range.

▶ States a high number is "pretty good for me" or prefers blood sugars at higher than target levels.

▶ States that high BG numbers are better than low BG numbers.

High Blood Sugar
(Hyperglycemia)

Do you know . . .

1. How high is too high?

2. How to recognize high blood sugar?

3. What causes high blood sugar?

4. What to do about high blood sugar (how to fix it)?

- Simple graphics/questions for patients
- Script for educator
- Check for understanding questions
- Red Flags to help spot misconceptions

Understanding Diabetes

Do you know . . .

1. What diabetes is?

2. What type of diabetes you have — and the differences between the types of diabetes?

3. How diabetes can affect you now and later?

4. What actions can help you control your diabetes?

Pancreas

Inside the Pancreas

Beta Cell

Muscle Cell

Blood Vessel

Insulin

Glucose
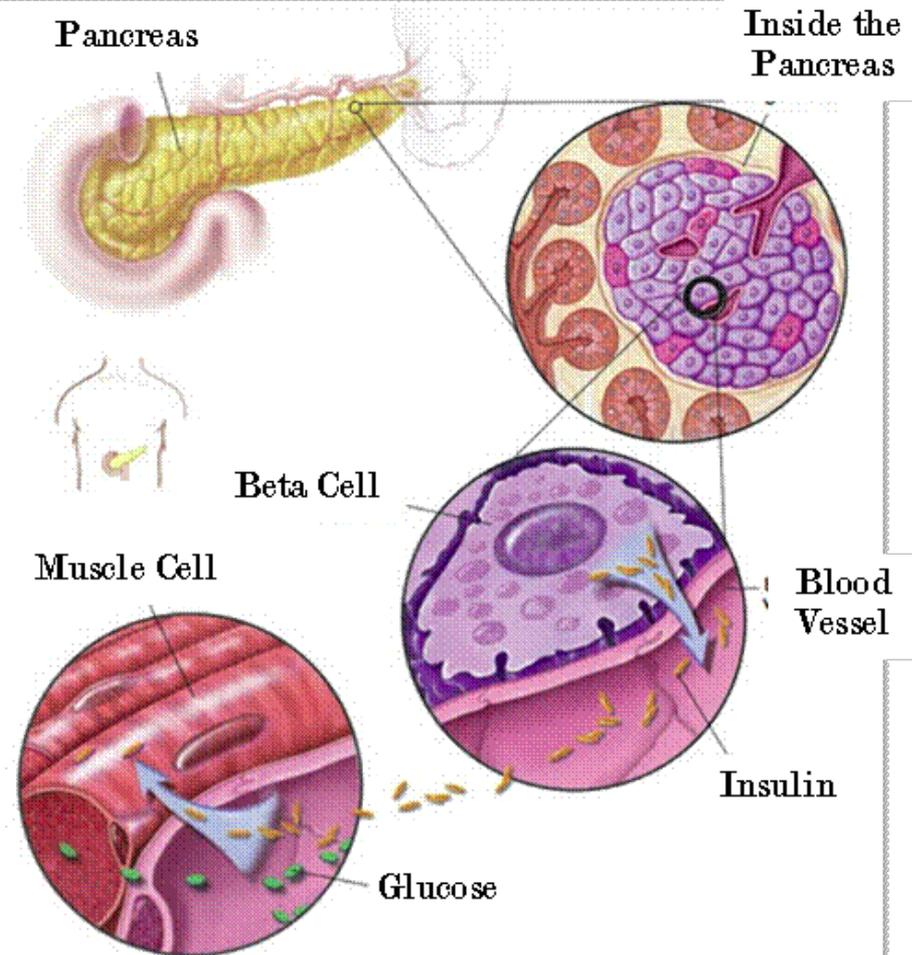
Understanding Diabetes

Checking for Patient Understanding

The Patient . . .

- Can accurately state type of diabetes he/she has.

- Associates common diabetes-associated complications with poor control.

- Verbalizes understanding of importance of knowing about aspects of diabetes.

- Expresses actions and habits that will promote good diabetes control.

Red Flags

The Patient . . .

➢ Does not know type of diabetes he/she has.

➢ Expresses lack of control over own health status (fatalism).

➢ Expresses misconceptions about treatment for his/her specific type of diabetes.

Checking Blood Sugar

Do you know . . .

1. Why you need to test?

2. How to check your blood sugar?

3. Your blood glucose target range?

4. When and how often to test?

5. Where to get testing supplies?
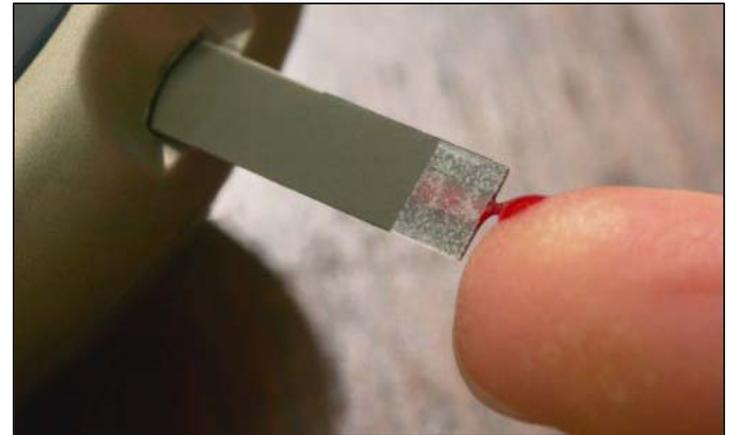
Checking Blood Sugar

Checking for Patient Understanding

The Patient . . .

- Demonstrates BG testing procedure with proper technique.

- Verbalizes importance of regular BG testing.

- Can identify BG values that are in and out of appropriate range.

- Has a meter and can state how to obtain testing supplies.

Red Flags

The Patient . . .

➢ Does not check blood sugar.

➢ Only checks at time blood sugar will be good.

➢ Cannot demonstrate proper procedure for checking blood sugar.

➢ Reports BG values not consistent with HgbA1C.

High Blood Sugar
(Hyperglycemia)

Do you know . . .

1. How high is too high?

2. How to recognize high blood sugar?

3. What causes high blood sugar?

4. What to do about high blood sugar (how to fix it)?

High Blood Sugar

Checking for Patient Understanding

The Patient . . .

- Can identify signs and symptoms of hyperglycemia.

- Can state reasons that the blood sugar may be high (not taking medication, overeating, inactivity, illness, etc.)

- Can state when he/she should contact the provider for hyperglycemia.

- Can describe how to check ketones.

Red Flags

The Patient . . .

- Cannot identify BG values that are above target range.

- States a high value is "pretty good for me" or prefers BG at higher than target levels.

- States that high BG numbers are better than low BG numbers.
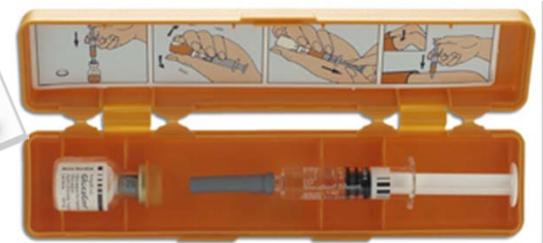
Low Blood Sugar
(Hypoglycemia)

Do you know . . .

1. How low is too low?

2. How to recognize low blood sugar?

3. What causes the blood sugar to be low?

4. What to do about low blood sugar (how to fix it)?

5. How to use a glucagon kit?

Rule of 15

For low blood sugar (< 70 mg/dl) . . .

- Eat or drink 15 grams of quick carbohydrates

- Recheck blood sugar in 15 minutes

- If still low, repeat steps

Low Blood Sugar

Checking for Patient Understanding

The Patient . . .

- Can clearly identify signs and/or symptoms (including his/her own) of hypoglycemia.

- Can state reasons that the blood sugar may drop (not eating, exercise, medication, etc.)

- Has a plan to treat low blood sugar at all times & places.

- Confirms family/friends are aware of risk and know how to help in hypoglycemic situation.

Red Flags

The Patient . . .

➢ Doesn't carry any glucose source despite being at risk for hypoglycemia.

➢ Takes insulin but does not have glucagon kit and/or does not have someone who knows how to use it.

➢ Purposely keeps blood sugar high to avoid hypoglycemia.

Healthy Eating

Do you know . . .

1. Which foods affect your blood sugar?

2. How to recognize carbohydrates?

3. How many carb servings to have at each meal?

4. How to create a "balanced plate"?

5. How to read a food label?

Vegetables

Carbohydrates*

Meat, Protein, & Healthy Fats

MILK

soup

MILK

yogurt
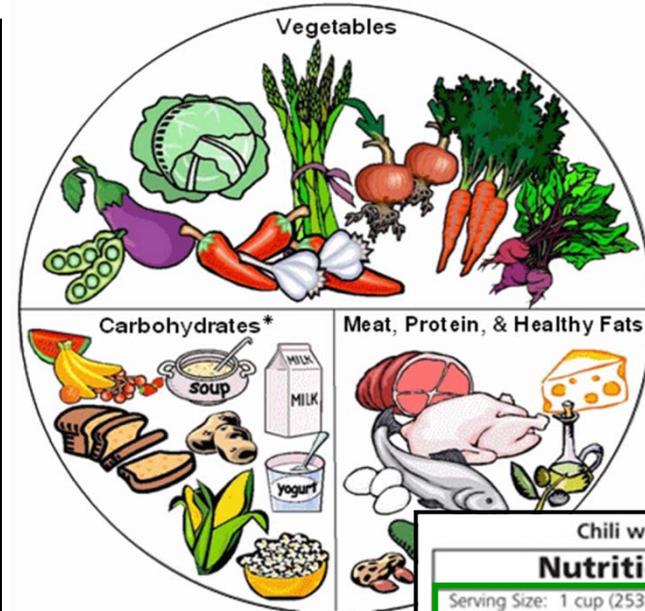
Chili with Beans

Nutrition Facts

Serving Size: 1 cup (253 g)
Servings per container: 2

Amount per Serving:

Calories 260	Calories from Fat 72
	% Daily Value
Total Fat 8g	13%
Saturated Fat 3g	17%
Cholesterol 130mg	44%
Sodium 1010mg	42%
Total Carbohydrate 22g	7%
Dietary Fiber 9g	36%
Sugars 4g	
Protein 25g	

Healthy Eating

Checking for Patient Understanding

The Patient . . .

- Can identify foods made up of carbohydrates.

- Can give an example of a balanced meal.

- Correctly identifies carbohydrate content on a food label.

- States importance of eating appropriately-sized meals throughout the day and states will not skip meals.

Red Flags

The Patient . . .

➢ States he/she can never have anything good or favorite foods again.

➢ Advocates for use of fad diets.

➢ Only counts "sugars" on label rather than "total carbohydrates."

➢ Eats out excessively.

➢ Drinks sugary drinks often.

Diabetes Medications

Do you know . . .

1. What diabetes medications you take?

2. What your doses are?

3. When to take it?

4. What to do if you miss a dose?

5. Possible side effects?

6. How to get your medication ?

Diabetes Medications

Checking for Patient Understanding

The Patient . . .

- Associates name brand with generic name.

- Can explain how the medication lowers blood sugar.

- Recognizes common side effects of the medication.

- Knows the correct time to take medication and what to do if a dose is missed.

- Has a plan for timely refills.

Red Flags

The Patient . . .

➢ Does not consider potential side effects (i.e. hypoglycemia).

➢ Does not remember doses or states inappropriate times.

➢ States will skip medication at inappropriate times.

➢ Is not sure where or how to get medication refills.

Taking Your Insulin

Do you know . . .

1. What kind(s) of insulin you take?

2. When to take insulin (and when not to take it)?

3. How much to take?

4. How to take your insulin?

5. How to store insulin and how long you can use it?

Taking Your Insulin

Checking for Patient Understanding

The Patient . . .

- Correctly states prescribed insulin dose.

- Explains duration of action in general terms ("long", "quick", etc.).

- Verbalizes understanding that basal insulin should not be skipped if not eating.

- Demonstrates insulin injection with pen or syringe using proper technique.

Red Flags

The Patient . . .

➢ Mixes up names of insulin.

➢ Does not remember doses.

➢ States will skip insulin at inappropriate times.

➢ Misses steps in demonstrating injection technique.

➢ States using insulin beyond expiration date or usage time.

Sick Days

Do you know . . .

1. How often to check your blood sugar when sick?

2. How to take your diabetes medicine if you are sick or not eating?

3. What foods you can eat if you are sick?

4. When to call your doctor?

5. When and how to check for ketones?

Sick Days

Checking for Patient Understanding

The Patient . . .

- Can explain how and when to check urine/blood ketones.

- Lists signs of dehydration.

- States importance of taking diabetes medication when ill.

- States alternative sick-day foods.

- Verbalizes understanding of when to call doctor or seek emergency medical care.

Red Flags

The Patient . . .

➢ States he/she will not take any diabetes medication when sick.

➢ States he/she checks blood sugar less often when sick.

➢ Cannot state association between illness and high blood sugar.

➢ Cannot list actions to prevent dehydration.

Follow Up!

Do you know . . .

1. When you should see your doctor?

2. What things to discuss with your doctor?

3. When to call for help?

4. Who to call if you have problems?

5. How to follow up for more diabetes education?

Follow Up!

Checking for Patient Understanding

The Patient . . .

- Can name situations in which medical attention should be sought.

- Can show the name and number of whom to call for help.

- Verbalizes importance of following up with provider.

- Can state when and where to get further diabetes education.

Red Flags

The Patient . . .

➢ States he/she has "heard it all before" or "already knows it all".

➢ Has no interest in managing his/her diabetes.

➢ Has no regular provider with which to follow up.

➢ Seems unclear on when and who to call for help.

Some Final Thoughts

When using the Flip Chart to teach a patient, remember . . .

- Tool should be tailored to fit needs of patient; he/she may not need nor be ready for all information.

- Nurse "scripts" on back sides of pages in "What to Teach the Patient" may be summarized and are intended as an overview for the patient and nurse.

- The flip chart is *not* intended as comprehensive diabetes self-management education (DSME).

Survival Skill Flip Chart Tool was developed by
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For More Information

VA/DoD Diabetes CPG
www.healthquality.va.gov/Diabetes_Mellitus.asp

National Diabetes Education Program
www.ndep.org

Centers for Disease Control: Diabetes
www.cdc.gov/diabetes

National Institute of Diabetes and Digestive and Kidney Diseases
www.nih.gov

American Diabetes Association
www.diabetes.org