DR GOOD DEED · FREE GUIDE

The Steady Blood Sugar Guide

Know what your numbers mean, fix what's off with simple daily steps, and track your progress for two weeks. Written in plain language by the team behind drgooddeed.com, a health site run by U.S.-trained doctors.

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✓ **How to use it**
Pick the 1 or 2 sections that match your numbers, try the steps for 2 weeks, and log your readings.

NORMAL AT A GLANCE (ADULTS WITHOUT DIABETES)

FASTING
70 to 99 mg/dL
100 to 125 = prediabetes

2 HOURS AFTER A MEAL
Under 140 mg/dL
With diabetes: under 180

A1C
Below 5.7%
5.7 to 6.4% = prediabetes

Start here: check your number with the free Blood Sugar Reading Checker at drgooddeed.com, then turn to the section that matches. One home reading can't diagnose diabetes, so always confirm unusual results with your doctor.

1. Know your numbers

Your targets, a quick chart, and what to do if you go low

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How to use: ask your doctor to fill in your personal targets below. For two weeks, write down the readings your doctor asks for, plus what you ate, whether you walked after meals, and how you slept. Test fasting after at least 8 hours with no food, and "after a meal" exactly 2 hours after the first bite. Bring this page and your 14-day log (page 6) to your next visit.

My targets (filled in with my doctor)

Fasting / before meals	2 hours after meals	A1C goal	Next A1C test due
from ____ to ____ mg/dL	under _____ mg/dL	near _____ %	date

My diabetes medicines and doses (if any):

Quick chart: common targets

Group	Fasting	2 hours after a meal	A1C
Adults and children without diabetes	70 to 99 mg/dL	Under 140 mg/dL	Below 5.7%
Prediabetes (adults)	100 to 125 mg/dL		5.7 to 6.4%
Adults with diabetes	80 to 130 mg/dL	Under 180 mg/dL	Near 7% for many
Children with diabetes	Often 80 to 130 mg/dL	Custom, often under 180	Near 7% if safe
Older adults with complex health	Individualized	Individualized, avoid lows	Higher than mid-life if safer



Fasting reading, adults without diabetes (mg/dL)

mmol/L = mg/dL ÷ 18

If you're low (under 70 mg/dL): the 15-15 rule

1. Take about 15 g of fast sugar: half a cup of juice or regular soda, or glucose tablets.
2. Wait 15 minutes and test again.
3. Still under 70? Repeat. Then eat a meal or snack.

Call 911
for confusion, a seizure, fainting, or if someone can't stay awake.

Call your doctor if you notice

- Lows under 70 mg/dL more than once a week
- Highs over 250 mg/dL that last more than a few hours
- Sudden blurry vision, heavy thirst, or fast weight loss
- Two fasting readings of 126 mg/dL or higher on different days

Habits that help steady your numbers

- Fill half your plate with non-starchy vegetables
- Add lean protein to every meal
- Pick whole grains most of the time
- Skip sugary drinks; eat fruit with a meal
- Walk 10 to 15 minutes after meals
- Sleep well; poor sleep can raise fasting sugar

Fix what's off: morning and after meals

Try these for 2 weeks and log your readings on page 6

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2 High morning (fasting) sugar

Fasting 100+ mg/dL without diabetes, or above your goal with diabetes

Why it happens: Fasting shows your overnight baseline. A late, high-carb dinner, poor sleep, stress, illness, dehydration and some medicines such as steroids can push your morning number up. The liver also releases glucose overnight.

1. **Eat dinner earlier and lighter.** A late high-carb dinner can push the next morning up.
2. **Walk 10 minutes after dinner.** A short walk can pull the next reading down.
3. **Protect your sleep.** Poor sleep raises fasting sugar. A cool, dark room helps.
4. **Drink water through the day.** Dehydration raises sugar.
5. **Tell your doctor about new medicines.** Steroids and some mental health medicines can raise sugar.

See your doctor if
Two fasting readings of 126 mg/dL or higher on different days, or 100 to 125 mg/dL on repeat tests. Ask about an A1C test.

Track it
Test on 3 mornings after at least 8 hours with no food. Note what you ate the night before.

3 Spikes after meals

Over 140 mg/dL at 2 hours without diabetes, or over 180 mg/dL with diabetes

Why it happens: A small rise after eating is normal. Portion size, fiber and timing make the biggest difference. If your A1C stays high while fasting looks fine, after-meal spikes may be the driver.

1. **Build a steady plate.** Half non-starchy vegetables, lean protein, whole grains (see page 5).
2. **Eat fruit with a meal.** Not alone, if you spike after fruit.
3. **Skip sugary drinks.** Keep them for rare moments.
4. **Walk 10 to 15 minutes after eating.** It can lower your next reading.
5. **Repeat what works.** Use the same plate the next day and compare.

See your doctor if
After-meal readings often stay above 140 mg/dL (no diabetes) or 180 mg/dL (with diabetes).

Track it
Check exactly 2 hours after the first bite, after two different meals a week. Use a timer.

Prediabetes and lows

Two situations that need action now

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4 Prediabetes

Fasting 100 to 125 mg/dL, or A1C 5.7 to 6.4%

Why it happens: Prediabetes cutoffs don't change with age in adults. The good news: lifestyle steps can bring your numbers down, and now is the time to start.

1. **Move 150 minutes a week.** Brisk walking counts. Add strength work twice a week; muscle uses glucose.
2. **Add fiber and protein.** Vegetables, lean protein and whole grains, with protein and fiber at breakfast.
3. **Cut sugary drinks.** Water through the day instead.
4. **Sleep well and manage stress.** Both raise sugar. Try short breathing drills.
5. **Retest in a few months.** Recheck your A1C and compare with today.

See your doctor if

Ask for a plan and a date for your next A1C test. Fasting of 126 mg/dL or higher on two days, or A1C of 6.5% or higher, needs a visit soon.

Track it

Log fasting on a few mornings each week, with notes on food, sleep and walks.

5 Going low

Below 70 mg/dL

Why it happens: Lows can cause confusion, falls or a car crash, especially in older adults and anyone taking insulin or a sulfonylurea.

1. **Treat it right away: the 15-15 rule.** About 15 g of fast sugar (half a cup of juice or glucose tablets), wait 15 minutes, test again. Repeat if still under 70.
2. **Never skip meals on insulin or sulfonylureas.** Eat at steady times.
3. **Keep fast sugar close.** At home, at work and in the car.
4. **Check before driving** and before and after hard exercise.
5. **Review your medicines.** Some raise the chance of a low. CGM alerts can warn you early if you qualify.

See your doctor if

Lows more than once a week. **Call 911** for confusion, a seizure, fainting, or if someone can't stay awake.

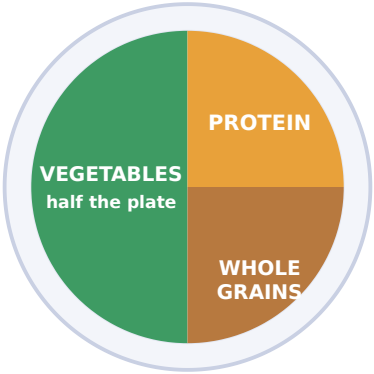
Track it

Write down every low and what happened before it: a skipped meal, exercise, or a medicine change.

6. What to eat for steady blood sugar

No special foods needed. Simple plates that keep you full and steady

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- **Half the plate: non-starchy vegetables.** Leafy greens, broccoli, peppers, beans and similar.
- **A quarter: lean protein** at every meal, for steady energy and fewer swings.
- **A quarter: whole grains** most of the time, in place of refined white versions.
- **Drink water.** Keep sugary drinks for rare moments, and eat fruit with a meal.

Simple swaps

Instead of	Try
Sugary soda, sweet tea or juice with meals	**Water, or unsweetened drinks**
Fruit on its own as a snack	**Fruit with a meal**
Refined white grains most days	**Whole grains most of the time**
A carb-only breakfast	**Breakfast with protein and fiber**
Sitting right after a meal	**A 10 to 15-minute walk**
A late, heavy, high-carb dinner	**An earlier, lighter dinner**

Move every day

- Children and teens: at least 60 minutes daily
- Adults: 150 minutes a week of brisk movement
- Seniors: add balance and light strength work
- On insulin or a sulfonylurea? Check before and after hard activity and carry a quick carb

Questions for your doctor

- Are my targets right for my age, health and medicines?
- Do I need an A1C test, or a change to my plan?
- How often should I check, and at what times?
- Could any of my medicines be raising or lowering my sugar?

Living with diabetes, kidney disease, or pregnant? Ask your doctor or a dietitian for an eating plan that fits your medicines. Pregnancy uses tighter targets.

7. My 14-day log

Fill in only what your doctor asked you to check · readings in mg/dL

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Day / date	Fasting on waking	2 hrs after a meal circle meal · reading	Bedtime if asked	Walked after meals	Sleep hours	Notes food, stress, illness, medicines, lows
Day 1 __/__		B · L · D		B L D		
Day 2 __/__		B · L · D		B L D		
Day 3 __/__		B · L · D		B L D		
Day 4 __/__		B · L · D		B L D		
Day 5 __/__		B · L · D		B L D		
Day 6 __/__		B · L · D		B L D		
Day 7 __/__		B · L · D		B L D		
Day 8 __/__		B · L · D		B L D		
Day 9 __/__		B · L · D		B L D		
Day 10 __/__		B · L · D		B L D		
Day 11 __/__		B · L · D		B L D		
Day 12 __/__		B · L · D		B L D		
Day 13 __/__		B · L · D		B L D		
Day 14 __/__		B · L · D		B L D		

Average fasting _____

Average after meals _____

Number of lows (<70) _____

Number of highs (>250) _____

Questions for my doctor

- Are my targets right for my age, health and medicines?
- Do I need an A1C test, or a change to my plan?
- How often should I check, and at what times?