

CGM & YOU – A GUIDE

CGM is a tool you and your diabetes care team will use to monitor your glucose levels and develop your diabetes treatment plan

Parts of Your CGM:

- A. <u>Disposable Sensor</u> The sensor attaches to the body and can be replaced after 7 days. It has a thin probe which is inserted under the skin and will measure your glucose every few minutes.
- B. <u>Transmitter</u> Attaches to the sensor and sits on top of the skin. It sends the sensor glucose readings to the display device. Remember not to throw this away!



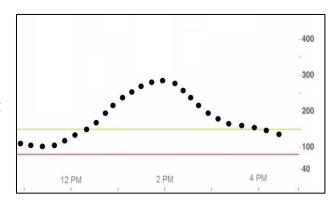
C. <u>Display Device</u> - Receives and displays sensor glucose levels. This must be within 20 feet of the sensor in order for information to be received. This can be your own mobile device or a manufacturer-issued receiver.

What to Expect From Your CGM:

- CGM is a tool you and your diabetes care team will use to make treatment decisions.
- In the beginning, the primary purpose of CGM will be to prevent and treat lows
- Especially in the beginning, your glucose levels will often be out of range. This is okay.

CGM and Meals:

- Hyperglycemia after meals is expected and will be addressed over time
- After the initial mealtime insulin, avoid administering insulin for the next 2-3 hours
- Administering extra insulin after mealtime is called "stacking" and can lead to hypoglycemia



To Reduce Post-Meal Hyperglycemia, Follow the Rule of 10s:

- If pre-meal blood glucose is in the 100s, bolus 10 minutes before eating
- If pre-meal blood glucose is in the 200s, bolus 20 minutes before eating
- If pre-meal blood glucose is in the 300s, bolus 30 minutes before eating



CGM and Exercise:

- CGM can be worn while exercising, even swimming.
- If blood glucose is below 120-150 before exercising, consider eating a small snack of 10-15 grams of carbs to prevent a low.
- Skin Tac and GrifGrips are a helpful and fun way to keep the transmitter secure.

www.GrifGrips.com



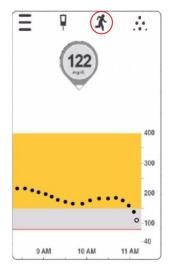
CGM and Trend Arrows:

- Trend arrows allow you to predict which way your glucose is headed—and how fast.
- For now, the most important arrows to pay attention to are the downward facing arrows.

If you see this arrow	And your Glucose is at or below	You should Consider
	90 mg/dl	Giving 15 grams of fast acting carbs to prevent hypoglycemia. Check again 15 minutes later.
→	100 mg/dl	Giving 15 grams of fast acting carbs to prevent hypoglycemia. Check again 15 minutes later.
○ ++	120 mg/dl	Giving 15 grams of fast acting carbs to prevent hypoglycemia. Check again 15 minutes later.



CGM and Event Logging:

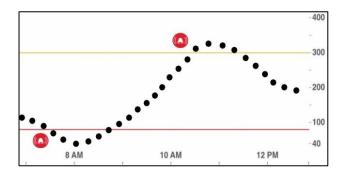






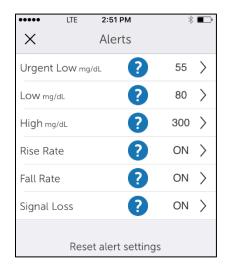
- Event logging allows you to keep track of events that may influence your blood glucose
- Logging events will allow you and your diabetes care team better understand your blood glucose trends

CGM and Alerts:



- At the beginning, consider setting your low alert to 75-80 mg/dL and your high alert to 300 or 300 mg/dL. Your receiver will alert you when your glucose goes out of range.
- Over time, you and your diabetes care team will work to tighten the range of glucose values.





- Your receiver can also alert you when your blood glucose is rapidly increasing or decreasing.
- If you are overwhelmed by the alerts, consider turning off the high alert and rise alert

Visit https://www.dexcom.com/continuous-glucose-monitoring for more resources about using your CGM