PATIENT HANDBOOK

Updated: September 2026



Diabetes Self-Management Education and Support

TOOLS & SOLUTIONS

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Welcome to the DHA Diabetes Self-Management Education and Support (DSMES) Program

This program is a core of 8 modules that focus on Type 2 Diabetes with additional modules available for Type 1 and Gestational Diabetes. These are available in-person, virtually and recorded so they are available at your convenience at: warfighterwellness.org/diabetes

All handbooks contain:

- Reading materials.
- Notetaking pages.
- Glossary.
- Additional resources.



In This Module You Will:

- Review how to recognize, prevent and/or treat low blood glucose (hypoglycemia) and high blood glucose (hyperglycemia).
- Recall travel planning and safety tips.
- Explain how to prepare for disasters as a patient with diabetes.
- Create a sick day plan.
- Describe how to prepare for life changes and transitions.



Glossary

Diabetes Hyperosmolar Hyperglycemic State (HHS): This may affect people with type 2 diabetes when they get sick or dehydrated. The body may not have enough water to circulate and the extra sugar can make the blood thick like syrup. This can make them feel extremely tired, thirsty and confused.

Diabetic Ketoacidosis: Occurs mostly in patients with type 1 diabetes. It may occur when the body runs out of insulin, which is the key needed to let sugar into the cells for energy. Because the cells are starving, the body starts burning fat for fuel way too fast, which creates harmful acids called ketones that can build up and poison the blood.

Kussmaul Respirations: These are a very specific type of deep, rapid breathing that happens when the body is in a state of emergency. It is the body's natural defense mechanism to save itself when the blood becomes acidic. By taking fast, heavy gasps of air, the lungs work overtime to blow off carbon dioxide (which is acidic) to help bring the blood's chemistry back to a safe, normal level.

Health Literacy

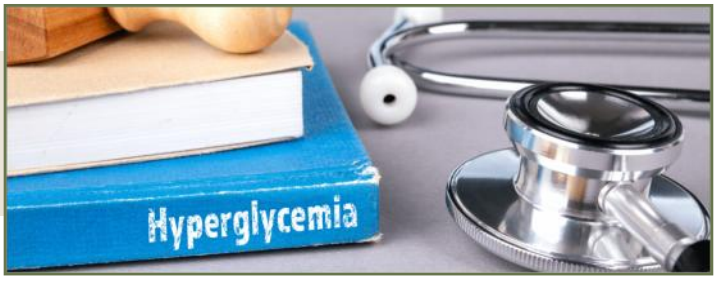
This is about whether a person can understand what a clinician tells them, figure out how to take their medicine correctly (and why), and know when to seek emergency help.

Language Matters

Your words have power! Choosing positive, encouraging language fuels your journey. Every small, healthy choice you make today builds momentum, creating a powerful wave of wellness for your future.

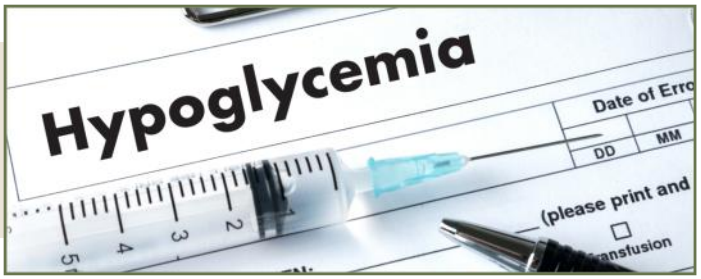
Review

Have you learned to recognize the symptoms you have for high or low glucose since you have been diagnosed with diabetes?



Low Glucose Notes:

What are your symptoms for low glucose?
What are the reasons it might be low?
How can you prevent low glucose levels?
How would you treat it?



High Glucose Notes:

What are your symptoms for high glucose?
What are the reasons it might be low?
How can you prevent high glucose levels?
How would you treat it?

What are you already doing well?

Diabetes Ketoacidosis (DKA)

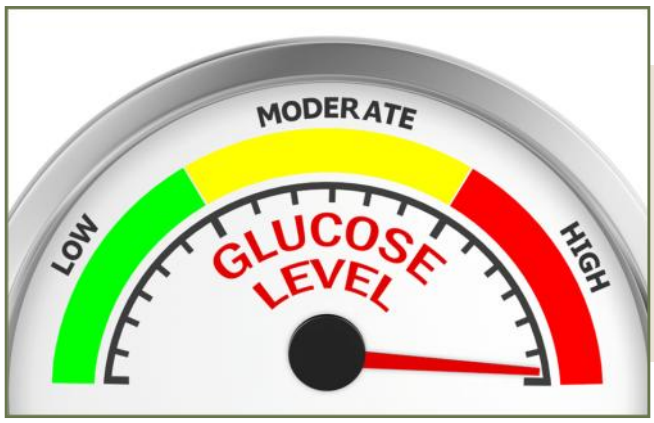
- More likely to occur in people with insulin-deficient diabetes (Type 1 or 2).
- High ketones. High blood glucose.
- Requires medical assistance for treatment.
- SGLT2 inhibitor-associated DKA may be euglycemic (normal glucose).

Symptoms:

- Extreme nausea with vomiting.
- Rapid breathing.
- Extreme fatigue.
- Extreme thirst.
- Belly pain.

Diabetes Hyperosmolar Hyperglycemic State (HHS)

- Most commonly affects those with type 2 diabetes.
- Very high glucose, ketones not likely.
- Develops more slowly than DKA.
- Requires medical assistance for treatment.



DKA vs HHS

DKA	HHS
Develops over hours to days.	Develops over days to a week.
Usually oriented.	Often change in cognitive state.
Increased urination and thirst.	Increased urination and thirst.
Rapid and unintentional weight loss.	Rapid and unintentional weight loss.
Nausea, vomiting and abdominal pain.	Often with other acute illness.
Deep, rapid and labored breathing (Kussmaul respirations or "air hunger").	Rapid shallow breathing.
May be life threatening .	May be life threatening .

One third of hyperglycemic emergencies have a DKA or HHA presentation.

Preventing DKA & HHS

Knowing what to look for and taking action early can stop this from becoming an emergency.

- Talk with clinician if glucose levels are higher than targets.
- Hydrate throughout the day, especially if feeling unwell.
- Continue being active.
- Take medications as prescribed. Check expiration dates.
- Follow a healthy meal plan and don't skip meals.
- Watch for infections and seek care if you have a non-healing injury.

Problem Solving & Moving Forward:

How do you plan to eat while on vacation? Taking activity gear?

What do you plan to eat during the holidays?

If you have family visiting, do you need to consider boundaries?

Do you have a Plan B for activity if it is rainy or cold outside?

Diabetes Identification

Choose one of these to inform emergency personnel that you have diabetes in case you are unable to. They are trained to look for these.

- Activate the Medical ID or In Case of Emergency information on phone.
- Consider wearing a medical alert bracelet or necklace and having a fast-acting carbohydrate source in case of hypoglycemia.
- Information on card in wallet or purse near identification.



Travel Safety

- Bring enough medicine/supplies for your trip, plus enough for a few extra days.
- Bring your glucose monitoring and insulin pump supplies.
- Bring fast-acting carbohydrates and healthy snacks.
- Bring a copy of current medicine list with dose and directions.
- Always pack the above in your carry-on bag if traveling by airplane.
- If traveling by car, try to keep a consistent temperature.

Have you ever been stuck in traffic before a meal?

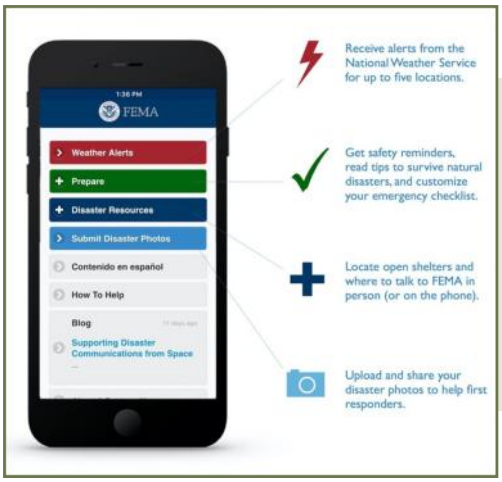
Your morning is chaotic; do you have a quick go-to meal?

Disaster or Emergency Considerations

- What type of disasters do you have in your area?
- What about sudden crises like a fire or water pipe bursting?
- Do you have a plan to take care of your diabetes just in case?
- Do you have a diabetes disaster kit?
- What is in it or what do you plan to put in it?
- Have you ever been in a disaster, and are you willing to share how it went?

Disaster Planning

- Make an emergency plan and kit.
- Store 3 days or more of diabetes supplies and keep in a safe location.
- Store at least 3 days of non-perishable food. More if your location warrants it.
- Find Diabetes Disaster Team if you need help.
- Download the FEMA app: www.FEMA.gov



What is your emergency plan?

Sick Day Rules

- Tell someone how you are feeling: Engage your support group.
- Stay hydrated: Drink plenty of water and sugar-free fluids.
- Continue medicines as prescribed unless instructed otherwise by your healthcare team (including basal insulin).
- Continue to test your glucose:
  - Type 1 diabetes: Check every 2-4 hours when sick. If above 250, ketones are positive, or glucose is constantly high, call healthcare team or go to the hospital.
  - Type 2 diabetes: Check every 4-6 hours when sick. If very high (>300) after 2-3 checks call your healthcare team.
- Discuss the use of any over-the-counter medicine with healthcare team.

Sick Day Plan

- Can be managed at home.
- Make sure you know:
  - When to ask for help.
  - When to call a doctor.
  - How often to eat/drink.
  - What to eat.
  - What medicines to take.
  - How often to test.
- Wear a medical ID bracelet or necklace.



Sick Day Kit

- Healthcare team phone number.
- List of friends or family members who can help or check up on you.
- Glucose monitoring equipment.
- Thermometer.
- Acetaminophen, anti-diarrheal and/or decongestant when clinician approved.
- Sugar free throat lozenges.

Tips

- Always have on hand.
- Check supplies and expiration dates every fall.

Sick Day Foods

- Be prepared!
- If you have a plan, it will be easier to manage your illness.

Food Item	15 grams of carbohydrates
Fruit juice	1/2 cup (4 oz)
Soda (not diet)	1/2 cup (4 oz)
Flavored gelatine (with sugar)	1/2 cup
Popsicle (with sugar)	1
Sherbet	1/4 cup
Rice	1/3 cup
Ice cream	1/2 cup
Pudding (sugar free)	1/2 cup
Pudding (with sugar)	1/4 cup
Thin soup (broth with some veggies and meat)	1/2 cup
Thick soup (creamy, blended)	1/2 cup
Pasta	1/3 cup

When to Call Your Healthcare Team

- If you are unable to eat or drink and/or have signs of dehydration.
- If you have diarrhea or have been vomiting for more than 6 hours.
- If your glucose stays over 300 or under 70 for more than 3 days.
- If you have not eaten normally for 24 hours.
- If you have a fever of 100.4◦F or higher for more than 24 hours.
- If you aren't certain how to take care of yourself.
- If you can't stay awake.
- If your ketones are positive.

When to Call 911

- If you have chest pain or shortness of breath.
- If you have trouble breathing.
- If you have numbness or tingling in arms or hands, trouble walking or stumbling.
- If you are experiencing drowsiness, confusion or can't think clearly.
- If you go to the hospital or emergency room, immediately tell the staff you have diabetes.
- Always have something readily available that shows you have diabetes in case you are unable to:
    - Bracelet or necklace.
    - Activate your medical ID or "In Case of Emergency" on your phone.
    - Wallet card.

Life Changes or Transitions

Transitions can be intimidating.

- Active duty to Veteran.
- Child to adult.
- Tricare to Medicare.
- Inpatient ↔ Outpatient.
- Moving to a new location.
- Death, divorce, moving, new job.



Do you know what resources are available?

Resources

Military

- Warfighter Wellness (W2): https://www.warfighterwellness.org/
- Operation Supplement Safety (OPSS): https://www.opss.org/
- W2 Diabetes App: Coming very soon!

Civilian

- American Diabetes Association: https://diabetes.org/
- Centers for Disease Control and Prevention: https://www.cdc.gov/diabetes/index.html
- American Association of Clinical Endocrinology: AACE Are you prepared to manage your diabetes emergency?

National Institutes of Health

- Centers for Disease Control and Prevention: https://www.cdc.gov
- National Diabetes Education Program: https://www.niddk.nih.gov/health-information/health-communication-programs/ndep/pages/index.aspx
- National Diabetes Information Clearinghouse: www.diabetes.niddk.nih.gov

Goals

Continue to keep yourself inspired and motivated with new goals.

"A goal without a plan is just a wish."
— Antonine de Saint (French writer 1900-1944)

One of our aims in this series of modules is to help you fill your "toolbox". As challenges arise, you will have the information you need to face any challenge.



Key Points

- Diabetes Self-Management Education and Support (DSMES) is an ongoing process.
- Be prepared for any situation. Have an emergency plan and kit.
- For your safety, wear medical alert jewelry, use phone medical emergency apps and carry fast carbs.
- Take advantage of national resources and apps.
- Talk to your clinician and/or healthcare team to identify additional resources and support to help manage your diabetes.
- Think about your next goals for maintaining great health.

What have you learned that you will use to upgrade your life?

Resources



Core DSMES Sessions:

These core sessions contain vital information toward understanding how diabetes effects the body and all the recommended health behaviors to support self-management.

Link to recorded classes:
warfighterwellness.org/diabetes

Online:

American Diabetes Association Sick Days:
https://diabetes.org/living-with-diabetes/sick-days

Center for Disease Control and Prevention Living with Diabetes:
https://www.cdc.gov/diabetes/living-with/index.html

National Institute of Diabetes and Digestive and Kidney Diseases:
https://www.niddk.nih.gov/health-information/diabetes/overview/healthy-living-with-diabetes

Notes:

American Diabetes Association®
Education Recognition Program

The American Diabetes Association Recognizes this education service as meeting the National Standards for Diabetes Self-Management Education and Support.

If you have any concerns about the diabetes education you receive:

Please call
1-888-232-0822

or

write
American Diabetes Association
Director, Education Recognition Program
2451 Crystal Drive, Suite 900
Arlington, VA 22202

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