THE NEVADA DIABETES ASSOCIATION

Our specialty is you!

THANKS THE DIABETES TREATMENT CENTER AT DESERT SPRINGS HOSPITAL FOR THEIR CONTRIBUTION TOWARD PRINTING THE NDA RESOURCE DIRECTORY.

The Diabetes Treatment Center at Desert Springs Hospital Medical Center offers comprehensive services that include inpatient and outpatient diabetes care, education, and treatment. Their interdisciplinary team includes certified diabetes educators and registered dietitians who work in partnership with physicians and share a common goal — to help those diagnosed with diabetes lead longer, healthier lives. Services are available in both English and Spanish. For more information call 702-369-7560.

THE DESERT SPRINGS HOSPITAL MEDICAL CENTER HAS THE FOLLOWING THREE DIABETES ACCREDITATIONS AND CERTIFICATIONS:

- DEAP Diabetes Education Accreditation Program.
Camp Programs
We offer unique camping programs for children and teens with diabetes as well as camps for families with children too young to attend other camps.

Support Groups
Our support groups are offered in Las Vegas and Northern Nevada and include our Injection Connection Teen Program, Family Support Groups and Adult Support Groups.

Education
We offer programs/literature to help diabetics & their families. Our Nevada Diabetes Resource Directory is distributed in Nevada, free of charge. One on one counseling is also available.

Emergency Medical
This program provides testing supplies and insulin to those in crisis, as well as provide other resources to at risk patients.

Advocacy
One of our main roles as an organization is to serve as advocates for issues pertaining to diabetes and people living with diabetes.

Fundraising
The NDA has various events throughout the year to raise funds to support our community outreach. Events like our annual golf tournaments are a fun way to fund our programs.
BRING THE FAMILY!
Call, email or go online at diabetesnv.org for the schedule of speakers and topics offered each month at DCAF CONNECTIONS!
(Onsite childcare available at no charge.)

DCAF Connections is a unique and supportive environment where parents and children gather to learn about diabetes management. The free monthly programs include guest speakers, youth activities, special events and parties. DCAF Connections has helped ease the pain and frustration of newly diagnosed families, offering a forum where they can share thoughts and ideas to improve and better cope with their lives.

DCAF MEETS 6:30 TO 7:30 P.M.
THE FIRST TUESDAY OF EVERY MONTH AT:
Rancho Healthcare Center & Urgent Care
888 South Rancho Drive, Las Vegas 89106
FOR MORE INFORMATION:
Email: lynn@diabetesnv.org
702-875-5387
No reservation required.
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NEVADA DIABETES ASSOCIATION PROGRAMS

| DCAF CONNECTIONS | A free support and education group for children with diabetes and their families dedicated to providing services to those living with Type 1 diabetes. Parents, children and other family member are welcome to the meetings, as well as professionals and community members who are interested. During each monthly meeting, guests will enjoy an educational session presented by health professionals and an opportunity to share information. Studies show that well-informed patients require fewer hospital and doctor visits. |
| INJECTION CONNECTION | is a fun and active youth support program that focuses on ages 12-17. It is aimed at maintaining good diabetes healthcare during the difficult teen years and through teen issues. Injection Connection has been successfully running since 2008 and meets quarterly to conduct a variety of activities and education of diabetes. |
| EMERGENCY MEDICAL PROGRAM | provides diabetes supplies and insulin to patients in need who qualify and possess a current doctor’s prescription. |
| NEVADA DIABETES RESOURCE DIRECTORY | The directory is distributed free throughout Nevada and is a valuable tool that helps people find the services and resources they need to manage and learn about their diabetes. The Resource Directory is also available on our website: |
| DIABETES DAY, WEEKEND AND SLEEPOVER CAMPS FOR FAMILIES AND KIDS WITH DIABETES | The goal of our camp is to educate children and their families about diabetes in a fun environment. Children learn to manage their diabetes quicker in a supportive environment. Parents receive the latest information about the care and management of diabetes and the best strategies they can use to help their children to help themselves. |
| RESIDENTIAL DIABETES CAMPS | Residential camps for children with diabetes in northern and Southern Nevada. Our camps provide a mechanism for children with diabetes to enjoy camp activities under medical supervision while learning to understand the disease, gain confidence and develop the skills they need to manage their condition. The camp helps them recognize that diabetes does not control their lives; but they can take control of their diabetes. |
| SMALL CHANGES PROGRAM | (Northern Nevada) A free one-hour program for individuals, organizations and businesses that have the ability to help people at risk to prevent the development of diabetes and other chronic medical conditions. It also helps people with diabetes to avoid complications and better manage their condition. |
| LIBRARY OF LITERATURE | The NDA also provides free literature and information about nutrition, exercise and other related topics. The NDA along with the public library system also works to ensure that the books on diabetes currently in circulation reflect the latest information. |
DIABETES MANAGEMENT SCHEDULE
(Take this information to your doctor to review your diabetes care)

EVERY YEAR:
0 Weight and blood pressure
0 Foot exam
0 Discuss self-monitoring blood glucose levels
0 Discuss ALL medications
0 Discuss self-management skills
0 Discuss dietary needs
0 Discuss physical activity
0 Discuss smoking cessation

TWICE A YEAR:
0 Check your HbA1c _______________ Date

ANNUALLY:
• Dilated Eye Exam
  _______________ Date
• Dental Exam
  _______________ Date
• Flu Vaccine
  _______________ Date
• Revisit a Diabetes Education Program
  _______________ Date
• Peripheral Nerve Check
  _______________ Date
• EKG or Treadmill Test
  _______________ Date

Ask your Doctor to Check:
• The protein & Fat in Your Blood
  _______________ Date
• The Protein in Your Urine
  _______________ Date
IMPORTANT PHONE NUMBERS

My Doctors:

Name: ___________________________________________

Phone: ___________________________________________

Name: ___________________________________________

Phone: ___________________________________________

Name: ___________________________________________

Phone: ___________________________________________

My Dietitian:

Name: ___________________________________________

Phone: ___________________________________________

My Insurance Company

Primary

Name: ___________________________________________

Phone: ___________________________________________

Policy #: ________________________________________

Secondary

Name: ___________________________________________

Phone: ___________________________________________

Policy #: ________________________________________

Other Important Numbers

Name: ___________________________________________

Phone: ___________________________________________

This manual is available on the Nevada Diabetes Association's website. For information call the NDA at 800-379-3839
Diabetes is a serious, costly, and increasingly common chronic disease that can cause devastating complications that often result in disability and death. Early detection, improved delivery of care, and better self-management are key strategies for preventing much of the burden of diabetes. Type 2 diabetes, formerly considered “adult onset” diabetes, is now being diagnosed more frequently among children and adolescents. This type of diabetes is linked to two modifiable risk factors: obesity and physical inactivity.

**TOTAL PREVALENCE OF DIABETES IN THE UNITED STATES, ALL AGES – 2005**

*Total:* 20.8 million people—7.0% of the population—have diabetes; *Diagnosed:* 14.6 million people; *Undiagnosed:* 6.2 million people

**PREVALENCE OF DIAGNOSED DIABETES IN PEOPLE AGED 20 YEARS OR YOUNGER, UNITED STATES, 2005**

- About 176,500 people aged 20 years or younger have diabetes. This represents 0.22% of all people in this age group.
- About one in every 400 to 600 children and adolescents has type 1 diabetes.
- Although type 2 diabetes can occur in youth, the nationally representative data that would be needed to monitor diabetes trends in youth by type are not available.

**COMPLICATIONS FROM DIABETES CAN INCLUDE:**
- Eye disease and blindness, Skin and dental problems, Feet and amputations, Stroke, Gastrointestinal problems, Heart disease, Sexual concerns, Kidney disease, Neuropathy, Psychosocial complications.

**TYPE 1 (INSULIN DEPENDENT DIABETES MELLITUS):**
Type 1 is one of the most frequent chronic childhood autoimmune diseases. The incidence of Type 1 is higher than all other chronic diseases of youth.

**TYPE 2 (NON-INSULIN DEPENDENT DIABETES MELLITUS):**
Of the 20.8 million people (7% of the population) approximately 90% to 95% have Type 2. Type 2 diabetes may account for about 90% to 95% of all diagnosed cases of diabetes. Type 2 diabetes is associated with older age, obesity, family history of diabetes, prior history of gestational diabetes, impaired glucose tolerance, physical inactivity, and race/ethnicity.

**GESTATIONAL DIABETES:**
Gestational diabetes is a form of glucose intolerance that is diagnosed in some women during pregnancy. During pregnancy, gestational diabetes requires treatment to normalize maternal blood glucose levels to avoid complications in the infant.

**DIABETES SYMPTOMS**
- Increased thirst and urination
- Weight loss DESPITE an increased appetite
- Fatigue, nausea, vomiting, blurred vision, breath odor, poor skin turgor
- Frequent infections including bladder, vaginal, and skin
- Impotence in men
- Cessation of menses

**YOU ARE AT RISK OF DEVELOPING TYPE 2 DIABETES IF YOU:**
- Are overweight
- Are NOT physically active
- Were told you have high blood sugar or high blood pressure or high cholesterol levels.
- Have a parent(s), sister or brother with diabetes
- Are a woman who has had a baby weighing more than 9 pounds at birth
- Are 45 years old or older
TAKE THE DIABETES RISK ANALYSIS

Find out if you are at high risk of getting diabetes by answering and scoring the following statements.

1. I had a baby weighing more than nine pounds at birth or had diabetes during pregnancy. If you answered Yes give yourself a score of 6. If you answered No give yourself a score of 0.

2. I have a parent(s), sister, or brother with diabetes. If you answered Yes add 3 to your score. If you answered No add 0.

3. I consider myself Hispanic, African American, American Indian, Asian American, or Pacific Islander. If you answered Yes add 3 to your score. If you answered No add 0.

4. I am overweight. If you answered Yes add 3 to your score. If you answered No add 0.

5. I have been told I have a high blood sugar level. If you answered Yes add 6 to your score. If you answered No add 0.

6. I am between 45 and 64 years of age. If you answered Yes add 1 to your score. If you answered No add 0.

7. I am under 65 years of age AND I get little or no exercise during a usual day. If you answered Yes add 3 to your score. If you answered No add 0.

8. I am 65 years old or older. If you answered Yes add 3 to your score. If you answered No add 0.

Now, add up your total score from items 1 through 8.

If you scored 1 to 5 points, you are probably at low risk for having diabetes now. But don't forget about it, especially if you are Hispanic, African American, Native American, Asian American or a Pacific Islander. If you scored 6 or more points, you are at high risk for having or getting diabetes. Only a doctor can determine if you have diabetes. If you have diabetes, we encourage you to share this information with your family members.
Carbohydrate Counting for People with Diabetes

Why Is Carbohydrate Counting Important?

- Counting carbohydrate servings may help you to control your blood glucose level so that you feel better.
- The balance between the carbohydrates you eat and insulin determines what your blood glucose level will be after eating.
- Carbohydrate counting can also help you plan your meals.

Which Foods Have Carbohydrates?

Foods with carbohydrates include:
- Breads, crackers, and cereals
- Pasta, rice, and grains
- Starchy vegetables, such as potatoes, corn, and peas
- Beans and legumes
- Milk, soy milk, and yogurt
- Fruits and fruit juices
- Sweets, such as cakes, cookies, ice cream, jam, and jelly

Carbohydrate Servings

In diabetes meal planning, 1 serving of a food with carbohydrate has about 15 grams of carbohydrate:

- Check serving sizes with measuring cups and spoons or a food scale.
- Read the Nutrition Facts on food labels to find out how many grams of carbohydrate are in foods you eat.
- The food lists in this handout show portions that have about 15 grams of carbohydrate.

Notes:
Carbohydrate Servings/ Choices:

1 Carbohydrate Serving/choice = 15 grams of carbohydrate
Each of the items listed in the amount given is equal to 1 serving that contains 15 grams of carbohydrate.

- Baked beans = 1/3 cup
- Banana = ½ banana
- Beans = ½ cup
- Berries = 1 cup
- Biscuit = 1 each, 2” in diameter
- Bread = 1 slice
- Bun = ½ bun
- Cereal (cold) = See label
- Cereal (hot) = ½ cup, cooked
- Corn on the cob = ½ cob
- Crackers = See label
- Cut corn = ¼ cup
- English muffin = ½ muffin
- Fruit (canned) = ½ cup, in light or natural juices
- Fruit (dried) = 2 tablespoons
- Fruit (whole) = 1 small, size of a tennis ball
- Graham Crackers = 3 squares (1 ½ WHOLE sheets)
- Granola = ¼ cup
- Grapes = 12-15
- Melon = 1 cup
- Milk = 1 cup
- Mini bagel = 1 each
- Pancake = 1 each, 4” in diameter
- Pasta = 1/3 cup, cooked
- Peas = ½ cup
- Popcorn = 3 cups, light or air popped
- Potato = ½ cup mashed or boiled, 3 oz baked
- Rice = 1/3 cup, cooked
- Soy milk = 1 cup
- Squash (winter) = 1 cup
- Tangerines = 2 each, small
- Tortilla = 1- 6” in diameter
- Waffle = 1- 4” in diameter
- Wheat germ = 3 tablespoons, dry
- Yogurt = ¼ cup or 6 oz, light yogurt

Free Foods = 5 grams of carbohydrate or less per serving OR less than 20 calories per serving.
Recommended daily intake of free foods is no more than three servings per day.
MEAL PLANNING TIPS

• A meal plan tells you how many carbohydrate servings to eat at your meals and snacks. For many adults, eating 3 to 5 servings of carbohydrate foods at each meal, and 1 or 2 carbohydrate servings for each snack, works well.

• In a healthy daily meal plan, most carbohydrates come from:
  o 5 servings of fruits and vegetables
  o 3 servings of whole grains
  o 2 to 4 servings of milk or milk products

• Check your blood glucose level regularly. It can tell you if you need to adjust the timing of when you eat carbohydrates.

• Eating foods that have fiber, such as whole grains, and having very few salty foods, is good for your health.

• Eat 4 to 6 ounces of meat or other protein foods (such as soybean burgers) each day. Choose low-fat sources of protein, such as lean beef, lean pork, chicken, fish, low-fat cheese, or vegetarian foods such as soy.

• Eat some healthy fats, such as olive oil, canola oil, and nuts.

• Eat very little saturated fats. These unhealthy fats are found in butter, cream, and high-fat meats, such as bacon and sausage.

• Eat very little or no trans fats. These unhealthy fats are found in all foods that list “partially hydrogenated” oil as an ingredient.

LABEL READING TIPS

The Nutrition Facts panel on a label lists the grams of total carbohydrate in 1 standard serving.

The label’s standard serving may be larger or smaller than 1 carbohydrate serving. To figure out how many carbohydrate servings are in the food:

• Look first at the label’s standard serving size.

• Then check the grams of total carbohydrate. This is the amount of carbohydrate in 1 standard serving.

• Divide the grams of total carbohydrate by 15. This number equals the number of carbohydrate servings in 1 standard serving. Remember: 1 carbohydrate serving is 15 grams of carbohydrate.
## SAMPLE –1 DAY MENU

**Total Carbohydrate Servings: 15 grams**

### Breakfast
- 1 small banana (1 carbohydrate serving)
- 3/4 cup corn flakes (1 carbohydrate serving)
- 1 cup fat-free or low-fat milk (1 carbohydrate serving)
- 1 slice whole wheat bread (1 carbohydrate serving)
- 1 teaspoon soft margarine

### Lunch
- 2 ounces lean meat (for sandwich)
- 2 slices whole wheat bread (2 carbohydrate servings)
- Raw vegetables: 3-4 carrot sticks, 3-4 celery sticks, 2 lettuce leaves
- 1 cup fat-free or low-fat milk (1 carbohydrate serving)
- 1 small apple (1 carbohydrate serving)

### Snack
- 1/4 cup canned apricots (1 carbohydrate serving)
- 3/4 ounce unsalted mini-pretzels (1 carbohydrate serving)

### Evening Meal
- 3 ounces lean roast beef
- 1/2 large baked potato (2 carbohydrate servings)
- 1 tablespoon reduced-fat sour cream
- 1/2 cup green beans
- 1 vegetable salad: lettuce, 1/2 cup raw vegetables, 1 tablespoon light salad dressing
- 1 small whole wheat dinner roll (1 carbohydrate serving)
- 1 teaspoon soft margarine
- 1 cup melon balls (1 carbohydrate serving)

### Snack
- 6 ounces low-fat fruit yogurt with sugar-free sweetener (1 carbohydrate serving)
- 2 tablespoons unsalted nuts

### Notes:

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This handout may be duplicated for client education.
SAMPLE MENU

Use this form to develop an individual Meal Plan

Breakfast

Lunch

Snack

Evening Meal

Snack

Notes:
CARBOHYDRATES, PROTEINS & FATS

GLUCOSE = ENERGY

CARBOHYDRATE: Affects blood sugar the most; begins releasing energy immediately.

Simple sugars (less nutritious): sugar, soda, honey, syrup, fruit juice and products containing added sugar

Complex carbohydrates: starches (i.e., bread, cereal, rice, pasta, potatoes, crackers, beans), fruit, milk, yogurt

PROTEIN: Does not generally cause an immediate rise in blood sugar. Can affect blood sugars in some people if eaten in large amounts. Can also contain high amounts of fat.

Plays an important role in tissue repair and building
Takes longer to break down than carbohydrate.

Meats, fish, chicken, cheese, cottage cheese, eggs, peanut butter, tofu

FAT: Does not cause an immediate rise in blood sugar. Can delay the absorption of carbohydrates.

Twice as many calories as carbohydrate and protein
Very little breaks down into energy for short-term use

Oils, margarine, butter, mayonnaise, salad dressing, nuts, avocado, bacon, cream cheese, sour cream, etc.

A meal of mixed nutrients lasts about 4 hours in the body

Reviewed/Revised 11/10
INSURANCE INFORMATION

If you are a resident of the State of Nevada and do not now have health insurance and you have been denied health insurance because you have diabetes or another pre-existing condition, you are now eligible to get healthcare coverage. If you do have health insurance, but your current policy excludes diabetes or other pre-existing condition related coverage, it can no longer discriminate against you.

If you need help enrolling in a plan contact the Health Insurance Exchange NV: www.exchange.nv.gov

ACCESS TO HEALTHCARE: www.accesstohealthcare.org

You do not need to enroll in Health Insurance though the Exchange. There are many insurance agents who sell health insurance plans for individuals and small businesses. You can compare rates at sites like www.gohealthinsurance.com. Please note: The NDA does not endorse this site. This is used as a resource example.

You can also find a Health Insurance Broker to help you find the plan that is best for you.

www.agent-finder.org

For questions about insurance contact the Nevada Division of Insurance: www.doi.nv.gov. For information on what Medicare covers for diabetes medications and durable medical equipment please visit: www.medicare.gov.
YOUR GENEROSITY WILL HELP TO SEND KIDS WITH DIABETES TO THE NDA’S CAMP VEGAS & CAMP BUCK!

Please donate today by visiting our website at: www.diabetesnv.org

Thank you!!!