## Goal Setting Worksheet for the Patient

Goal										
What I will do										
When I will do it										
How often I will do it										
Who will help me										
Problems to										
reaching this goal										
What I can do to fix										
the problem										
How certain are you that you will reach	1	2	3	4	5	6	7	8	9	10
your goal? (Circle one)	Not Sure Ma					laybe Very Sure				
My reward when I										
reach this goal										



## Going for My Goal **Long-Term Goal: Short-Term Goal: Action Plan: Support Network:** What help will I need from my Support Network to accomplish my goals?







## **DIABETES SELF-MANAGEMENT BEHAVIOR GOALS WITH GRAPHICS**

C 10		<u> </u>
Self-		
Management	Choose a goal(s) that is realistic and obtainable.	
Goals	Use the extra space to personalize your goal(s).	Follow-up Date/Comment
Goal 1:		
Be Active		
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Goal 2:		
Healthy Eating		
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Goal 3:		
Taking		
Medication		
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Goal 4:		
Monitoring		
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Goal 5:		
Problem Solving		
No.		
Goal 6:		
	I will decrease my risk of complications though	
Reducing Risk	these preventive care goals:	
Ro XIII	☐ Lower or maintain my A1c at	
00	☐ Schedule a dilated eye exam	
20 9%	☐ Have a fasting lipid panel	
100	Get my urine checked	
1 (2)	☐ Stop smoking	
- C (X)	See my provider every 3 to 6 months	
de V	☐ Have my blood pressure checked each visit	
es -	Obtain a flu shot annually and pneumonia shot	
000	Check my own feet daily	
100		
	List additional goal:	
Goal 7:		
Healthy Coping		
5 7 7 8		