

Hypoglycemic Fear Survey

☐ **Hypoglycemic Fear Survey Not Completed** [HypoFearSurvNotDone](#)

If Hypoglycemic Fear Survey Not Completed, please provide details in the COMMENTS section.

SURVEY COMPLETION DATE [HypoFearSurvCompDt](#)

1. Date survey completed: __/__/____

HYPOGLYCEMIC FEAR SURVEY

1. Eat large snacks at bedtime [LgSnackBed](#)

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4

2. Avoid being alone when my sugar is likely to be low [AvoidAloneLowBG](#)

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4

3. If test blood glucose, run a little high to be on the safe side [TestBGRunHigh](#)

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4

4. Keep my sugar high when I will be alone for a while [HighBGAlone](#)

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4

5. Eat something as soon as I feel the first sign of low blood sugar

[EatFirstSignLowBG](#)

<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
6. Reduce my insulin when I think my sugar is low RedInsThinkLowBG				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
7. Keep my sugar high when I plan to be in a long meeting or at a party KeepHighBGMtg				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
8. Carry fast-acting sugar with me CarryFastActSug				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
9. Avoid exercise when I think my sugar is low AvoidExThinkLowBG				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
10. Check my sugar often when I plan to be in a long meeting or out to a party CkSugOfftMtg				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
11. I worry about not recognizing/realizing I am having low blood sugar WorryNotRecLowBG				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
12. I worry about not having food, fruit, or juice with me WorryNoFood				
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
13. I worry about passing out in public WorryPassOut				

<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
14. I worry about embarrassing myself or my friends in a social situation WorryEmbarSocial
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
15. I worry about having a reaction while alone WorryReacAlone
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
16. I worry about appearing stupid or drunk WorryAppStupDrunk
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
17. I worry about losing control WorryLoseCntrl
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
18. I worry about no one being around to help me during a reaction WorryNoHelp
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
19. I worry about having a reaction while driving WorryReactDrive
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
20. I worry about making a mistake or having an accident WorryMistAcc
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
21. I worry about getting a bad evaluation or being criticized WorryBadEvalCrit
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4

22. I worry about difficulty thinking clearly when responsible for others

WorryRespForOthers

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4

23. I worry about feeling lightheaded or dizzy **WorryDizzy**

☐ 0

☐ 1

☐ 2

☐ 3

☐ 4

COMMENTS