

GETTING STARTED WITH CARELINK® PERSONAL SOFTWARE



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Introducing CareLink® Personal Software

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CARELINK® PERSONAL SOFTWARE - BEFORE YOU START



Devices You Can Read with CareLink Personal Software*

- MiniMed[®] series pumps
- Guardian[®] monitors
- Various glucose meters

The complete user guide for CareLink Personal software is located in the **Help** section after you log in to the web-based software.

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Welcome Back,	What Can I Do Next? Upload Data from My Device Image: Construction of the second seco
The Online Store is open - 24 hours a day The <u>Online Store</u> remains open to you around the clock and is the best way to order additional supplies or accessories like pump cases, remotes and data management products. Register today and learn more about <u>mySupplyConnection</u> : our pump supplies, automatic delivery program.	NOW Available! New CareLink USB Upload Device. To upload data to the system you'll need a cable or other connectivity device. For the latest promotion on the new <u>CareLink USB</u> upload device - <u>click here</u> . If you need a cable for your meter please contact your meter company.

How to Use This Getting Started Guide

This Getting Started Guide will provide you with instructions on how to sign up for a CareLink Personal account, uploading your devices, and tools to use as you evaluate some of the reports in CareLink.



NOTE: Prior to updating your computer operating system, you may want to check **https://carelink.minimed.com/patient/en/faq.jsp#browsers** to be sure that the updated operating system will be compatible with the CareLink Personal software.

*A list of supported devices is available in the user guide of CareLink Personal.

What is CareLink?

CareLink Personal software allows you to upload information from your insulin pump, continuous glucose monitoring (CGM) device, and blood glucose meter to historically record your diabetes management through a free web-based program, making it easier to discover trends and patterns.

What Do I Need to Start?

You will need a computer that is either Windows or Mac. All it takes to get started is an easy upload using the CONTOUR®NEXT LINK Blood Glucose Meter or the CareLink USB device provided with your MiniMed® series pump or Guardian® monitor.

What Can I View in CareLink?



Therapy Management Dashboard

Discover trends and patterns to follow your progress.

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Sensor & Meter Overview Page 3

Uncover the relationship between daily activity and behaviors with glucose maintenance. Do certain activities cause a spike or drop in your blood sugar? Is it consistent every day at the same time or was the sudden change in your glucose readings due to an isolated event such as a long day walking in a shopping mall or at a park?



Daily Details

Understand the relationship between food and glucose control. An example is uncovering how mindless snacking can lead to frustration in maintaining normal glucose levels. Perhaps your insulin dosing was not enough for the carbs you were eating.

If no sensor information is available, you can still investigate details in these reports to help make therapy adjustments with your healthcare provider

SET UP - BEFORE YOU START



Before You Upload to CareLink

When you are ready to upload to CareLink, make sure to have your insulin pump or Guardian[®] monitor and all BG meters on hand. If you are using a linked meter, those BG values will be in your insulin pump or Guardian monitor and you will not need to upload your meter.

CareLink will walk you through the upload process, telling you which device to upload and when to connect it. Simply follow the instructions in each window, making sure to click **Next** when you are ready to move on.



NOTE: Wait until prompted to connect your USB device to a USB port on your computer.



Where Do I find my USB port?



CareLink® USB









Your insulin pump may go into Suspend mode and stop delivering insulin during the upload process. The software will automatically return it to normal operation when the upload process is complete.



You may not be able to upload if your pump is in a special feature mode and you see the open circle next to your reservoir icon on the pump screen. Complete or cancel any bolus or temp basal in progress before you upload your device.



Make sure your computer and your device(s) are displaying the current date and time. They should be within one minute of each other to ensure that the information that is shared between them is accurately displayed.



NOTE: The data uploaded from your device(s) is stored on the CareLink secure server, not on your computer. CareLink meets high standards for security. It is safer than storing data on your own computer. For more information please see our privacy policy on our website: http://medtronicdiabetes.com/carelink

SIGN UP IS EASY WITH CARELINK PERSONAL

Before using CareLink for the first time, you need to set up a user account and password. Go to: http://medtronicdiabetes.com/carelink

For a list of supported operating systems please see: http://www.medtronicdiabetes.com/support/carelink-personal

TO CREATE AN ACCOUNT, START AT THE CARELINK WELCOME SCREEN AND FOLLOW THESE 3 EASY STEPS:



Heatronic Meatronic		CareLink Personal
Enrollment Form		*-required
To enroll in the CareLink Personal below. Required information is m Submit button.	Software, enter the information requeste rked by an asterisk. When you have fini	d in the enrollment form shed filling out the form, dick on the
Login Information		
"Username:	MiniMed 🕑	
	A strong password should contain at least one character.	uppercase letter, number and special
"Password:	••••••	Strong
"Confirm Password:	•••••	
"Security Question:	Pet's Name 🔽 🚱	
	D	



1 From the Welcome screen, click the **Sign Up Now** button and select language.

Please note: There different are logins for

- Online Bill Pay
- Online Store
- CareLink Personal software

2 After you accept the terms of agreement, you'll be asked to **create a username and password.** The password can be any combination of letters or numbers from 8 to 32 characters long and include one uppercase letter, one number, and one special character. Be aware that passwords are case-sensitive.

Note: If you forget your password, click on **Forgot your password?** on the home page of CareLink Personal.

3 Enter your **personal information** in all the required fields. You will be asked to follow through the reCAPTCHA feature of enrollment on the bottom of the screen. Check the box and click **Submit.** Once you have registered, you can log in from the Welcome screen using your new username and password.

MAC USERS: Follow the steps to install the software and begin uploading your pump with instructions on page 7 once logged into the CareLink Personal software website.

BROWSER SETUP FOR INTERNET EXPLORER BEFORE UPLOAD: For Windows 7, 8, 8.1, and 10, you will need Administrator Rights.

Windows 7



1 Be sure all open windows in Internet Explorer are closed.

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Internet Explorer		0		
Medtronic Applic		Open		
Medtronic PC Inf	9	Run as administrator		
SAP CRM Prod		Open file location		
CAD CDM Tort	M	Scan for threats		

Open your Start Menu and click on
 All Programs RIGHT-CLICK on your
 Internet Explorer icon and select Run as
 Administrator. Click Allow in the User Account
 Control window.

Windows 8 or Windows 8.1



1 From the Start screen, click the Desktop tile and make sure you are viewing the desktop.



2 RIGHT-CLICK on Internet Explorer[®] icon from the task bar, RIGHT-CLICK again on Internet Explorer in the menu that appears. Select Run as administrator. Click Allow in the User Account Control window.

Windows 10



1 From your Start menu on your desktop, Go to All Apps, then Windows Accessories.

2 RIGHT-CLICK on Internet Explorer in the menu list. Select Run as Administrator. Click Allow or Yes in the User Account Control window.

UPLOADING DATA FROM YOUR DEVICE



1 Go to http://medtronicdiabetes.com/carelink, enter your user name and password, and click on Sign In.



2 DO NOT CONNECT your CONTOUR®NEXT LINK or CareLink USB to the computer until prompted. Click on **Upload Data from My Device**. Allow the Java Plug-in to load.



3 Choose device and select **MiniMed® Insulin Pump** and click **Next.** The **Check Pump Status...** screen will appear, then click **Next.**



4 Enter your pump's serial number as instructed on the **Identify the pump** screen.



UPLOADING DATA FROM YOUR DEVICE (continued)



5 Choose the correct **USB linking device** you are using. Most commonly, it will be your CONTOUR®NEXT Link meter. Click **Next** to continue.

Verity	Connections) 8	9
Δ					
	The CareLink® USB device is ready.				
	When your pump read begins, the pump will ask you to your pump within two minutes to continue.	'Allow co	nnection'. You	u must select	"Yes" on
	Click "Finish" to begin reading your pump				

6 **CONNECT** your USB linking device to your computer. The **Verify Connections** screen will appear to confirm communication between your devices and inform you when setup is complete. Click **Finish** to continue.

Looking for Pump			z .
1	Please do not navigate away from this page until the operation completes.		
	The system is waiting for your pump to respond. Please wait. This may take up to 30 seconds.		
	Read Progress (1% complete)		
	< <u>B</u> ack	lext >	<u>Finish</u> <u>Cancel</u>

A progress window will then be displayed. The amount of time it takes to upload your data will depend on how much data needs to be uploaded. When the upload completes successfully, you are now able to view your reports.

For help with troubleshooting go to:

http://www.medtronicdiabetes.com/customer-support/carelink-personal/troubleshooting

DID YOU COMPLETE ALL THESE STEPS AND STILL HAVE QUESTIONS?

Please call our 24-Hour HelpLine at 1.800.646.4633, option 1.

STARTING DISCUSSIONS WITH YOUR HCP

Tips for Using CareLink

Regularly upload and review your information using CareLink

CareLink can help you get the most out of your MiniMed insulin pump or Guardian monitor. Pick a day every other week and spend a few minutes to invest in yourself by reviewing CareLink reports to improve your glucose control. Be sure to talk to your healthcare provider before making changes to your settings.

How do patients use CareLink to help start discussions with their HCP?

Meet Sophia and Connor. They recently started on insulin pump therapy and continuous glucose monitoring. As part of their care and engagement in their own diabetes management, their healthcare providers request they upload to CareLink on a 2 week basis until their pump settings meet the desired outcome for their management goals.

They can choose reports to review alone or with their HCP. Each report displays information in different ways to help reveal the changes needed to better manage their glucose levels and maintain their progress.

To learn more about Sophia and Connor and other resources in addition to this guide, go to: **www.medtronicdiabetes.com/carelink-info** with links to videos and interactive example reports to get you started on discovering your progress in your diabetes management.

Did You Know? Your healthcare professional may be able to view your reports on their office computer if they have CareLink Pro Software. If they do not have this software, you can print out your CareLink reports to bring to your next office visit.











How to Read a CareLink Report

When using CareLink to discuss areas of improvement with your healthcare provider, start by focusing on ONE or TWO favorite reports. These reports become familiar and easier to read over time.

Hint: A good place to start is by looking at the **Therapy Management Dashboard** report (only offered if 5 days of CGM is available) or the **Sensor & Meter Overview** report and start at Step 1. Be sure to share any regular patterns with your healthcare professional.

Use the 1-2-3 approach to reading your reports. Looking at specific sections of each report will help you and your healthcare professional better manage your diabetes.

Step 1: Look at the	overnight period
Do you see a pattern of lows?	 Consider talking to your healthcare professional (HCP) about reducing your overnight basal insulin/rates. Was too much insulin given for your bedtime snack? Did you exercise later in the day or in the evening hours?
Do you see a pattern of highs?	 Consider talking to your HCP about increasing your basal insulin/rates or, if on an insulin pump, changing the timing of your basal rate to increase during the night. Was there a bedtime snack and you did not bolus? Was your BG level already high before bed?
Step 2: Look at the	period before meals
Do you see a pattern of lows?	 Consider talking to your HCP about decreasing your basal insulin.
Do you see a pattern of highs?	 Consider talking to your HCP about increasing your basal insulin.
Step 3: Look at the	period after meals
Do you see a pattern of lows?	 Were you accurately carb counting? Was insulin given at the appropriate time? Does your carb ratio need adjusting? If using an insulin pump, consider talking to your HCP about whether a Dual Wave[®] bolus would have been better for meals high in carbs and fat.
Do you see a pattern of highs?	 Were you accurately carb counting? Was insulin given at the appropriate time? Does your carb ratio need adjusting? If using an insulin pump, consider talking to your HCP about whether a Dual Wave[®] bolus would have been better for meals high in carbs and fat.



Insulin sensitivity, carb ratios and active insulin may also be contributing factors. Discuss these and any other changes (such as what to do for exercise) with your healthcare professional. Also be sure to share any regular patterns with your healthcare professional.

CARELINK® PERSONAL REPORTS: CGM

CareLink Personal Reports



To access your reports, click on the **Reports tab** after completing the upload process. You can select bundles of reports according to your interests, or select individual reports and follow along in this Getting Started Guide.

As mentioned before focus on one or two key CareLink reports at first. There are several key reports that are best for those using the pump with meter data, the pump with CGM data, and those using CGM only.

Remember Guardian users: In order to see insulin delivery, diet and exercise information in your reports, you must enter this information using the Capture Events feature in your device or the **Logbook** of CareLink.

START WITH THESE REPORTS

For Patients who use CGM

You can learn patterns of your glucose control and view average glucose and total insulin used per day as they are fixed side-by-side.

What other information can be seen:

- You can view overall progress
- You are able to identify your glucose trends and behaviors
- You can learn of patterns before highs and lows



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Therapy Management Dashboard

This report provides a summary of your glucose, carbohydrate, and insulin information. It gives an overview of your glycemic control (daily, overnight, and at meal times) and comprehensive statistical information.

If there are less than 5 days of sensor glucose and pump data in the selected date range, this report will not be generated.

Sensor & Meter Overview Page 3

This report summarizes meter glucose, carbohydrate, and insulin information. It provides an overview of your glycemic control (daily, overnight, and at meal times) and extensive statistical information. From a day to day comparison, this reports displays changes in your sensor glucose fluctuations and allows you to identify patterns.

CARELINK[®] PERSONAL REPORTS: PUMP

START WITH THESE REPORTS (continued)

For Patients who use the pump alone without CGM

You do not have CGM but you still want to track your glucose levels and insulin usage.

What other information can be seen:

- You would like to view and monitor your glucose control
- Determine if you are you using the pump correctly
- Identify if your BGs seem out of range
- Troubleshoot an imbalance of overly high BGs compared to low BGs or vice versa

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Sensor & Meter Overview Page 1

Just like the Therapy Management Dashboard, you get a summary of all your glucose, carbohydrate, and insulin information. It gives an overview of your glycemic control (daily, overnight, and at meal times).

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Sensor & Meter Overview Page 3

This report summarizes meter glucose, carbohydrate, and insulin information. It provides an overview of your glycemic control (daily, overnight, and at meal times) and extensive statistical information. From a day to day comparison, this report displays changes in your blood glucose fluctuations and allows you to identify patterns.



CARELINK® PERSONAL REPORTS

THERE ARE MORE REPORTS TO VIEW

Additional Reports







Episode Summary

Important: This report generates with the Therapy Management Dashboard when there are at least 5 days worth of CGM Data. This report is not meant to provide direction on adjusting settings but used to start conversations with your HCP at your visits. Do not attempt to make any changes to your setting without the consultation of your HCP.

Adherence

Understand how you use your pump. This report allows you to quickly discover habits based on pump use with frequency of glucose measurements, bolus events, and pump activity.

Sensor & Meter Overview Page 1

Just like pages 2 and 3, this report will generate when less than 5 days of CGM is available



Logbook

Compare BG and pump records over days and times in a logbook format.





Device Settings

Records all of your latest pump settings for safe-keeping.

Daily Details

Use this report to focus on one specific day. You can take a closer look at the events that occurred for that day and review pump use such as Bolus Events.

Therapy Management Dashboard

For an interactive review go to MedtronicDiabetes.com/TMD



At least 5 days of pump and CGM data is needed.

1 This is a great place to start recognizing trends. In this example you may see plenty of events that result in a low glucose trend. A low glucose is identified as a value less than 70mg/dL. These shaded red areas represent the amount of times you have been in this glucose range. The darker the area, the more time you have spent at 69mg/dL or below.

2 The next set of trends to identify are high glucose levels above 140mg/dL. Notice in this report that in addition to lows, there are few events that appear high. In the middle of the day, it shows a distinct pattern when all glucose moves in one direction. The yellow shaded areas become darker the more time is spent in the range above 140mg/ dL. Use **Daily Details** or the **Sensor and Meter Overview Page 3** reports to uncover the reasons for these events.

Take a look at your report and do you notice any patterns that stand out to you? If you're unsure, use the dotted black line as a place to focus your attention. This dotted black CGM line is your average of all your sensor glucose readings.

3 Use these overnight and meal buckets to see patterns surrounding bedtime, wake up, and meal times. The information above each graph contains average SG values before (pre-meal) and after (post-meal) a bolus. You will also be able to see on average how many carbohydrates are eaten per meal. Remember, not all high glucose events are bad especially after eating, however your glucose values should return to pre-meal range within 3-4 hours after a meal.

4 Use these Statistics to quickly glance at your progress. Did your average BG improve from the last time you looked at your CareLink report? Are you maintaining 4 BG readings/day?

How many carbs should you eat? Everyone is different so check with your healthcare provider or contact a dietitian for appropriate recommendations.

Therapy Management Dashboard (continued)

For an interactive review go to MedtronicDiabetes.com/TMD



5 Use this table for Hypoglycemic and Hyperglycemic Patterns to confirm the times that sensor glucose consistently goes above or below your target for an extended period of time.

6 This table shows you the distribution of your insulin usage. First, take a look at your Insulin TDD (Total Daily Dose). How much insulin do you use on average per day? This is helpful to know for when you need to calculate how many vials of insulin you need every month.

Second, take a look at your Basal/Bolus Ratio. Generally it's a good idea to be even in your Basal usage compared to your Bolus usage. For example, 50% Basal use with 50% Bolus use is good, but if your glucose is still out of range from where you would like them to be, discuss with your healthcare provider on possibly adjusting some of your settings.

Third, review your manual boluses and Bolus Wizard[®] usage. Using the Bolus Wizard calculator is the preferred method of taking insulin for meals and correction. If you rely on manual boluses to take insulin, speak to your educator or HCP on how to properly use the Bolus Wizard calculator.

Fourth, take a look at your Suspends. If you manually suspend your pump, it is recommended you do not suspend your pump for more than 1 hour.

Finally, your site and reservoir change should be every 2-3 days. Remember, every case is different. Don't get discouraged if some of your numbers don't seem "perfect". This is a good exercise to see where you can improve and where you are doing well.

7 Take a look at your Sensor wear. Your average SG is an average of all your sensor glucose readings. Does your average SG appear to be in the range of your glucose control goals? Don't forget that your Avg SG is a daily average of up to 288 readings/day when compared to your Avg BG. Avg BG is an average of your fingersticks and only snapshots in time when those BGs were taken.

Do you see more SG alarms than you can manage? Discuss with your healthcare provider if your sensor settings need to be changed.

Adherence Report

For an interactive review go to MedtronicDiabetes.com/adherence

	Glucose Meas	urements 2	Bolus Events	3				Fill Events					4
1	BG Readings	Sensor Duration (h:mm)	Manual Boluses	Bolus Wizard Events	With Food	With Correction	Overridden	Rewind	Cannula Fills	Cannula Amount (U)	Tubing Fills	Tubing Amount (U)	Susper Duratio (h:mm
Friday 11/20/2015	5	24:00	4	8	8	5							
Saturday 11/21/2015	6	23:40	3	7	4	5		1	1	0.5	1	9.7	0:08
Sunday 11/22/2015	3	24:00		7	6	1							
Monday 11/23/2015	4	24:00	2	6	5	3	5	1	1	0.5	1	10.8	2:00
Tuesday 11/24/2015	6	24:00	1	6	4	3							2:01
Wednesday 11/25/2015	7	18:00	1	7	6	5							
Thursday 11/26/2015	7	21:15	1	8	3	6		1	1	0.5	1	9.6	2:00
Friday 11/27/2015	8	24:00	2	10	6	7							3:46
Saturday 11/28/2015	5	24:00		4	2	4		1	1	0.5	1	9.4	
Sunday 11/29/2015	4	23:40		5	4	1							0:01
Monday 11/30/2015	6	23:30		6	5	2							
Tuesday 12/1/2015	5	20:35		6	5	3		1	1	0.5	1	9.7	
Wednesday 12/2/2015	5	10:35	1	9	5	5							
Thursday 12/3/2015		-		-		-		-		-		-	
Summary	5.5/day	11d 21h 15m	1.2/day	6.7/day	70.8%	56.2%	0.0%	5	5	0.5U	5	9.8U/fill	9h 56n

1 Take a look at your blood glucose readings every day. According to the American Diabetes Association, best practice is to check your blood glucose before each meal and before bedtime. That's about 4 BG readings per day. Do you meet the ADA's best practice recommendations?

2 If you are wearing a Continuous Glucose Monitor (CGM), knowing your sensor wear duration is beneficial in managing tight glucose control. Maintaining 24:00 hours of wear is ideal.

3 Take a look at your Manual bolus (giving a set amount of insulin) vs Bolus Wizard® Events. It is recommended you use the Bolus Wizard calculator when taking insulin for food and correcting high blood glucose readings. Using the bolus calculator benefits both you and your HCP in making easier adjustments in your pump settings. Manual boluses should be used only after discussions with your HCP on when it is appropriate to use them.

Be sure not to manually suspend your pump
 for more than 1:00 hour at a time unless
 advised by your HCP. Reasons to manually
 suspend your pump are commonly done for
 showering and water activities.

If you notice your pump suspended and you have a Threshold Suspend TP, there was a time when your SG levels were low and your pump had to suspend your basal insulin. A Threshold Suspend event can last a maximum of 2 hours. If there are frequent occurrences of Threshold Suspend events, be sure to consult with your healthcare provider for possible changes to your basal rates.

5 Note how many times you Rewind your pump and how often. Remember you should be changing your reservoir and infusion set every 2-3 days for proper pump wear, so you should see a Rewind event occur every 2-3 days.

Sensor & Meter Overview Page 1

For an interactive review go to MedtronicDiabetes.com/sensor-meter1



1 First, look at your overnight period. This is the time frame from when you go to sleep to the time you wake up.

Can you identify any trends such as low glucose patterns? A low glucose is identified as a value less than 70mg/dL. The shaded red areas represent the amount of times you have been in this glucose range.

2 Look at your bedtime hours and determine if your overnight pattern appears to have more highs, represented by the yellow peaks which get darker as you spend more time above 140mg/dL. Possible causes could be:

- Did you go to sleep high or have a bedtime snack?
- Was dinner a larger meal than usual and perhaps a correction bolus was needed to treat a high BG afterwards?

These are all great discussion points to have with your healthcare provider (HCP). You are able to discover and recognize patterns in behavior that will help you get closer to your goals. **3** Take note that these are patterns of lows from bedtime to wake-up period.

4 Use these meal buckets to see patterns surrounding meal times. The information above each graph block contains average SG values before (pre-meal) and after (post-meal) a bolus. You will also be able to see on average, how many carbohydrates are eaten per meal. Remember, not all high glucose events are bad, especially after eating, however your glucose values should return to pre-meal range within 3-4 hours after a meal.

A Note: You can adjust these times to be accurate to your meal schedule by going to Preferences in the CareLink website.

Sensor & Meter Overview Page 2

For an interactive review go to MedtronicDiabetes.com/sensor-meter2



1 Look at the overnight period (bedtime to wake-up). Every line represents a day in the reporting period and a faded dot represents the time a BG was recorded.

Do you see a pattern of more than 3 occasions when your BG was below 70mg/dL or above 140mg/dL? Consider talking to your healthcare provider about adjusting your overnight basal. You can also determine your Average BG by looking at the placement of the diamonds and if they fall outside the gray shaded area.

2 Look at the period before meals. These meal buckets provide an average BG one hour before the meal. Do you see an average of lows or highs before the meal? Consider talking to your HCP about adjusting your basal insulin.

In this example, Lunch time appears to have an above average BG before the meal and could possibly require an adjustment.

3 Look at the period after meals and determine if you see a pattern of severe lows after eating, or a consistency of high BGs. Perhaps an adjustment

in your Insulin to Carb Ratio can help improve your post meal BG. Use this report to start a discussion with your HCP.

4 Use these Statistics to quickly glance at your progress.

Did your average BG improve from the last time you looked at your CareLink report?

Are you maintaining 4 BG readings/day?

Are you going above or below your carb requirements, or do you need to meet with an educator to determine an appropriate daily recommendation?

This table shows you the distribution of your insulin usage in Total Daily Dose (TDD). This is a good number to know to determine how many vials of insulin you will need on a monthly basis.. Generally, it's a good idea to be even in your Basal usage compared to your Bolus usage. 50% Basal use with 50% Bolus use is good, but if you're BGs are still out of range of where you would like them to be, discuss with your healthcare professional on possibly adjusting some of your settings.

Sensor & Meter Overview Page 3

For an interactive review go to MedtronicDiabetes.com/sensor-meter3



1 Review consistency of all your SG readings in this report. Are they always high, or are they frequently low? Maybe you generally handle your glucose management well but you noticed one bad day. Don't become discouraged. Take a look at the whole picture instead of focusing on one event.

2 Take a look at the times a bolus was given. Does it have a meal/snack and BG paired with the bolus each time? Did you know that it is best practice to use the Bolus Wizard calculator when eating carbs and checking your BG? Your HCP can evaluate if your settings are appropriate for you.

This is called a correction bolus, when there are no carbs entered with a BG event. Insulin was given for a high BG and you can see the effect of that bolus by looking at the next BG. In this example, this patient took 2.1 units of insulin for a BG of 158. Three hours later, new BG is 89. Discuss with your HCP what is an appropriate change in your BGs after eating food and taking insulin. Note: solid dots = Blood Glucose (BG) readings solid line = sensor or SG readings. The CGM line shows you glucose levels between BG readings.

B Note: Carbohydrate entries that indicate a meal or a snack eaten are in the black bar.

C Note: These red buckets indicated a Threshold Suspend in which your SG level reached or went below a set threshold level. The wideness of the red bucket tells the length of the suspend event. No Threshold Suspend event will be longer than 2 hours.

Logbook



For an interactive review go to MedtronicDiabetes.com/logbook

1 Each bolus event can contain up to 3 numbers. All 3 numbers do not have to be present to be recorded. Any number can be displayed by itself or all at the same time.

- Top number is your BG reading. In this example, the BG is 79
- The middle number in the black bar is your carb entry. In this example, 20 grams of carbs were consumed at this time.
- The bottom number is the insulin dose given. In this example, 3.8 units were given for this bolus event.

2 Each row is a different day of this reporting period. Refer to your Daily Totals to see Average Glucose compared to other days.

Was it a holiday when you ate more carbs than usual? You will see different levels of glucose control in your reports depending on your reporting period. Speak to your healthcare provider when reviewing habits or patterns in your report or isolated events. **3** Did you forget to enter a meal or perhaps you were fasting on a particular day? These squiggles indicate a skipped meal.

A Note: These meal labels are used to indicate the times when a certain meal is eaten. Use these meal buckets to organize the approximate time you eat each meal.

You can set these times in the Preferences section of the CareLink website.

B Note: This is a bolus with no carbs entered and a correction bolus was given.

Device Settings

For an interactive review go to MedtronicDiabetes.com/device-settings

Γ	- 	edtro	uc w	evice Sel ednesda	ttings Snaps y 12/2/2015	shot 8:48 PM												
L	Basal						Bolu	15						s	ensor			
Maximum Basal Rate 3.00 U/Hr								Maximum Bolus 25.0 U							Sensor	On		
Temp Basal Type Percent of Basal						Dual/Square (Variable) Off								Transmitter ID				
							B	llood Glucose I	Reminder	Off					BG Units	mg/dL		
1	Standar	d (active)	Pattern A	,	Pattern B	3												
Г	24-Hou Tota	47.100 U	24-Hour Total		24-Hour Total		E	lasy (Audio) Bo	olus Off		Mi	ssed		4	Glucose	On		
L							Entry (Step) 0.10 U Reminder Off					r i		Anto	Low	High		
L	TIME U/hr TIN		TIME	TIME U/hr TIME U/hr			Relies Missard Co.				Start (h:mm)	Start End (h:mm) (h:mm)			TIME	(mg/dL)	(mg/dL)	
L	0:00	0:00 1.65											0.00	00	240			
L	3:00	3:00 1.80				2 4	U Active Insulin T	ime	alar alar						-			
L	5:00	2.20					2	(h:r	nm) 4:00									
L	15:00	1.95					Ins	ulin Concentra	tion									
l	20:00	1.70					Carbol (g/U)	nydrate Ratio	Insulir (mg/dl	Sensitivity . per U)	Blood Target	Glucose (mg/dL	2					
L		_		_			TIME	Ratio	TIME	Sensitivity	TIME	Low	High					
L				_			0.00	4.0	0:00	18	0.00	100	120					
L				_			6:00	3.5	7:00	12					Alert Repeat	0:20	2:00	
L							11:00	4.0	9:30	15					Prodiction Alert	0#		
L				-	+		17:00	4.5	20:00	20					Low Nich (mint)	16	16	
L															cow (mgn (mms)	10	15	
L		_													Rate Alert: Fall Rise (mg/dL/min)	Off	Off	
L															AUC Limit: Low High (mg/dL)	70	180	
L		-					Note	s							Missed Data/Weak Signal (h:mm)	0:30		
L															Graph Timeout (h:mm)	0:02		
L					11													
L															Calibration Reminder (h:mm)	1:00		
L															Calibration (Alert) Repeat (h:mm)	0:30		
					t I										Itilities			
L															Alert Type	Been Mediur	n	
L															Threshold Suspend (mg/dL)	70		
L															Low Reservoir Warning	Insulin Units		
					+										Amount	30 U		

1 Take a look at your Standard pattern on your CareLink report. These basal rate(s) are your Basal Settings. The Standard pattern is your regular basal pattern. You might have one set of basal rates, or you might have another set or three, which are called Pattern A & B. The (active) indicates what basal pattern is currently running.

- 2 These are the 4 settings that make up your **Bolus Wizard Settings**.
 - Carbohydrate Ratio
 - Insulin Sensitivity
 - Blood Glucose (BG) Target
 - Active Insulin

Review your settings with your healthcare provider in accordance with your findings in your CareLink report. You may only have one number for Insulin Carb Ratio and Insulin Sensitivity or you may need several. This report page will record all changes to your pump settings. It is a good idea to record these and hold onto your Bolus Wizard settings. **3** Pattern A and Pattern B are extra basal patterns you can program in the pump for when you need to adjust your basal settings without having to change your Standard pattern.

Shift workers or those who have different basal needs during certain periods of time will use these different basal patterns and shift between them as needed.

4 This section contains your Sensor Settings. Speak to your healthcare provider for adjustment if some sensor alarms are a nuisance and are too conservative for your glucose monitoring needs.

Daily Detail

For an interactive review go to MedtronicDiabetes.com/daily-detail



1 This table will list all Bolus Events up to ten. Statistics for each bolus event is listed under the designated number.

You can historically view a bolus amount given by the pump and see how the bolus was calculated.

2 You can view a suspend event. A red suspend was a suspend that occurred from a low sensor glucose (SG). The bells above the suspend indicate the beginning and end of that suspend event.

Take a look at your own report. Do you notice plenty of suspend events throughout the day and it is reoccurring everyday? Can those suspend events be explained such as activity or eating out and incorrectly counting your carbohydrates? If no, it is a good idea to speak to your healthcare provider about adjusting settings.

This bolus activity is numbered and referenced in the table labeled Bolus Events. You are able to view your BG reading from your meter, paired with your sensor tracing. If a bolus was given, you are able to see the bolus amount in green, paired with the carbohydrate entry in black.

During the day, you may use a temporary basal, which is shown by the dotted green line. A temp basal is used if you need more or less basal insulin than what is already set in your pump for a temporary period of time.

4 Here are your daily Statistics similar to the Therapy Management Dashboard or Sensor & Meter Overview reports.

Compare your Average BG for the day with the average of the reporting period. Was this day out of the ordinary or within average of your glucose control?

Did you check your BG 4x/day as recommended? Were your readings mostly above your target range or below?

Take a look at your insulin distribution and carbohydrates eaten. Compare it to your reporting period average.

Fine-Tuning Alarm and Alert Settings

Too many alarms and alerts are a common concern when using CGM. CareLink[®] helps to show when a change should be made to your alarm or alert settings.

Excessive alarms and alerts can cause difficulty and frustration with the system. If you see a similar pattern in your reports, consider modifying your alert or snooze settings.

Pump alarms – If you have a Threshold Suspend enabled pump and notice a pattern of frequent Threshold Suspend events occurring in your reports, its a good idea to discuss this with your healthcare professional. A good example would be every night there is consistency of multiple of Threshold Suspends events, similar to this example below.

					ireal/set			Lunch	1.1	Dene						
ccae p/dL) 300			••													
200							14	-			1		-	4		
70 0 0 0			10	10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					R°0							
40 • (g)	v .		16	1	21		21	į.		26	45					
e) • •	10				\$7		1	13		14.5	9.0					
15 suin Utri 3			12													
						17 111	12.004	2.004						Π		
12 400 2 400		4.60	(1)		2	10 AM	9	200	494		(1)	10.10		6		
lus Events										Statistics	2/8		1/4 -	2/2		
Bolus Even	1	2	3	4	5	6				Avg BG (mg/dL)	107		167 ±	67		
Time	5:45 AM	7:45 AM	12:27 PM	6:54 PM	8:21 PM	11:01 PM				BG Readings	5		351	7		
Bolus Type	e Normal	Normal	Normal	Normal	Normal					Readings Above Target	2	40%	220			
Delivered Bolus Norm (U	1.20	5.70	18.3	14.5	9.00	-				Readings Below Target	1	20%	18	_		
Square Portion (U, n:mm										Sensor Avg (mg/dL)	120 ± 4;	2	154 ±	57		
Recommended Bolus (U	1.20	5.70	10.5	14.0	9.00					Ava AUC > 140 (ma/dL)	9.1	1d 0h	30.4	4		
Dimerence (O		24	76	76						Ava ALIC < 70 (moldi)	0.9	1d 0b	0.5	4		
Carb Patio Satting (g)	40	3.0	45	50	40	50				ing too the (ingroup	0.01		0.01			
Eood Bolus (II	3.70	7.00	16.6	15.0	9.00					Daily Carbs (g)	231		317 ±	c 70		
BG (mg/dL	55	85	146	93		156				Carbs/Bolus Insulin (g/U)	4.7		3.8			
BG Target Setting (mg/dL	100 - 120	100 - 120	100 - 120	100 - 120	100 - 120	100 - 120				Total Dally Insults (II)	03.0		100.4.1			
Insulin Sensitivity Setting	10	12	15	15	20	20				Polity Provide (U)	33.6	105	47.0	0.		
(mg/dL per U	10	16	10	15	20	20				Daily Basal (0)	40.7	5000	-1.9			
Correction Bolus (U	-2.500	-1.300	1.70	-0.500	-	1.80		_		Daily Bolus (U)	40.7	52%	84.5			
Active Insulin (U		0.600			9.60	2.20				Fills	-		46	254		



NOTE: Alarms and alerts should serve as a helpful reminder and should not be a nuisance.

APPENDIX



1 Saving Reports – If you already have Adobe® Acrobat® installed on your computer, you can use your mouse to hover the bottom of the report. A gray, see-through bar will appear and you will be able to Save or Print your report from your computer. Type a name for the report in the field for the file name and click Save.

2 Printing Reports from the Browser – Once the report you generated is displayed, click File from the browser to open the print dialog box and print the report.

3 Emailing Reports from the Browser – To email a report to your healthcare professional, Microsoft® Outlook® users can simply click Send Page by email from the browser's File menu. An email form will automatically open with the report already attached. Simply type in your healthcare professional's email address and click Send.

If you have a different email program, be sure your report is saved where you can easily find it. Start a new email message to your healthcare professional and use the Attach function to embed the report in the message.

Be sure to get your healthcare professional's permission before emailing reports to them. Also, be aware that email may not be a secure form of communication. Your medical information contained within an emailed report is no longer protected under the security of the CareLink Personal Software system.

Medtronic Diabetes also offers a professional version of CareLink, CareLink Pro. It allows your healthcare professional to view your CareLink information so you don't have to email or print your reports. Ask your healthcare professional if they have this software and are able to use it to access your CareLink reports.

Exit

CareLink Pro



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Toll-free: 800.328.2518 (24-hour technical support for physicians and medical professionals)

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