



maximizing Dexcom Clarity

Dexcom Clarity enables you to deliver
effective, efficient, and meaningful care
for your patients with diabetes.*

*An internet connection is required for patients to send their glucose data to Dexcom Clarity via a compatible smart device: dexcom.com/compatibility.
1 Polonsky WH, et al. Diabetes Technol Ther. 2022;24(7):492-501.
2 dQ&A Dexcom HCP Clarity Custom Survey Report, 2023.

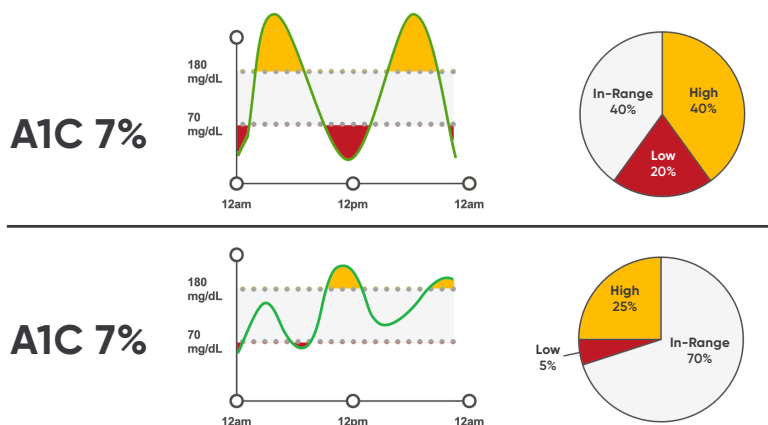
dexcom
CLARITY

DID YOU KNOW?

The goal of this workbook is to become familiar with CGM data interpretation and Dexcom Clarity reports by reviewing patient scenarios. Let's start with the value of metrics beyond A1C.

A1C is a reflection of average glucose over the last 2-3 months but does not identify glycemic variability.¹ CGM data provides the actual average glucose and can identify patterns of hypo- and hyperglycemia, assess glycemic excursions and glucose variability to allow for therapy modification.¹

Same A1C but CGM Patterns Drive Different Treatment Plans²



Estimated A1C for a Time in Range (TIR) level³

TIR 70-180 mg/dL	A1C
20%	10.6%
30%	9.8%
40%	9.0%
50%	8.3%
60%	7.5%
70%	6.7%
80%	5.9%
90%	5.1%



Each 5% increase in TIR is considered clinically significant.¹

For every 10% increase in TIR = ~0.8% A1C reduction.³

KEY METRICS

Number of days with CGM data

14+ days recommended

Percentage of time CGM is active

>70% of data recommended

Mean glucose

The average glucose

Glucose Management Indicator (GMI)

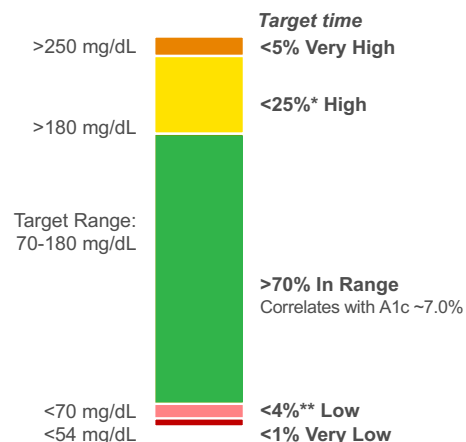
Calculated using average sensor glucose data and can be an indicator of how the glucose levels are managed. GMI will likely differ from A1C.

Coefficient of Variation (CV)

Measure of glycemic variability ≤36% is recommended¹

GOALS FOR TIR

Recommended Time in Range for most people with T1D and T2D^{1***}



¹Includes percentage of values >250 mg/dL. ^{**}Includes percentage of values <54 mg/dL. ^{***}Type 1 diabetes. Type 2 diabetes. Recommendations from the International Consensus on Time in Range, 2019 recommend individualized glycemic targets for high risk and/or older adults with a focus on reducing the percentage of time spent less than 70 mg/dL and preventing excessive hyperglycemia. 1 Battelino T et al. Diabetes Care. 2019;42(8):1593-1603. 2 Adapted from <https://diatribe.org/BeyondA1c>, Accessed May 15, 2026. 3 Vigersky RA, et al. The Relationship of Hemoglobin A1C to Time-in-Range in Patients with Diabetes. Diabetes Technol Ther. 2019;21(2):81-5.

SCENARIO 1: SIMON

Simon arrives at his PCP's office today for his yearly physical.



History

- 53 year-old
- T2D for 12 years
- A1C 8.1%



Medication

- Basal insulin 68 units QHS
- Metformin max daily dose
- DPP4i max daily dose

[illegible]

Simon checks his glucose each morning with his meter. His fingersticks are typically between 90-150 mg/dL. He is confused why his A1C is high.

Based on the blood glucose log and his A1C of 8.1%, what are your recommendations for Simon?

Dexcom Clarity reports, such as the AGP and Overview reports, simplify data interpretation and can facilitate meaningful discussion with Simon about his glucose data.

At the office visit, Simon's HCP gave him a Dexcom G7 15 Day sample.

DID YOU KNOW?

The AGP report is a standardized glucose report created by the International Diabetes Center (IDC). It summarizes glucose values, shows variability around the mean glucose, and shows single-day glucose values to help identify patterns and progress.

Review Simon's AGP report (Figure 1).

Is there enough data to analyze Simon's AGP report (goal >70% time CGM active)?

Yes ☐ No ☐

What is Simon's:

Time in range (TIR)?

Time above range (TAR)?

Time below range (TBR)?

What is the coefficient of variation (%CV)?

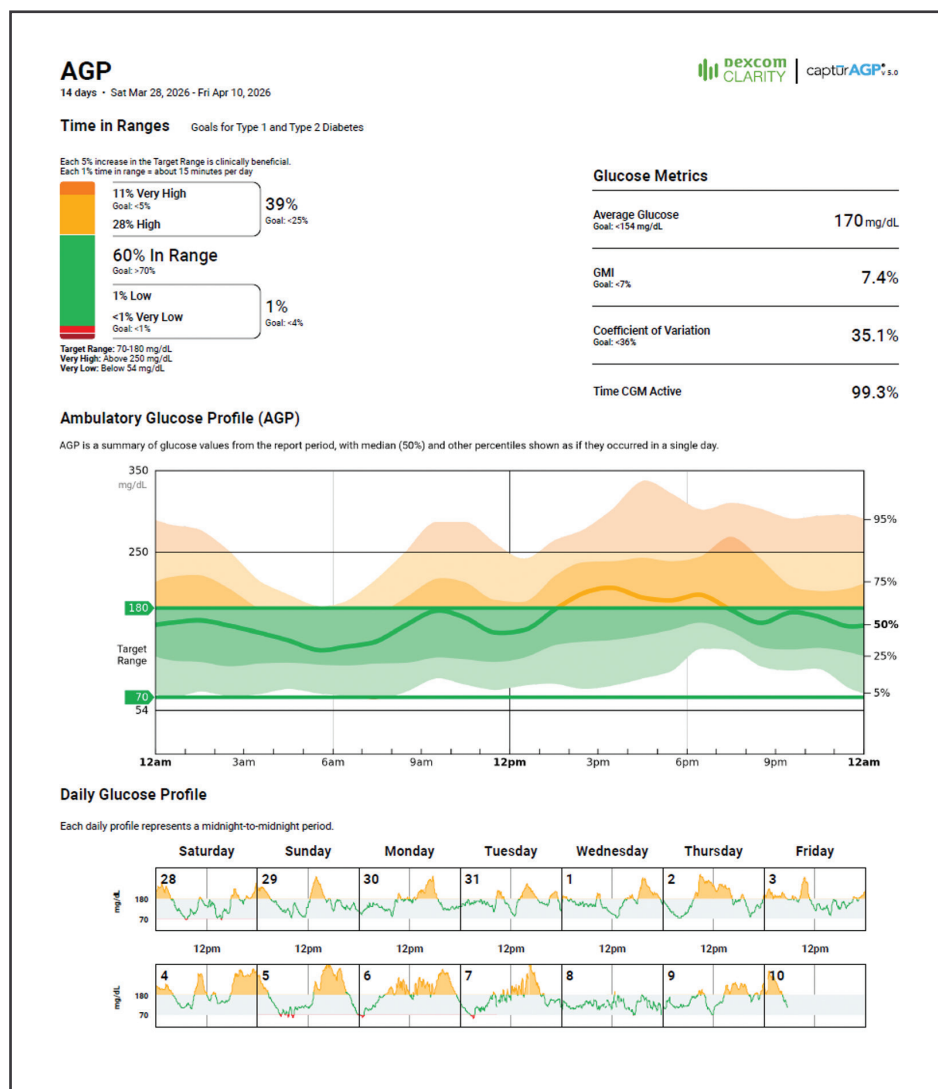


Figure 1

Are there patterns of hypoglycemia? If so, where?

Are there patterns of hyperglycemia? If so, where?

What pattern(s) would you prioritize at this visit?

SCENARIO 2: ARIEL



History

- 69 year-old
- T2D for 13 years
- A1C 7.9%



Medication

- Basal insulin 35 units QHS for past 4 years
- Metformin XR max dose daily
- History of intolerance to SGLT2i and GLP-1 RA

Ariel's HCP wants to add mealtime insulin, but she is resistant to starting because of her fear of lows.

Ariel agreed to trial a Dexcom G7 15 Day sample at the office visit.

Her "Aha moment" came after wearing Dexcom G7 15 Day for just a few days. She agreed to start taking insulin at dinner because it is her largest meal of the day and results in a glucose >180 mg/dL most nights of the week.

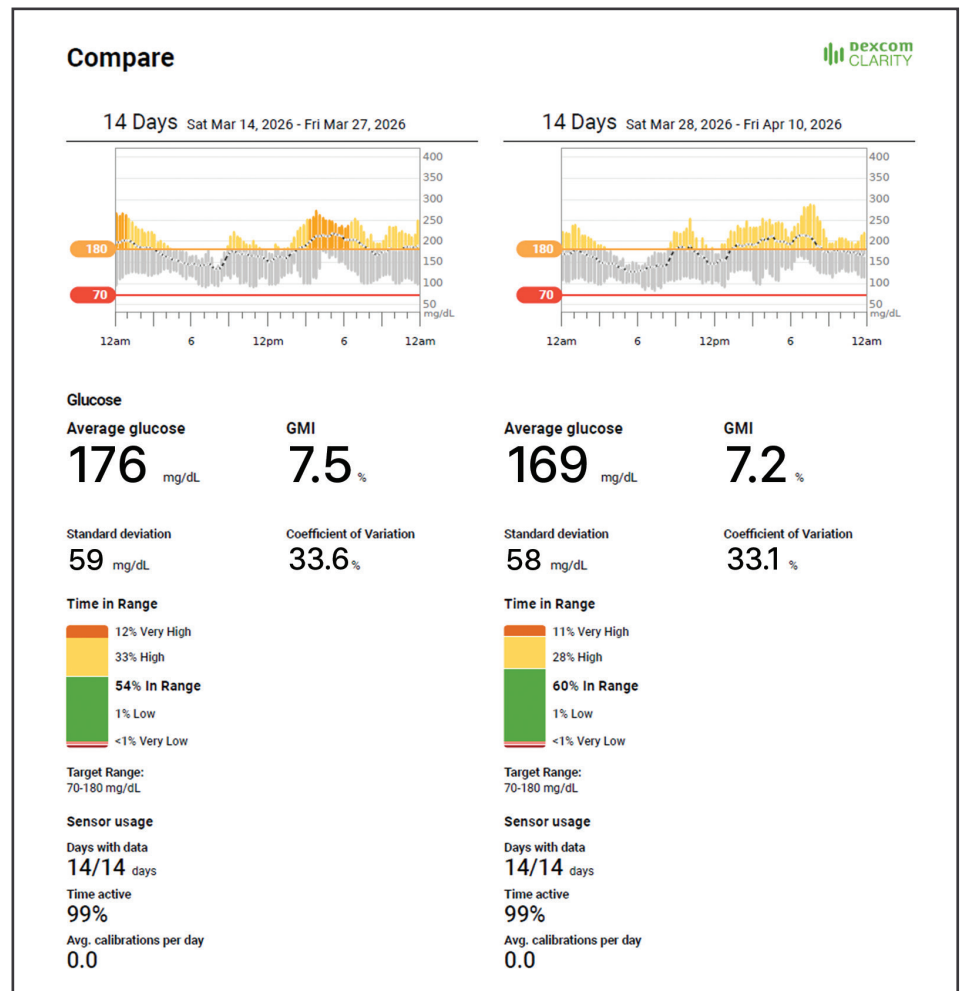


Figure 2

2 weeks later, you will see her Dexcom Clarity Compare report (Figure 2).

What difference(s) do you notice when comparing the trend graph of the first 14 days to the second 14?

How did the average glucose and GMI change?

Is the change in time in range (TIR) clinically significant?

What time(s) of day showed the greatest improvement and how?

DID YOU KNOW?

Dexcom Clarity provides a holistic view of relevant glucose patterns, trends, and statistics to support effective diabetes management.

The Compare report can be used to encourage progress and identify recent changes after a medication adjustment or lifestyle change. You can choose the most recent 7, 14, 30, or 90 days to compare or select a custom date range.

The Compare report also provides glucose patterns and identifies recent changes to the patterns. What do you notice about the patterns presented below (Figure 3)?

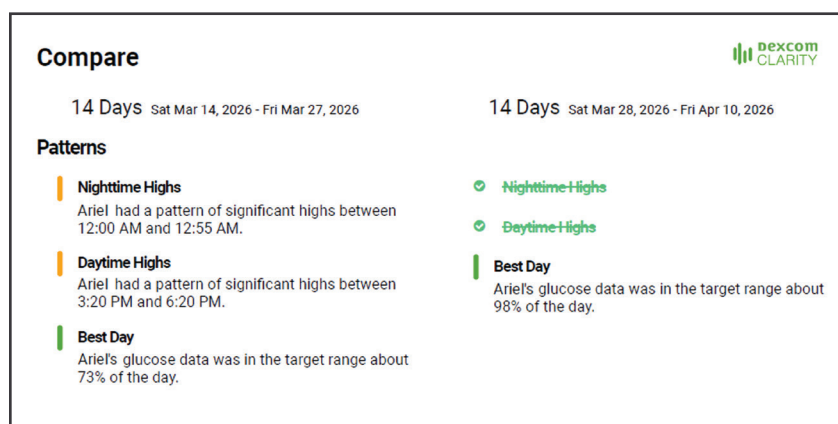


Figure 3

Based on this information, which pattern would you consider prioritizing next?

SCENARIO 3: BILLY



History

- 72 year-old
- T2D for 3 years
- A1C 6.5%

Billy lives alone and loves to garden. He had a recent incident of hypoglycemia while gardening that required assistance of a neighbor.

Billy schedules an appointment to discuss diabetes management options with his HCP.

At the appointment, Billy's HCP prescribes a personal Dexcom G7 15 Day and provides a Dexcom G7 15 Day sample so he can get started and receive low alerts right away.



Medication

- Sulfonylurea max daily dose
- Metformin max daily dose

At Billy's 2 week follow up the HCP copies the Overview metrics into his notes and documents the level 3 hypoglycemia he experienced.

DID YOU KNOW?

The Overview report presents a quick summary of the most relevant clinical patterns. If present, patterns of hypo and/or hyperglycemia are provided and can help focus your discussion during the visit. Key documentation metrics are included that can be copied and pasted right into your note (Figure 5).

Here is Billy's Overview report at his 2 week follow up. Use the Overview report (Figure 4) to answer the following questions:

What is the Sensor Usage during these 14 days (how many days exist with CGM data)?

What is the average glucose?

What is the GMI?

Overview

14 days | Fri Dec 30, 2025 - Thu Jan 12, 2026



Billy Ocean | ID: T2 | DOB: Aug 16, 1954

Glucose

Average glucose

119 mg/dL

GMI

6.2 %

Time in Range

2% Very High
10% High
76% In Range
9% Low
3% Very Low

Sensor usage

Days with data
14/14 days

Time active
97%

Standard deviation

40 mg/dL

Coefficient of Variation

33.6 %

Target Range:
70-180 mg/dL

Avg. calibrations per day
0.0

Top Patterns



Billy had a pattern of daytime lows

Billy had a pattern of significant lows between 2:45 PM and 3:10 PM.



Billy's best glucose day was January 9, 2026

Billy's glucose data was in the target range about 92% of the day.

This graph shows your data averaged over 14 days

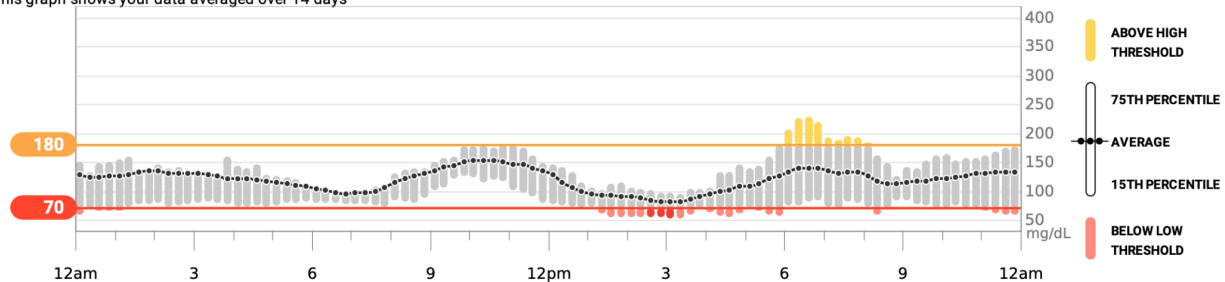


Figure 4

What is TIR?

Is there enough data to be analyzed?

What is TAR?

Are there patterns of hyperglycemia?
If so, where?

What is TBR?

Are there patterns of hypoglycemia?
If so, where?

What is the
average glucose?

What is the GMI?

What pattern(s) would you prioritize at this visit?

Are there any changes you would recommend for his diabetes management?

TO COPY THE OVERVIEW METRICS:

1. First access the Overview report in the interactive view of Dexcom Clarity
2. Click the overlapping boxes at the top right of the screen, shown below in the green circle (Figure 5)
3. Place your cursor in the section of your note you wish to copy the metrics
4. Right click + paste to populate the information

Reporting period: Fri Dec 30, 2025 - Thu Jan 12, 2026

Glucose Details

Average glucose: 119 mg/dL

GMI: 6.2%

Standard deviation: 40 mg/dL

Coefficient of Variation: 33.6%

Time in Range

Very High: 2%

High: 10%

In Range: 76%

Low: 9%

Very Low: 3%

Target Range

70-180 mg/dL

Sensor usage

Days with data: 14/14

Time active: 97%

Avg. calibrations per day: 0.0

Example Note

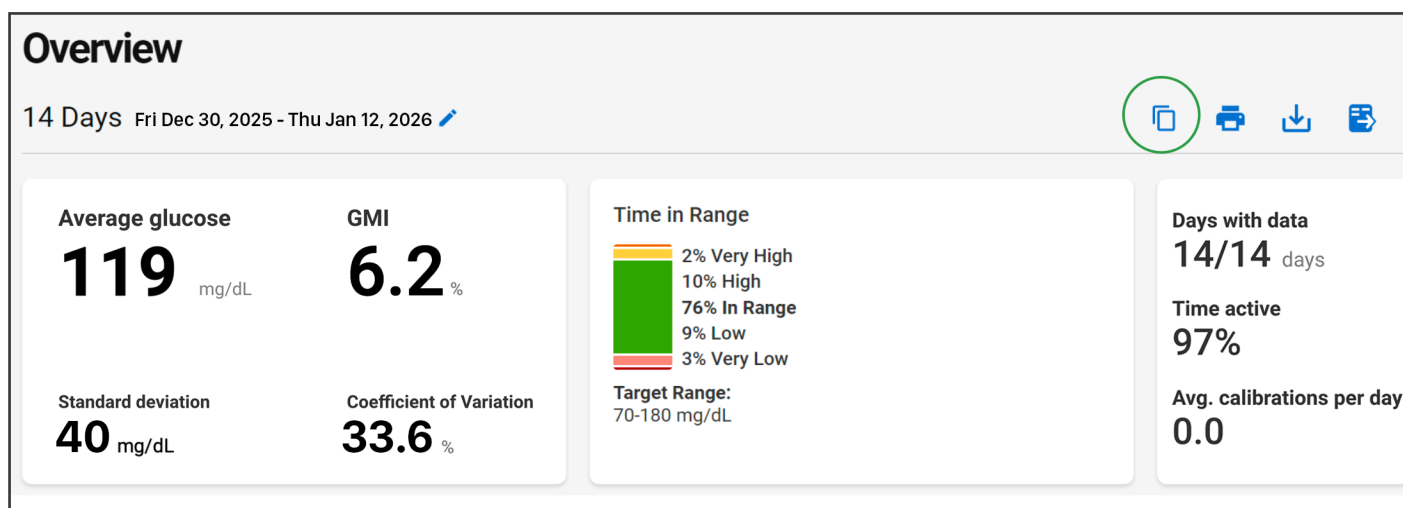


Figure 5



Scan the QR code for Clarity Clinic setup information, or visit provider.dexcom.com/products/dexcom-clarity



Brief Safety Statement: Failure to use the Dexcom Continuous Glucose Monitoring System and its components according to the instructions for use provided with your device and available at <https://www.dexcom.com/safety-information> and to properly consider all indications, contraindications, warnings, precautions, and cautions in those instructions for use may result in you missing a severe hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose) occurrence and/or making a treatment decision that may result in injury. If your glucose alerts and readings from the Dexcom CGM do not match symptoms, use a blood glucose meter to make diabetes treatment decisions. Seek medical advice and attention when appropriate, including for any medical emergency.

BRIEF SAFETY STATEMENT: The web-based Dexcom Clarity software is intended for use by both home users and healthcare professionals to assist people with diabetes and their healthcare professionals in the review, analysis, and evaluation of historical CGM data to support effective diabetes management. It is intended for use as an accessory to Dexcom CGM devices with data interface capabilities. Caution: The software does not provide any medical advice and should not be used for that purpose. Home users must consult a healthcare professional before making any medical interpretation and therapy adjustments from the information in the software. Caution: Healthcare professionals should use information in the software in conjunction with other clinical information available to them. Caution: Federal (US) law restricts this device to sale by or on the order of a licensed healthcare professional.

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