

Pre-operative diabetes (insulin treated)

Advice leaflet for people with insulin (or insulin and tablets) controlled diabetes undergoing surgery or a procedure requiring a period of starvation (less than one missed meal)

Before your operation (or procedure)

Please follow the instruction in the table on the following page marked "What to do with your insulin before surgery (or procedure)."

If your operation is in the morning

- Do not eat any food after midnight.
- You may drink clear (and not fizzy/ carbonated) fluids (such as black tea or coffee, pure smooth fruit juice or water) up to 2 hours before the operation.

If your operation is in the afternoon:

- Eat breakfast before 7 am and take no food after this time.
- You may drink clear (and not fizzy/ carbonated) fluids (such as black tea or coffee, pure smooth fruit juice or water) up to 2 hours before the operation.

When you travel to and from the hospital for your operation carry a sugary drink

If you have any symptoms of a low blood sugar, such as sweating, dizziness, blurred vision or shaking please test your blood sugar. If it is less than 4 mmol/L take 150mls of a clear non fizzy sugary drink (e.g. pure smooth fruit juice, this is the same amount as half a standard sized can

of soda). Please tell staff at the hospital that you have done this because it is possible that the time of your surgery may need to be rearranged

After your operation (procedure) your blood sugar will be checked and additional insulin given if necessary.

After your operation (procedure) you will be offered food and drink when you feel able to eat. When you are eating and drinking normally you should resume taking your normal insulin and (tablets) from the evening of the operation day. However, your blood glucose levels may be higher than usual for a day or so.

With some operations an insulin infusion given into a vein may be necessary which will be continued until you are able to eat and drink and restart your normal insulin.

When you get home, if you feel nauseated or vomit and are unable to eat:

- After 48 hours if your diabetes is usually managed by your GP practice contact your GP surgery.
- If outside working hours contact the out of hours service by calling 111.

Remember to bring with you to hospital

- A sugary drink.
- The blood glucose testing equipment you usually use.
- Insulin (and tablets) you usually take for your diabetes.

Instructions for taking insulin before your operation (assessing nurse to complete)

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What to do with your insulin before surgery (procedure)

Insulins	Day prior to admission	Patient for AM surgery	Patient for PM surgery
Once daily (evening) (Lantus, Levemir, Abaslagar, Tresiba, Humulin I, Insulatard, Insuman basal)	Reduce by 20%	Reduce by 20% Check blood glucose on admission	Reduce by 20% Check blood glucose on admission
Once daily (morning) (Lantus, Levemir, Abaslagar, Tresiba, Humulin I, insulatard, insuman basal)	Reduce by 20%	Reduce by 20% Check blood glucose on admission	Reduce by 20% Check blood glucose on admission
Twice daily (e.g. Novomix 30, Humulin M3, Humalog Mix 25, Humalog Mix 50, Insuman Comb 25, Ibsuman Comb 50 twice daily Lantus, Levemir, Abasaglar, Tresiba, Humulin I, Insulatard, Insuman basal)	No dose change	Halve the usual morning dose. Check blood glucose on admission. Leave the evening meal dose unchanged	Halve the usual morning dose. Check blood glucose on admission. Leave the evening meal dose unchanged

Insulins	Day prior to admission	Patient for AM surgery	Patient for PM surgery
Twice daily - separate injections of short acting (e.g. animal neutral, Novorapid/ Humulin S, Humalog, Apidra) and intermediate acting (Animal Isophane, Insulatard/ Humulin I, Insuman basal)	No dose change	Calculate the total dose of both morning insulins and give half as intermediate acting only in the morning. Check blood glucose on admission. Leave the evening meal dose unchanged	Calculate the total dose of both morning insulins and give half as intermediate acting only in the morning. Check blood glucose on admission. Leave the evening meal dose unchanged
Basal bolus regimens (background insulin (levemir, lantus, abasaglar, tresiba, insuliotard, humulin I, insuman basal) with separate short acting insulin given at mealtimes (actrapid, novorapid, apidra, humulog, humulin s, insuman rapiid)	No dose change	Omit the morning and lunchtime short acting insulins. Keep the basal unchanged. Check blood glucose on admission	Take usual morning insulin dose(s) (with breakfast). Omit lunchtime dose. Keep basal insulin unchanged. Check blood glucose on admission

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by Royal Devon staff undertaking procedures at the Royal Devon hospitals.

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