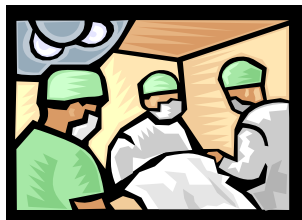


## Surgery or Procedure Guidelines



Sometimes surgery is unavoidable. Having diabetes can increase risks with surgery or sedation and we would like to help the day be smoother--avoiding hypoglycemia or hyperglycemia and ketosis. If your child is scheduled for surgery or a procedure in which they will be sedated (such as dental procedure, MRI, or echocardiogram), please contact your diabetes doctor or our office at least **3-4 business days** before the procedure.

1. The procedure should be scheduled for early morning or be the first one of the day.
2. If your child receives NPH insulin regularly, do not give it the morning of the procedure.
3. It is not necessary to disconnect an insulin pump unless your child is having an MRI. During procedures and even after a "temporary basal rate" can be used. By contacting your diabetes doctor before the procedure, this can be discussed.
4. If your child is to be fasting (not eating or drinking), do not give any fast-acting insulin (Novolog or Humalog) prior to the procedure. Raise your child's target blood glucose (200 mg/dl or above prior to the procedure). Do give a correction dose if it is appropriate based on their blood glucose levels and the new target of 200 mg/dl.
5. Always keep a Glucagon Emergency Kit close by.
6. Check blood or urine for ketones before the procedure and after, then every 3 hours the rest of the day. Check blood glucose just as often. Many times, your child's food intake may be restricted as a result of the procedure or sedation, it is important to monitor for ketones and take action if needed to resolve them. Low blood glucoses and ketosis can be prevented with frequent monitoring after a procedure.
7. After the procedure or sedation, your child's food and liquid intake could be compromised. Slowly advanced their diet to "clear liquids" to avoid vomiting. Use sugar containing liquids if blood glucose is less than 200 mg/dl, use sugar-free liquids if blood glucose is over 200 mg/dl. Once they are tolerating foods, resume their normal insulin to carbohydrate ratio for any food or liquid intake.
8. Take a copy of the sick day guidelines with you; follow them the rest of the day. It is important to have both sugar-free as well as sugar-containing fluids available throughout the day. **Monitoring can prevent problems.**

The diabetes team is available for further questions.

During office hours contact Diabetes Educators 801-587-3999.

Information based on guidelines from Understanding Diabetes by H. Peter Chase, MD, American Diabetes Association, and PCMC Diabetes Educators and Physicians. Please note that the Diabetes Team, Sedation Services, Radiology Team, and Surgery Team are all working together to write a policy regarding Type I Diabetes and Sedation or Surgery.