

## **Diabetes Management before Surgery/Procedure**

- Always consult with your physician about managing your diabetes several weeks before surgery/procedure to ensure that your blood sugars are well controlled.
- Follow your physician's suggestions about managing your diabetes if they differ from these guidelines.
- Good diabetes control (blood sugar less than 180) is important before surgery/procedure to reduce the risk of infection or complications.
- Your surgery/procedure may be delayed if your blood sugar is not controlled (greater than 250 or less than 60).
- Check your blood sugar the morning of the surgery/procedure.
- Check your blood sugar before meals and at bedtime for at least 2 days before surgery/procedure.
- Call your physician for diabetes medication adjustment if your average blood sugar is greater than 180.

•	Day of surgery	Time
•	When to stop eating before su	rgery/procedure

IF YOU TAKE ANY PILLS CONTAINING METFORMIN	<ul> <li>□ Stop this medicine the day before surgery/procedure on date</li> <li>□ This medicine may be restarted after surgery/procedure according to your physician's orders.</li> </ul>
IF YOU TAKE OTHER DIABETES PILLS	<ul> <li>□ Do not take this medicine the morning of surgery/procedure.</li> <li>□ This medicine may be restarted after surgery/procedure according to your physician's orders.</li> </ul>

## IF YOU ARE TAKING BYETTA, VICTOZA, OR SYMLIN

☐ Medicine may be restarted after surgery/procedure according to your physician's orders	J Do not take this medicine the day of surgery/procedure.
— Wedienie may be restarted after sarger y/ procedure decorating to your physician's orders	Medicine may be restarted after surgery/procedure according to your physician's orders.

## IF YOU ARE TAKING INSULIN

IF YOU TAKE RAPID ACTING INSULIN  Regular (R) Novolog Humalog Apidra  IF YOU TAKE Humulin R U-500, INSULIN 70/30, 75/25, OR 50/50	<ul> <li>□ Do not take this medicine the morning of surgery/procedure.</li> <li>□ This medicine may be restarted after surgery/procedure according to your physician's orders.</li> <li>□ Take your usual dose the evening before.</li> <li>□ Call prescribing physician for instructions for the day of surgery/procedure.</li> <li>□ Do not use more than 50% (half) of your usual morning dose unless instructed otherwise.</li> </ul>
IF YOU TAKE LEVEMIR OR LANTUS	☐ Take 80% of your usual dose. ☐ 80% of your usual dose = Your usual dose X 0.8 ○ for example, usual dose is 40 units ○ dose before surgery/procedure should be 40 units x 0.8 = 32 units ○ Calculate your new dose:
IF YOU TAKE NPH	<ul> <li>□ Take your usual dose the evening before.</li> <li>□ Take 50% (or half) of your usual morning dose the day of surgery/procedure.</li> <li>□ If you are not sure how much to take, call your physician.</li> </ul>
IF YOU ARE USING AN INSULIN PUMP	<ul> <li>□ The day of surgery/procedure you may be asked to disconnect your pump</li> <li>□ Check with your doctor about possible changes to your basal rate or a temporary basal rate</li> <li>□ If the pump is disconnected, you will be started on a continuous intravenous insulin infusion.</li> <li>□ You will be restarted on your insulin pump prior to discharge.</li> </ul>

## IF YOU ARE TAKING MORE THAN ONE OF THE ABOVE MEDICINES

\*\*Follow the instructions for each of the medicines you are taking.