



## **Sick Day Management** **for People with Diabetes**

Sick day management is important for people with diabetes in order to avoid hospitalization. Those not normally requiring insulin, may need insulin during times of illness.

### **Sick Day Guidelines**

- ◆ Always take insulin or diabetes medication (often extra insulin is required, but if vomiting or diarrhea is present, less insulin may be needed.) Omission of insulin is a common cause of ketosis.
- ◆ Test blood glucose frequently. For those with type 1, check every 4 hours and for those with type 2, check 2-4 times a day. **All people with diabetes should test their blood glucose at home when ill, even if they do not monitor at home at other times.**
- ◆ Test for urine ketones every 4 hours. (type1 diabetes)
- ◆ Try to eat usual amount of carbohydrate (CHO), may be divided into smaller meals and snack. Soft food or liquids may be easier to consume.
- ◆ If having difficulty eating, eat or drink 15 grams of CHO every hour or 45-50 grams of CHO every 3-4 hours.
- ◆ Hypoglycemia is rare, yet may occur with nausea and vomiting of short duration without fever.
- ◆ OTC and prescription medicines, along with herbal therapies can contribute to hyperglycemia.
- ◆ Record weight changes (loss may signal dehydration) and breathing problems.
- ◆ Drink extra water or sugar-free, caffeine-free fluids (8oz every hour when awake).

### **Foods for Sick Day Management**

½ (4oz) cup juice

1 cup (8oz) Gatorade

½ cup (4oz) regular pop

½ cup regular gelatin

½ cup unsweetened applesauce

1 slice toast

1 cup soup

6 saltine crackers

3 squares graham crackers

½ sugar-free pudding

1 cup (8oz) skim or low-fat milk

½ cup ice cream or frozen yogurt

6 oz light yogurt

¼ cup sherbet

½ - 1 up cold cereal (unsweetened)

½ cup hot cereal (unsweetened)

1/3 cup rice

½ cup mashed potatoes

## Nausea/Vomiting

Blood glucose levels:	Action
Over 250 mg/dl	Drink calorie-free, caffeine-free liquids in place of meal.
180-250 mg/dl	Drink/eat 15 grams of CHO in place of meal. Also, probably need additional liquid from water or calorie-free caffeine source.
under 180 mg/dl	Try to drink or eat usual mealtime CHO amount. If vomiting occurs after insulin administration, may need to sip sugar water every 20-30 minutes to maintain a blood glucose of 100-180 mg/dl.
Under 100 mg/dl & vomiting persists	May require hospitalization.

### Adjusting Insulin for Illness (no nausea/vomiting)

- ◆ Continue usual dose of intermediate-acting (NPH, Lente) or long-acting insulin (Ultralent, Lantus)
- ◆ Supplemental doses of rapid-acting (humalog, novolog) or short-acting insulin (regular) insulin may be needed due to elevated BG levels or the presence of large or persistent ketones.
  - Rapid-acting or short-acting insulin may be given every 1-4 hours.
  - Dose is dependent on severity of illness.
  - During most illnesses, 10% of total daily insulin dose can be safely given as supplemental dose.
  - If BG > 300 mg/dl with large keytone, 20% of total daily dose be given as a supplemental dose.
- ◆ Adjustments need to be individualized for each patient.
- ◆ If hyperglycemia persists, additional doses of rapid or short-acting insulin may be needed throughout the day

### When to Call Physician

- ◆ Fever greater than 100 degrees for 24 hours
- ◆ Persistent hyperglycemia (over 300mg/dl)
- ◆ Persistent diarrhea (more than 8 hours)
- ◆ Vomiting and unable to take fluids for over 4 hours
- ◆ Sick longer then 24 hours
- ◆ Severe abdominal pain (more common in type 1)
- ◆ Difficulty breathing (more common in type 1)
- ◆ Moderate to large ketones (type1)
- ◆ Other unexplained symptoms (if in doubt, contact your health care provider)

### Preventing illness

- ◆ Get influenza vaccination yearly.
- ◆ Get pneumococcal vaccination. If receive first dose prior to age 65, give another single revaccination at age 65 if 5 or more years have lapsed since the previous dose.
- ◆ Eat a healthful diet.
- ◆ Get plenty of rest.
- ◆ Stay hydrated.
- ◆ Don't smoke.

Clinic Forms: Sick Day Management-Diabetic:  
Adapted from The Michigan Diabetes Outreach Network-  
Quick Reference Guide to Diabetes for Health Care Providers: 3/04: MJJ/kmb