

If you have Type 1 Diabetes, you **must take** long acting insulin or you will go into diabetic ketoacidosis

What are my general guidelines?

- If you wear a Continuous Glucose Monitor, you must remove it for all CT scans, MRIs and X-rays.
- If you have Type 1 diabetes check your urine for ketones when your blood sugars are greater 250mg/dL. If you have moderate or large ketones, contact your health care provider to manage this condition.

What should I bring?

- Testing supplies (glucometer, test strips, lancing device.)
 - You will use this when you are traveling to and from the procedure.

What are my pre-procedure instructions?

- Night before procedure
 - Test your blood sugar at dinner and bedtime and whenever you feel that you might be experiencing low blood sugar or very high blood sugar.
 - See "How do I adjust my medication before the procedure?" section below.
- Morning of the procedure
 - Test your blood sugar first thing in the morning of the procedure. Continue to check your blood sugars every 1-2 hours up to your procedure and whenever you feel that you might be experiencing low blood sugar or very high blood sugar.
 - See "How do I adjust my medication before the procedure?" section below.
- If you have a low blood sugar
 - You must treat all low blood sugars. If your blood sugar is less than 70mg/dL, drink ½ cup of clear sugar-sweetened beverage such as

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apple juice, Sprite or 7UP (all liquids **must** be clear). Recheck your blood sugar in 15 minutes. If your blood sugar is still less than 70mg/dL, drink another ½ cup of clear sugar-sweetened beverage.

If your blood sugar is extremely low (less than 40mg/dL), your family or friends should help you by using glucagon and calling 911 if needed. Make sure that you also call ______ to notify the procedure team.

*If you need to treat a low blood sugar within 2 hours before your procedure, call to inform your procedure team. Your procedure may need to be rescheduled.

If you are doing a bowel prep and need to follow a liquid diet:

- See "Pre-Procedure Instructions" above for instructions on what to do the night before your procedure.
- When drinking sugared beverages or the bowel prep, you may need less insulin to cover the carbs you are drinking. This is because sugary liquids will leave your system more quickly than solid foods and you will be drinking these liquids slowly throughout the day. If you take insulin with food, give 50% (half) of your usual dose for the liquids you are drinking that have carbs.

How do I adjust my medication before the procedure?

Stop taking the following oral medications 3 days before your procedure:

- Empagliflozin (Jardiance)
- Dapagliflozin (Farxiga)
- Canagliflozin (Invokana)
- Ertuglifloxin (Steglatero)
- Dapagliflozin/Metformin (Xigduo XR)
- Dapagliflozin/Saxagliptin (Qtern)
- Canagliflozin/Metformin (Invokamet & Invokamet XR)
- Empagliflozin/Linagliptin (Glyxambi)
- Empagliflozin/Metformin (Synjardy & Synjardy XR)
- Ertuglifloxin/Sitagliptin (Steglujan)
- Ertuglifloxin/Metformin (Segluromet)

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Preparing for a Medical Procedure: Guidelines for Adults not on Insulin Pumps

If you take any other oral diabetes medication:	
The night before procedure	Take your usual dose
The morning of procedure	Do not take

If you take non-insulin injected diabetes medication such as Bydureon[®], Byetta[®], Victoza[®], Symlin[®], Ozempic[®], Xultophy[®], Soliqua[®], or Trulicity[®].

The night before procedure	Take your usual dose
The morning of procedure	Do not take

If you take the following insulin in the evening before your procedure	
NPH	Take your usual dose
Mixed insulin (70/30; 75/25; or 50/50)	Take your usual dose
Levemir®, Basaglar®, Lantus®, Tresiba®, or	Take 50% of your usual dose
Toujeo® (If this is your only insulin)	
Levemir [®] , Basaglar [®] , Lantus [®] , Tresiba [®] , or	Take 70% of your usual dose
Toujeo® (If you also take other insulin)	
Apidra®, Humalog®, Novolog®, Fiasp®, or	Take your usual dose
Regular	

If you take the following insulin in the morning of your procedure	
NPH	Take 50% of your usual dose
Mixed insulin (70/30; 75/25; or 50/50)	Take 50% of your usual dose
Levemir [®] , Basaglar [®] , Lantus [®] , Tresiba [®] , or	Take 50% of your usual dose
Toujeo® (If this is your only insulin)	
Levemir [®] , Basaglar [®] , Lantus [®] , Tresiba [®] , or	Take 70% of your usual dose
Toujeo® (If you also take other insulin)	
Apidra®, Humalog®, Novolog®, Fiasp®, or	Do not take
Regular	

If you are using U-500 insulin or another insulin not listed on this sheet, ask your provider how to adjust your medication. Always follow instructions given to you by your provider. Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

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