INSULIN PUMP THERAPY HOSPITALIZATION GUIDELINES

Not everyone is as familiar with insulin pump therapy as you are. It's important to prepare for hospitalizations by following these important instructions.

1. | ASK FOR A DIABETES CONSULTANT.

No matter why you were admitted to a UMass Memorial hospital or emergency room, the UMass Memorial Health Diabetes Center of Excellence Blood Glucose Management Service team can be invited by your hospital care team and primary physician to follow you and make recommendations for your diabetes care during your stay.

2. | BRING INSULIN PUMP SUPPLIES such as

batteries, two to three reservoirs and infusion sets, an inserter device if used, and the emergency kit you carry at all times. These supplies are not available in most hospitals, and you may have to come off the pump if you don't bring your own. You'll need to change your infusion set a minimum of every 48 to 72 hours.

- **3. BRING YOUR INSULIN PUMP MANUAL** to be referenced by you and your hospital care staff.
- 4. DISCONNECT THE PUMP BEFORE ANY RADIOLOGY PROCEDURES, such as an MRI, CT scan.

- 5. To use an insulin pump in the hospital, YOU MUST SIGN A CONTRACT that states your responsibilities and that you agree to let the hospital staff review and adjust pump settings as needed.
- 6. BE PREPARED TO SHOW THE HOSPITAL STAFF THAT YOU KNOW HOW TO USE THE PUMP. This includes how to suspend, review basal rates, program a temporary basal rate, bolus for food and correct hyperglycemia.
- 7. YOUR PUMP SETTINGS WILL PROBABLY CHANGE WHILE IN THE HOSPITAL. Insulin requirements typically increase during illness. Set up a new basal pattern and save your normal settings for use after discharge.
- Blood glucose (BG) meters can be used, but the
 HOSPITAL STAFF ARE REQUIRED TO FIRST
 CHECK YOUR BG WITH THEIR METER PRIOR
 TO GIVING ANY INSULIN.

DIABETES CENTER OF EXCELLENCE

AMBULATORY CARE CENTER (ACC), SECOND FLOOR 55 LAKE AVENUE NORTH, WORCESTER, MA 01655

NEW PATIENTS: **855-UMASS-MD** (855-862-7763) EXISTING PATIENTS: **508-334-3206**



If you're using a continuous glucose monitor (CGM), you may wear it while hospitalized, however
 TREATMENT DECISIONS WILL BE BASED
 UPON THE HOSPITAL'S METER. Your CGM can be helpful to let you know if your BG is dropping too low.

THE HOSPITAL'S NURSE MUST SUPERVISE INSULIN BOLUSES TO CORRECTLY DOCUMENT YOUR BG - how many carbs you're eating and the amount of insulin you're taking. Insulin needs may change while in the hospital. Doctors need that information readily available in your chart to make appropriate medical decisions.

11. IF USING A MEDTRONIC 670 G PUMP, YOU MUST USE THE MANUAL MODE. Auto mode cannot be used until several days post hospitalization.

- Typically, you'll be put on a consistent carbohydrate diet, with a limit 180 grams of carbohydrate per day (aim for 60 grams per meal). WHEN FILLING OUT YOUR DAILY MENU, AVOID CONCENTRATED SWEETS. INSTEAD CHOOSE HEALTHIER CARBOHYDRATES WHENEVER POSSIBLE.
- 13. IF JUDGEMENT IS IMPAIRED BY PAIN MEDICATIONS, SEDATION, ETC., YOU'LL BE TAKEN OFF THE INSULIN PUMP.
- 14. IF YOUR INSULIN PUMP IS MANAGED BY A FAMILY MEMBER OR CAREGIVER, THEY ARE REQUIRED TO BE THERE AT ALL TIMES in order for you to remain on the pump.

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