Health Facts for You



Using Diabetes Devices in the Hospital

If you use devices like an insulin pump or continuous glucose monitor (CGM) at home, this handout will help you decide if it is safe to continue in the hospital or for tests/procedures. It explains what staff will expect of you and what you can expect from staff. Please tell staff if you do not want to use your diabetes device(s).

What We Expect of You

Manage Your Pump and/or CGM

- You must be able to use your pump/CGM without help from staff.
- You must be able to review pump settings like basal rates, bolus doses, and correction doses. If changes are needed, the team will help to decide what changes are best, but we will rely on you to make the changes to your pump settings.
- You must let us know how you correct or "fix" your high blood sugars.
- You must let us know about changes you make to your pump settings. We need to record the doses of insulin you give.

Provide Pump/CGM Supplies

- You must provide all of your device supplies. If you do not have pump supplies, we will likely need to remove your pump. Insulin can be given using syringes or an intravenous (IV) infusion. If you do not have extra sensors, we will check blood sugars with our hospital glucose meter.
- We can provide insulin for your pump. Talk with your nurse and/or pharmacist about this.

• If you remove a sensor for a test and will leave the hospital after that, you should use your own home glucose monitor until able to apply a new sensor.

Change Infusion Site/CGM Site

- You must be able to change your pump site without help from staff. This should be done every 2-3 days. If you change your site more or less often, let staff know.
- You must be able to change your CGM site based on brand of sensor you use (usually every 7-14 days).

Let Staff Check Your Blood Sugars

- You must allow us to check your blood sugars using our hospital blood glucose meter. These meters are checked every day for accuracy. The results are also recorded so that all staff are aware of the results.
- Use these results to decide how much insulin to give yourself.
- You may use your own lancet device if you prefer.

Count Carbohydrates ("Carbs")

- If you count carbs, tell staff what your insulin to carb ratio is. If the ratio varies during the day, let us know.
- If you did not count carbs at home, you do not need to do so in the hospital.

Troubleshoot

 You must be able to deal with pump and/or CGM problems. You should at least know the toll free 1-800 phone number for the device company. If the problem cannot be fixed, let staff know right away so that we can help to figure out the next step.

Talk With Staff

- You must be willing to talk with staff about your pump. Some staff, like those helping with x-rays, other tests, and surgery, may not know that you use a pump and/or CGM. They need to know in order to provide the best care possible.
- You must let staff know about changes you plan to make with your pump settings.
- You must let staff know if you do not have enough supplies to keep using your device(s).
- Ask questions if you have any!

What to Expect From Staff

Checking for Safe Use

- We will ask you questions about your pump. Questions will include:
 - How often do you change your infusion site?
 - What type of insulin do you use?
 - How is your insulin programmed?
 - How much insulin do you give to cover meals? What about snacks?
 - How do you manage your high and low blood sugars?
 - Do you know how to change your pump settings?
 - What do you do if you think the pump is not working?
- Nurses will ask how much insulin you have given for food and high blood sugars. They will also confirm your basal doses. This will be entered in your chart.

 We will also be sure that you do not have any cognitive or physical issues that could impact safety.

Check Your Blood Sugars

- Staff will check your blood sugar 2 or more times a day.
- If your blood sugar is high or low, staff will help to find a cause. If the blood sugars stay high or low, you may need to stop using your pump. Insulin can be given using syringes or an intravenous (IV) infusion.
- Even if you are using a CGM, staff will check blood sugar levels with the hospital glucose meter.

Look at Your Pump/CGM Sites

Staff needs to look at your infusion and/or CGM site. They need to look for signs of infection or other skin problems.

Tests and Procedures

X-rays, CT, MRI, PET Scan (or Other Tests Using Magnetic Fields)

These tests can damage diabetes devices. Your CGM may no longer give accurate readings after being exposed to radiation or magnetic fields. Your insulin pump may no longer work or may not work properly. Taking off your device is the only safe option.

Before the test, you will be asked to disconnect or remove your pump and/or CGM. It should be kept outside of the testing room. UW Health cannot replace your sensor, infusion set, or pod if removed. The device company may do so; contact them to ask. If possible, consider scheduling your test on a day you plan to do a site change and/or bring new supplies with you.

Staff helping with these tests may not be able to answer your questions about your device(s). Please contact the device manufacturer or provider who ordered the pump/CGM.

Surgery

Talk with your team about whether it is safe to keep your pump and/or CGM on during surgery. It may be possible if the surgery is less than 2 hours. If your pump needs to be removed for more than 1-2 hours, you may need insulin injections with syringes. In some cases, an intravenous (IV) infusion will be needed. Staff will discuss this with you.

Prioritize Your Safety and Health

Our priority is your health and safety. If it is no longer safe for you to keep using your diabetes device(s), you or staff will need to remove them. Reasons could include:

- You need a test/procedure or surgery.
- You are no longer able to use the pump/CGM without help from the team.
- You have high blood sugars that cannot be managed using the pump.
- You have repeated low blood sugars.
- You do not communicate with us about the insulin you are giving.

Please let us know if you have any questions or concerns.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911.Copyright © 2/2021. University of Wisconsin Hospital and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7012

Patient Log for Insulin Pump Use in the Hospital

Please help us to keep track of how much insulin you are using through your pump. Let us know if you have any questions. Thanks!

Today's Date:					
Brand/Mod	lel of Insulin	Pump:			
Type of Ins	sulin:				
Type of Insulin: Current infusion site started on If infusion site sharped today. Times				(date) Location:	_
If infusion	site changed	l today – Tin	ne:	_	
Total Daily Dose (Past 24-hour total): • The nurse will ask you for this information ev				units	
• The nui	rse will ask y	you for this i	information eve	ery morning. The nurse needs to	chart this in
your me	edical record	1.			
				g your day yesterday .	
				History" or "Options>History>	
"Records" menu based on the brand of the pump you use. Ask for help if you can't find it.					
Date	Time	Blood Sugar	Bolus Dose	Comments	RN Initials
			units		
			units		1

units
units
units
units
units