



Northern Sydney
Local Health District

Diabetes and Surgical or Day Procedures for Adults



Diabetes and surgical or day procedures

The instructions here apply to most operations or procedures in hospital. We will call them all “procedures” from here on. Some procedures may need other instructions. Please check with the hospital clinic or service that is providing your care.

If your blood glucose levels (or “sugar levels”) are high when you have a procedure, wound healing can be slow. There can also be a greater risk of infection.

If you have type 2 diabetes, please discuss how to manage your diabetes with your doctor (General Practitioner) or diabetes specialist (Endocrinologist). Do this as soon as possible before the procedure.

If you have type 1 diabetes, speak to your diabetes specialist or diabetes educator about insulin for advice about what to do before and after the procedure.

During the pre-admission process you will need to provide the results of a blood test known as an **HbA1c**. This test shows your recent blood glucose control.

If you do not have an **HbA1c** result when you book in, or if the result is over three months old, you will be asked to get one done.

Talk about your result with your doctor. If your **HbA1c** is greater than 8.5% the procedure may need to be postponed, until your blood glucose levels come down.

You can call the Diabetes Service at your hospital for advice

Royal North Shore Hospital: 9926 7111

Hornsby Hospital: 9485 6777

Ryde Hospital: 9858 7366

Mona Vale Community Health Centre: 9998 6130

Brookvale Community Health Centre: 9388 5236

If your blood glucose levels are very high on the day of the procedure, it may be decided that it is safer to postpone it.

Following the procedure your blood glucose levels may become higher than normal for a short time.

If this happens, you may need to stay in hospital longer to stabilise your diabetes. This will vary for each patient and for the procedure.

One week prior to the procedure

(Date ___ / ___ / ___):

Make sure you have enough diabetes medication for at least one week after the procedure.

If you check your blood glucose levels, make sure you have enough blood glucose test strips or sensors.

If you have type 1 diabetes, make sure you have enough blood ketone test strips.

Obtain several cans/bottles of normal sweetened lemonade.

Check your blood glucose levels at least twice a day. Check this more often when fasting. Contact your doctor if your blood glucose levels rise above 15.0mmol/L for longer than 8 hours.

(Contact your doctor, present to your hospital Emergency Department or Urgent Care Centre if blood ketones exceed 1.5 mmol/L).



On the day of the procedure

(Date ___ / ___ / ___):

Six hours before to you arrive stop eating solid food. You can drink 200 mL of unsweetened clear fluids each hour up until 2 hours before your arrival time. Your doctor or diabetes specialist will let you know if you need to do anything differently.

For some procedures, your doctor may ask people taking insulin to check blood glucose levels every two hours.

Two hours before you arrive do not eat or drink (unless you need to raise your blood glucose level). **Do not take any diabetes tablets, or non-insulin injections on the morning of surgery** but bring these with you.

Continuous Glucose Monitoring Systems (CGMS)

Keep wearing your sensor unless your doctor recommends that you take it off before your procedure.

Low blood glucose levels (hypoglycaemia)

If your blood glucose levels fall below 4 mmol/L, drink 200 mL of normal sweetened lemonade (not diet). Check your blood glucose levels again in 15 mins. Repeat treatment again until they are back to normal.

When you arrive tell the staff about the hypoglycaemia and how you treated it.

What to do with diabetes medication

If you usually take tablets for diabetes

Three days prior to admission

(Date ___ / ___ / ___):

Stop taking diabetes-related medications, called SGLT2 inhibitors: **DO NOT** take any of the following tablets:

- **Dapagliflozin**, e.g. Forxiga
- **Dapagliflozin and Metformin** together, e.g. Xigduo XR
- **Empagliflozin**, e.g. Jardiance
- **Empagliflozin and Linagliptin** together, e.g. Glyxambi
- **Empagliflozin and Metformin** together, e.g. Jardiamet
- **Ertugliflozin and Metformin** together, e.g. Segluromet
- **Ertugliflozin**, e.g. Steglatro
- **Ertugliflozin and Sitagliptin** together, e.g. Steglujan
- **Saxagliptin and Dapagliflozin** together, e.g. Qtern

Morning of the admission

(Date ___ / ___ / ___):

Do NOT take **any diabetes-related tablets** on the morning of the procedure.

Do NOT take **non-insulin injections** on the morning of the procedure: tell your anaesthetist and treating team when you arrive that you haven't taken them.

- **Dulaglutide**, e.g. Trulicity
- **Liraglutide**, e.g. Victoza
- **Semaglutide**, e.g. Ozempic
- **Tirzepatide**, e.g. Mounjaro

If you are usually treated with insulin

Check blood glucose levels every 2 hours. Tell hospital staff as soon as you arrive at hospital that you have diabetes and take insulin.

If you are having a morning procedure

If you take;

- **Detemir**, e.g. Levemir
- **Glargine**, e.g. Optisulin or Toujeo

take your usual dose.

If you take **Isophane**, e.g. Protaphane or Humulin NPH, take half your usual dose.

Do not take any other insulin, such as;

- **Aspart and Protamine** together e.g., Novomix 30
- **Degludec and Aspart** together e.g., Ryzodeg 70/30
- **Lispro and Protamine** together e.g., Humalog Mix 25
- **Lispro and Protamine** together e.g., Humalog Mix 50
- **Neutral and Isophane** together e.g., Mixtard 30/70

in the morning but bring it with you. Your doctor might give you a lower dose of insulin when you arrive, or after your procedure.

If you are having an afternoon procedure

Have a light breakfast and **half** the normal dose of these insulins:

Rapid acting insulin e.g.

- **Aspart** e.g., Novorapid or Fiasp
- **Glulisine** e.g., Apidra
- **Lispro** e.g., Humalog

Intermediate acting insulin e.g.

- **Isophane** e.g., Protaphane or Humulin NPH

Premixed insulin e.g.

- **Aspart and Protamine** together e.g., Novomix 30
- **Degludec and Aspart** together e.g., Ryzodeg 70/30
- **Lispro and Protamine** together e.g., Humalog Mix 25
- **Lispro and Protamine** together e.g., Humalog Mix 50
- **Neutral and Isophane** together e.g., Mixtard 30/70

If you take;

- **Detemir** e.g., Levemir
- **Glargine** e.g., Optisulin or Toujeo

take your **usual** dose.

Insulin Pumps

If you use an insulin pump, please contact your diabetes specialist/ diabetes educator for instructions. You should not remove your insulin pump before the procedure, unless this is recommended to you. This is so the insulin supply doesn't stop.

Instructions from your doctor:

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What to do after discharge

Do not take the following tablets for 2 days after the procedure. You can start again when you are eating and drinking normally:

- **Dapagliflozin**, e.g. Forxiga
- **Empagliflozin**, e.g. Jardiance
- **Dapagliflozin and Metformin** together, e.g. Xigduo XR
- **Empagliflozin and Linagliptin** together, e.g. Glyxambi
- **Ertugliflozin and Metformin** together, e.g. Segluromet
- **Ertugliflozin**, e.g. Steglatro
- **Ertugliflozin and Sitagliptin** together, e.g. Steglujan
- **Saxagliptin and Dapagliflozin** together, e.g. Qtern
- **Empagliflozin and Metformin** together, e.g. Jardiamet

If in doubt seek the advice of your doctor.

You can resume your normal diet and diabetes medication other than the ones above when you get home.

Do not take medication that has Metformin in it for two days after a radiology procedure with contrast (dye).

If you use a standard glucose meter, check your blood glucose levels at least twice a day. Do this for at least one week. Blood glucose levels can rise due to the stress of the procedure or this can indicate infection.

If you use a continuous glucose monitoring system, start using this again after your procedure. Sometimes, the sensor can become dislodged or malfunction. If you aren't sure that it's working properly, put a new sensor on or start using finger stick blood glucose monitoring.

Contact your doctor or diabetes specialist if:

- Your blood glucose levels rise above 15.0mmol/L for longer than 8 hours. If your blood ketone levels go above 1.5 mmol/L and your doctor has asked you to check these, contact your doctor or present to the Emergency Department.
- There are signs of infection of the wound. Signs of this are redness, swelling, discharge, or fever.
- You vomit for more than 2 hours.