

What can I expect to happen with my pump in the hospital?

If you wear an insulin pump to take care of your diabetes, you may have questions about what will happen when you are in the hospital.

When you come to the hospital, your blood sugar control and insulin needs may change:

- An illness, surgery, or infection may cause you to need more or less insulin than usual.
- The meal times and food choices may be different than you are used to at home.
- Your activity level may be different.

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Your health care team will work with you to decide if using your insulin pump while you are in the hospital is the best choice for you.

What are my responsibilities?

If you are less than 18 years of age, your parent or guardian must stay with you while you are in the hospital in order for you to use your pump.

If you and your health care team decide that it is safe for you to use your insulin pump while you are in the hospital, there are guidelines we will follow:

- We will ask you to read and sign a patient form that outlines your responsibilities and describes what to expect from the health care team.
- You will need to bring all supplies for your pump to use while you are in the hospital. If you do not, someone must bring you more supplies so you can continue to use your pump.
 - Supplies include: reservoirs, infusion sets, insertion device, skin prep, batteries, and any other items needed for your pump.
 - Exception: Once you use up the rest of your insulin in your reservoir, the hospital will supply the insulin for all refills as long as you are using insulin the hospital carries.
- You must be alert and able to use your pump independently. This includes:
 - \circ $\,$ changing programming when your doctor or provider asks you to do so
 - giving bolus doses at scheduled times and notifying your nurse whenever you give yourself a bolus
 - changing the infusion site every 2 to 3 days
 - troubleshooting problems
- If your ability to manage your pump changes, we will change to another insulin plan.

What about blood sugar testing?

Your nurse will check your blood sugar with the hospital meter and let you know the results. You can program these results into your pump to calculate any bolus doses needed. It is the hospital policy to use the hospital meter for blood sugar testing. You may use your own meter or continuous glucose monitor or sensor for information only. *Please be aware that results may vary slightly between different meters.*

What about bolus doses?

When you give yourself a bolus for a meal, snack, or correction, you must notify your nurse of the number of units given. Your nurse records the insulin dose in your medical record. In the hospital, it is usual to give insulin bolus doses with each meal and snack. The schedule and timing may be different from your home schedule.

Most of the hospital menus include the number of carbohydrate grams in the food items. If you have trouble finding the information, let your nurse know to contact a dietitian or diabetes educator.

How do I know if I am having a problem?

The most common side effects of insulin and using an insulin pump are low or high blood sugar. Let your nurse know **right away** if you feel symptoms of low or high blood sugar. Low blood sugar may cause you to feel shaky, nervous, dizzy, or sweaty. High blood sugar may cause you to feel thirstier or have to pass urine more often than usual. High blood sugar can also lead to abdominal pain, nausea, or vomiting.

Do I need to remove my pump?

There may be times when you will not be able to wear your insulin pump. You may not wear your insulin pump during an x-ray, CT scan or MRI, since exposure to radiation or magnets could damage your pump. This often involves taking off the pump for a short time but keeping the infusion set in place. If you wear a metal needle set or Omnipod, you must remove it before an MRI or scan.

You must usually take off your pump if you have a procedure or surgery. If your pump needs to be off for more than one hour, you may need another insulin plan until the procedure is over. Your plan may include injected or IV insulin that would be ordered by your doctor or provider.

For your safety, if you become unable to manage your insulin pump while you are in the hospital, your provider will order another insulin therapy.

DUHS Patient Education Governance Council approved 03/2016 (renewed 07/2021) Using Your Own Insulin Pump in the Hospital Developed and approved specifically for DUHS patients and their loved ones. Not intended for distribution or use by individuals outside of Duke Health Flesch-Kincaid: 7.4 Diabetes If you remove your pump, it is best to send it home with your family. If that is not possible, your nurse will help you secure your pump in a safe location.

Whom do I call if I have questions?

- If you have any questions or concerns about using your pump, ask a member of your health care team.
- Tell your health care team if you want to talk with a dietitian or diabetes educator about your diabetes.