

Sick day management – supplemental insulin guide for insulin injections
Urine ketone negative and/or blood ketone less than 1.0mmol/L

BLOOD OR URINE KETONE LEVEL	BLOOD GLUCOSE LEVEL (BGL)			
	Below 4.0 mmol/L	Between 4.1 and 8.0 mmol/L	Between 8.1 –and 15.0 mmol/L	More than 15 mmol/L/L
URINE negative AND/OR BLOOD <i>less than 1.0 mmol/L*</i>	May need to reduce insulin dose Treat hypoglycaemia as per your usual hypo treatment. If unable to eat or drink IMPLEMENT INDIVIDUAL HYPO EMERGENCY PLAN. Dial 000 or intramuscular glucagon. Check BGL EVERY HOUR until normal Check ketones 2-4 hourly SEEK URGENT MEDICAL CARE if BGL do not rise	No change to insulin Drink fluids with carbohydrate containing approximately 15-20g of carbohydrate Recheck glucose and ketones IN TWO HOURS	May fall without extra insulin If elevated for more than 2 hours consider 5% supplemental insulin Drink fluids with carbohydrate Administer insulin for carb ratio if this is your usual diabetes management Recheck glucose and ketones IN TWO HOURS	5-10% supplemental insulin dose Drink carbohydrate -free fluids OR Drink fluids with carbohydrate Administer insulin for carb ratio if this is your usual diabetes management Recheck glucose and ketones IN TWO HOURS SEEK URGENT MEDICAL CARE if unable to reduce BGL after 2 supplemental doses of insulin
	<i>* For some people this will be less than 0.6 mmol/L – check your Sick Day Action Plan</i>			

*For some people this will be less than 0.6 mmol/L. For example people who:

- Have a history of recurrent diabetic ketoacidosis
- Have very poor glycaemic control
- Have an eating disorder
- Are known to frequently and/or inappropriately omit insulin
- Are pregnant have multiple co-morbidities which may include end-stage organ failure
- Are elderly
- Live in a remote/isolated are some distance from medical support.