

High blood glucose (hyperglycaemia) Action Plan - type 1 diabetes on multiple daily injections

Commence immediately if you feel unwell OR your blood glucose (BG) or sensor glucose (SG) is greater than 15.0mmol/L for more than 6 hours (more than 3-4 hours if pregnant) OR your blood ketones are positive.		Medical Record No: _____ Name: _____ Date of Birth: ____/____/____
Doctor: _____ CDE: _____	Ph: _____ Ph: _____	Health Direct (24hr health advice line) Ph: 1800 022 222
My glucose target range is:	Fasting: _____ mmol/L Pre meal: _____ mmol/L	Before bed: _____ mmol/L Overnight: _____ mmol/L
Glucose monitoring instructions*	Monitor BG/SG at least 4-6 times a day (e.g. before meals, 2 hours after meals and at bedtime). Confirm high or low SG results with BG before taking action to correct them. Check BG/SG 1-2 hours after correction insulin dose/s.	
Continuous glucose monitoring (CGM) <i>Consider risk of inaccurate results.</i>	Medications to avoid _____	
Blood ketone monitoring instructions*	If blood ketones greater than 0.6mmol/L, give correction insulin. Check blood ketones 1-2 hours.	
Usual insulin instructions* <i>'Set' dose OR Insulin:Carbohydrate Ratio/s:</i> B/fast: ____ units OR 1 unit per ____ grams Lunch: ____ units OR 1 unit per ____ grams Dinner: ____ units OR 1 unit per ____ grams	Basal insulin (long acting) should never be stopped. Bolus (rapid acting) insulin at main meals/snacks may need to be reduced if your food and fluid intake is reduced.	
Usual diabetes medications instructions* <i>Consider risk of renal failure, cardiac failure, pancreatitis and diabetic ketoacidosis.</i>	Continue _____ Hold _____	
Correction insulin (rapid acting) instruction* <i>Insulin Sensitivity:</i> _____ unit lowers BG/SG by _____ mmol/L. <i>Active Insulin Time:</i> _____ hours.	Administer immediately but at least 2 hours since last main meal dose. Limit to 2 consecutive correction doses.	
Foods and fluid instruction	Have either your usual meals or approximately 15g of an alternative carbohydrate per hour during the day. Have ½ to 1 cup of fluid (125-250ml) every hour to avoid dehydration. If BG less than 15.0mmol/L, have carbohydrate containing fluids. If BG greater than 15.0mmol/L, have carbohydrate-free fluids.	
When to visit your nearest hospital	BG greater than 15.0mmol/L for more than 24 hours despite oral medications or 2 correction insulin doses. BG less than 4.0mmol/L despite 2 hypo treatments. Blood ketones present. Symptoms of drowsiness, confusion, breathing difficulties or severe abdominal pain. Vomiting persists for more than 4 hours. Unable to self-care and support person unable to assist.	
Dated:	CDE Name:	Sign:

* Based on ADEA 2020 Clinical guiding principles for sick day management of adults with type 1 and type 2 diabetes.