

INSULIN PUMP THERAPY

Troubleshooting High Blood Glucose

If blood glucose is rising and not coming down after a correction bolus, take out the infusion set and check to see if it was bent or kinked. Do NOT continue giving correction boluses with the insulin pump. Always check blood glucose 1 to 2 hours after changing your set.

If blood sugars are above 250 for a few hours, check urine for ketones

- If ketones are small, give a correction dose by injection.
- If ketones are moderate or large - double the calculated correction dose OR take 20% of your daily dose of insulin (check your history for the last several days to get an average daily dose). Administer the insulin by injection – NOT with the pump.
- Drink at least 8 to 16 ounces of fluids every hour to stay well hydrated, such as water or sugar-free/caffeine-free beverages.

Take the following troubleshooting action

- Insert a new infusion set.
- Continue to monitor blood glucose and ketones until you're under 200 and ketones are negative to trace.
- If sugars are not coming down, ketones remain, or you're feeling unwell - Call us at (508) 334-3206. After hours or on weekends call (508) 334-1000. Ask the operator to page the adult endocrinologist on call. If you don't receive a call back within 30 minutes, call again.
- Have a source of fast-acting glucose available to use if the correction dose makes you go too low. Follow usual guidelines for treating lows.

Be prepared and have these items available

- ✓ Insulin vials or insulin pens (both long-acting and rapid-acting)
- ✓ Know your dose of long-acting insulin to take in case of pump failure
- ✓ Syringes or pen needles
- ✓ Ketone strips
- ✓ Glucagon
- ✓ Blood glucose meter test strips
- ✓ Fast-acting glucose such as glucose tablets, juice, glucose gel, etc.

UMASS MEMORIAL DIABETES CENTER OF EXCELLENCE

Ambulatory Care Center (ACC), Second Floor
55 Lake Avenue North, Worcester, MA 01655

508-334-3206

umassmed.edu/diabetes

Diabetes

CENTER OF EXCELLENCE

