Flow Chart of Management of Diabetes Patients during Surgery

**PRE-OP**

**Grade of Procedure**

**Minor**

- First on theatre list
- Usual insulin on day before op
- Fast from midnight day before
- 20% insulin Total Daily Dose as Levemir at 0800
- NaCl 0.45%/Dext 5% from 0800 at maintenance rate
- 1 hourly capillary glucose tests

**Major / Emergency**

- First on theatre list
- Usual insulin on day before op
- Breakfast at 0730, then fast
- 20% insulin Total Daily Dose as Levemir at 0730
- 10% insulin Total Daily Dose as Novorapid at 0730
- NaCl 0.45%/Dext 5% from 0730 at maintenance rate
- 1 hourly capillary glucose tests

**POST-OP**

**Eat/drink?**

- IV Variable Rate Insulin Infusion from admission OR from time of fasting (e.g. elective complex op)
- IV fluids (NaCl 0.45% & Dext 5%) + KCl 10 mmol per 500 ml
- 1 hourly capillary glucose tests
- Discuss management with - Diabetes Service OR - Anaesthetist OR - Medical Registrar

**Lunch**

- IV Variable Rate Insulin & IV Fluid Infusion (See Text)
- Resume usual Lunchtime Insulin dose OR give 10% insulin Total Daily Dose as RAA insulin (NOV) AFTER child has eaten (in case of food refusal or vomiting).

**Oral Intake not permitted or not tolerated**

- Resume usual insulin regimen (via SCI or CSII)
- Usual Diet allowed & tolerated

**Tea**

- Resume usual Teatime Insulin dose OR give 10% insulin Total Daily Dose as RAA insulin (NOV) AFTER child has eaten (in case vomiting or refusing food). NB: may delay RAA insulin 3-4 hrs, then retry SCI/CSII insulin & food

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