Why is blood glucose management important before surgery?

It is always important to manage your blood glucose, but it is especially important to have good glucose control before surgery.

Managing your blood glucose before surgery helps to reduce your risk of infection and other problems after surgery.

How does surgery affect my blood glucose levels?

Stress before and after surgery can cause your body to release hormones that can cause your blood glucose levels to change. Other changes related to surgery, such as changes to diet and medication routine, can also make it harder to manage your blood glucose levels.

What should I do before I schedule my surgery?

Before you schedule surgery, make an appointment with the doctor who manages your diabetes. Review your self-management guidelines and ask your doctor about the best way to manage your diabetes before surgery.

Ask your doctor how you should adjust your diabetes medications or insulin before surgery.

Tell the person who schedules your surgery that you have diabetes and would like your surgery to be scheduled early in the morning. Having your surgery early will have the least amount of change to your insulin dosing or diabetes.

If you use an insulin pump and will have general anesthesia or a surgery that lasts longer than 1 hour, your insulin pump will need to be disconnected before surgery. Please bring enough pump supplies and insulin to last throughout your hospital stay. The pump will be reconnected when you are able to manage it again.

The week before surgery:

Carefully follow your diabetes treatment plan and test your blood glucose before each meal and at bedtime. Record the results and bring your blood glucose record with you when you come for surgery.

- Your pre-meal blood glucose goal should be **90 to 130 mg/dl** or ________________
- Your bedtime blood glucose goal should be **100 to 140 mg/dl** or ________________

Bring with you the morning of your surgery:

You must bring oral glucose gel with you in case your blood glucose level is low on the day of surgery. You can buy the gel in the diabetes supply section of the drug store.
Please follow these guidelines the **DAY BEFORE** surgery:

<table>
<thead>
<tr>
<th>If You Take Oral Diabetes Medication</th>
<th>If You Take Insulin</th>
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<tbody>
<tr>
<td>Continue to test your blood glucose at each meal and at bedtime. Write down the values and bring your record with you on the day of surgery.</td>
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</tr>
<tr>
<td>Continue to take your diabetes medication at the same times as usual, unless your doctor gives you other instructions.</td>
<td>Continue to take your insulin at the same times as usual, unless your doctor gives you other instructions.</td>
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<tr>
<td>Do not eat or drink anything after midnight the night before surgery. This includes no gum, mints or smoking.</td>
<td>If you take Lantus®, Levemir®, NPH, Toujeo®, Tresiba®, or NPH take as prescribed the day before surgery.</td>
</tr>
</tbody>
</table>

Please follow these guidelines the **MORNING** of surgery:

<table>
<thead>
<tr>
<th>If You Take Oral Diabetes Medication</th>
<th>If You Take Insulin</th>
</tr>
</thead>
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| Do not take any your oral diabetes medication the morning of surgery. | **Follow your diabetes doctor’s instructions about taking insulin the morning of surgery.**
If you did not get instructions, follow the guidelines below. |
| Do not take any other diabetes medications, including Byetta® (exenatide injection) or Symlin® (pramlintide acetate) the morning of surgery. | If you take long-acting Lantus®/Toujeo®, Tresiba® Levemir® or NPH, take half of the prescribed dose the morning of surgery. |
| Do not eat or drink anything the morning of surgery. Do not swallow water when you brush your teeth. **Exception.** Patients who do NOT have delayed stomach emptying are allowed to drink clear liquids up to 2 hours before their scheduled arrival time at hospital. See page 2 of this binder, “Pre-operative Checklist,” for more information. | If you take mixed insulin (70/30 or 75/25), take half the prescribed dose the morning of surgery if your blood glucose is greater than 200. If your blood glucose is less than 200, do not take any insulin on the day of surgery. An Accucheck will be done upon arrival. |
If you have any questions about the dose you are supposed to take, please talk to the doctor who manages your diabetes.

If you use an insulin pump, continue the same basal rates the morning of surgery. The admission nurse will ask you to provide your basal rates and total dose of insulin.

Please bring enough pump supplies and insulin to last throughout your hospital stay. When you arrive at the hospital, inform the admission nurse that you have an insulin pump connected.

If the insulin pump needs to be disconnected due to the type of anesthesia or the length of the procedure, the pump will be disconnected before you arrive in the operating room. The pump will be given to a family member before surgery. Your insulin pump will be reconnected after surgery, once you are alert enough to manage it.

What should I do if my blood glucose is too low (less than 70 mg/dl) the morning of surgery?

1. Take one tube of oral glucose gel. Squeeze entire tube of gel into mouth and swallow.
2. Wait 15 minutes.
3. Test your blood glucose.
4. If it’s still low, take another tube of oral glucose gel.
5. If your blood glucose stays low after two treatments, come to the hospital.

What should I do if my blood glucose is too high (more than 150 mg/dl) the morning of surgery?

If your blood glucose is too high on the morning of surgery, come to the hospital.

This information is not intended to replace the medical advice of your doctor or health care provider. Please consult your health care provider for advice about a specific medical condition.

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