Surgery for the Child with Diabetes

Before- and after-surgery care steps

If your child is on Insulin injections

Day of surgery	 Give usual Lantus dose. Parent to check blood sugar 2.5 hours before the procedure. If the blood sugar is: Less than 100 mg/dL: Treat with 15 g of carbohydrate (clear liquids like apple juice, no solid food). Recheck blood sugar in 15 minutes. Repeat if blood sugar is still less than 100. 100 to 250 mg/dL: Do nothing More than 250 mg/dL: Give half of the usual correction dose of short acting insulin Parent should bring meter and short acting insulin to the procedure. Recheck blood sugar right before the procedure and check every hour during the procedure.
In the week before surgery	 Test overnight basal rates on insulin pump or the Lantus dose. One night, several days before your scheduled surgery, have your child eat a dinner with a known carbohydrate count and low in fat and protein. Then, check blood sugars at: Bedtime Midnight 3 a.m. 6 a.m. If blood sugars do not remain stable overnight, contact the blood sugar line by phone at 206-987-5452 or MyChart for help adjusting the doses prior to surgery.
Night before and day of surgery	 Always give Lantus if your child is on injections or keep the insulin pump running for the day of surgery. On the day of surgery, only give a correction if your child's blood sugar is greater than 250mg/dL and give just half the dose

To Learn More

206-987-2640

• Endocrine

- **Free Interpreter Services**
- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.



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- Ask your child's healthcare provider
 seattlechildrens org/patient-
- seattlechildrens.org/patienteducation

After surgery	Give bolus insulin 15-30 min after eating or drinking until child can tolerate food and drink well or all nausea is gone
	Do frequent blood sugar and ketone testing every 2-3 hours as ketones can appear due to the "stress" of the procedure, even if blood sugars are in target.
	Try to give small, frequent sips of liquids to prevent dehydration. Any type of liquid like water, juice, or sports drink is fine after surgery.

If your child is on Insulin pump

Should be scheduled for first procedure of the day

Day of surgery	Keep insulin pump running for basal insulin. Set the target blood sugar for corrections on the pump to 150 and/or turn on exercise mode.
	Parent to check blood sugar 2.5 hours before the procedure. If the blood sugar is:
	 Less than 100 mg/dL: Treat with 15 g of carbohydrate (clear liquids like apple juice, no solid food). Recheck blood sugar in 15 minutes. Repeat if blood sugar is still less than 100.
	 100 to 250 mg/dL: Do nothing
	 More than 250 mg/dL: Give half of the usual correction dose of short acting insulin
	Parent should bring meter and short acting insulin to the procedure.
	Recheck blood sugar right before the procedure and check every hour during the procedure
After surgery	Give bolus insulin 15 to 30 min after eating or drinking until child can tolerate food and drink well or all nausea is gone.
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Seattle Children's offers free interpreter services for patients, family members and legal representatives who are deaf or hard of hearing or speak a language other than English. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201. This handout has been reviewed by clinical staff at Seattle Children's. However, your needs are unique. Before you act or rely upon this information, please talk with your healthcare provider. © 2024 Seattle Children's, Seattle, Washington. All rights reserved.

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