

Patient Instructions for Preoperative Diabetes Management

	Date	Date
Circle the patient's medication	Evening before Surgery	Morning of Surgery
Insulin pump	Keep at usual rate	DO NOT allow early morning higher rate
ORAL Diabetes medication	Take usual dose	DO NOT take morning dose
<u>Short Acting GLP-1</u> Exenatide IR (Byetta) Lixisenatide (Adylinx) Liraglutide (Saxenda, Victoza)	If daily dosing, take usual dose.	DO NOT take morning dose
<u>Long Acting GLP-1</u> Semaglutide (Ozempic, Wegovy) Semaglutide (Rybelsus: oral) Dulaglutide (Trulicity) Exenatide ER (Bydureon)	Hold one week prior to procedure	Hold one week prior to procedure
<u>Combined GLP-1 and GIP Agonist</u> Tirzepatide (Mounjaro, Zepbound TM)	Hold one week prior to procedure	Hold one week prior to procedure
<u>Combined Insulin & GLP1 Products</u> Insulin degludec & liraglutide (Xultophy) Insulin glargine & lixisenatide (Soliqua)	Take 75% (3/4) of your usual dose.	DO NOT take morning dose
<u>Rapid Acting Insulins:</u> Afrezza (inhaled insulin), Novolog, Regular, Apidra or Humalog	Take usual dose	DO NOT take morning dose
<u>Intermediate and Insulin Combinations:</u> NPH 70/30, 75/25 or 50/50	Take 50% (half) of your usual dose.	DO NOT take morning dose

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<u>Long-Acting Insulins</u> Basaglar, Lantus, Levemir, Toujeo, or Tresiba	Take 75% (3/4) of your usual dose.	DO NOT take morning dose
<u>SGLT2 Inhibitors</u> Canagliflozin (Invokana) Dapagliflozin (Farxgia) Empagliflozin (Jardiance) Ertugliflozin (Steglatro) There are multiple combination drugs on the market. Consider the main ingredient if it involves combination drugs follow directions for the SGLT-2 ingredient. Instructions for monitoring glucose once SGLT-2 medication held: Stopping these medications for such a short time should not cause a dramatic change in glucose (blood sugar). <ul style="list-style-type: none"> • Please check your glucose (blood sugar) a minimum of 2 times daily • If you see an increase of 50 points or greater contact your primary care provider (PCP) for treatment advice • If glucose is greater than 200 more than once, contact PCP. 		Hold 3 days prior to surgery Canagliflozin (Invokana), Dapagliflozin (Farxgia), Empagliflozin (Jardiance) Hold 4 days prior to surgery Ertugliflozin (Steglatro) Have patient monitor glucose closely once medications are discontinued

When to check Blood Sugar: Check glucose as usual. If glucose > 150 on morning of surgery, cover with usual correction insulin dose (sliding scale)

If you become hypoglycemic: If glucose is less than 80 (hypoglycemia) or if you are having symptoms. You may drink 4 ounces (1/2 cup) of clear liquids: apple juice, fruit punch, soda, sweet tea. **DO NOT** drink fluids with PULP, **DO NOT** drink milk. **DO NOT** eat any food. **Recheck** blood sugar every 20 minutes or sooner if symptoms persist. Continue to treat until you arrive at the hospital.