# THE University of Vermont HEALTH NETWORK

#### **Central Vermont Medical Center**

# **Sick Days**

## **Food Adjustment**

Consume carbohydrate at meals using liquids or soft foods if unable to tolerate solids.

Eat/drink 30-60 gm carb every 3-4 hours OR 15gm carbohydrate every hour

#### If you are able to eat:

Eat small meals. (There are 30gms of carbohydrate in each of the following).

Try lighter, blander carbohydrates such as:

1 mini bagel or 2 slices bread

1 cup of cooked cereal

1 cup of mashed potatoes

2 cups noodle or rice soup

2/3 cup cooked noodles or rice

12 Saltines

1 cup regular Jell-O (NOT sugar-free)

2 sheets of Graham crackers or 4 graham squares

### **Tips for Nausea and Vomiting**

BS greater than 250: Drink Calorie Free, Caffeine Free liquids in place of meal.

BS 180-250: consume 15 gm carbohydrates in place of meal.

BS less than 180 consume usual mealtime carbohydrate amount.

Eat or Drink 30 grams carb every 4 hours during the day

Check Ketones every 2 - 4 hours.

Insulin dosing is important

Know when to call for help

Goal: maintain blood sugar of 100-180.

If you throw up, do not eat or drink for 1 hour, rest but do not lie flat. After 1 hour, take sips of liquids every 10 minutes.

**Blood Sugars under 100mg/dl or falling quickly** drink fluids with sugar in them: There are 15 grams of carbohydrates in each of the choices below: Consider: temporary basal decrease of 20%

½ cup Apple Juice, Orange Juice or Regular soda or gingerale

1 Popsicle

5 Lifesavers

1 cup Gatorade or other sports drinks

Tea with 1 Tbsp. honey

#### **Drink Lots of Fluids:**

To keep from getting dehydrated drink the following choices:

Water Club soda Diet soda, caffeine free Tomato juice Chicken broth

**Blood Sugar Log:** need at least breakfast, lunch, dinner and bedtime blood sugars

<u>3am</u>	<u>6am</u>	<u>8am</u>	<u>10am</u>	<u>12pm</u>	<u>2pm</u>	<u>4pm</u>	<u>6pm</u>	<u>8pm</u>	<u>10pm</u>

#### **Insulin dosing**

#### Check BS every 2 hours if over 250mg/dl

No ketones: Use sensivity for correction with insulin pump: Take insulin correction of 10% of Total Daily Dose

Moderate to large ketones: Take insulin correction of 20% of Total Daily Dose by injection.

**Blood sugar of 400 or higher**, with or without ketones: take correction 20% of Total Daily Dose by injection. **BS** not acceptable after 2-3 hours, remove pump and inject manually.

- Consider basal increase of 20-50% if blood sugars are high and you are correcting every 2 hours.
- Consider bolus dosing increase by decreasing ratio 5 points.

### **Call for help when:**

- Fever greater than 102, not improved with Tylenol or lasts more than 24 hours.
- SOB
- Vomiting or Diarrhea more than 5 times or for more than 6 hours
- BS greater than 300 twice that does not respond to increased insulin and fluids
- Moderate or large ketones