# THE University of Vermont HEALTH NETWORK

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

# **Sick Days**

# **Food Adjustment**

Consume carbohydrate at meals substituting liquids of soft foods if unable to tolerate solids.

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

#### If you are able to eat:

Eat small meals. (There are 30 gms 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: Calorie Free, Caffeine Free liquids in place of meal.

BS 180-250: consume 15gm 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 your blood sugar every 4 hours

Insulin dosing is important

Know when to call for help

Goal: maintain a 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

Breakfast	Lunch	Dinner	Bedtime

## **Oral medications for Diabetes**

BS over 130, take your diabetes medications.

BS under 100, stop your oral diabetes medications.

#### Insulin

- Continue your insulin at the current dose
- Consider basal dosing increase (long-acting or mixed insulin) of 20-50% if blood sugars are high and you are correcting every 2 hours.
- Consider bolus dosing (short-acting insulin) increase by 10% if your blood sugar 2 hours after a meal is greater than 200

### Call for help when:

- Fever greater than 102, not improved with Tylenol or lasts more than 12 hours.
- SOB
- Vomiting more than once
- Feel groggy or confused
- Diarrhea more than 5x or for more than 6 hours
- BS greater than 300 twice that does not respond to increased insulin and fluids