

Sick day guidelines

- 1. ALWAYS give basal insulin**, regardless of whether or not your child is eating or drinking.
- 2. Check and record urine ketones** every time your child urinates (or with each diaper change)
 - If ketones are moderate or large, call the Diabetes Center at 503-494-3273 right away for guidance on insulin dosing. If it is an evening or weekend, call 503-494-8311 and ask for the pediatric endocrinologist on call.
- 3. Check blood sugar every 3 hours.**


When to make an urgent call to the Diabetes Center

- moderate or large ketones
- difficulty breathing
- fruity-smelling breath
- significant drowsiness
- unable to keep down foods or fluids for 2–3 hours due to vomiting or diarrhea
- problems with low blood sugar

What about mealtime (bolus) insulin?

My child is eating

- If ketones are negative/trace/small, give rapid-acting insulin (Humalog, Novolog, Admelog, Lispro, or Aspart) as you normally would at mealtimes, using insulin to carb ratio and high blood sugar correction as needed.
- If ketones are moderate/large, call the Diabetes Center for guidance on giving insulin every 3 hours to correct for ketones.



My child is NOT eating

- 1. Encourage fluids.** The type of fluids will depend on the blood sugar:

BLOOD SUGAR	TYPE OF FLUIDS
Less than 200	Carb-containing fluids (juice, Gatorade, regular soda, Pedialyte, popsicles) Do not dose insulin for the carbs in the fluids.
More than 200	Carb-free fluids like water, diet soda, etc.
- 2. Give high blood sugar correction** using rapid-acting insulin:
 - If ketones are negative/trace/small, give high sugar correction (if needed) at the times you normally would if your child were eating (example 8 a.m., noon and 5 p.m.).
 - If ketones are moderate/large, call the Diabetes Center for guidance on giving insulin every 3 hours to correct for ketones.