This handout explains what to expect if you use your insulin pump during a hospital stay. It describes your role as a partner with your doctors and nurses to ensure you receive the best care possible. It also tells why you may have to receive your insulin through a vein or by injection.

If you use an insulin pump to manage your diabetes, you may have concerns about how your diabetes will be managed during a hospital stay. You may have questions such as:

- Will I be able to use my insulin pump in the hospital?
- Will someone help me if I have a problem with my insulin pump?
- Why would I not be able to use my insulin pump?

**About Insulin Pumps**

You probably already know how your insulin pump works. It provides a steady (basal) dose of insulin. Your doctor or other healthcare provider who treats your diabetes determined what your basal dose should be. Also, you probably give yourself a bolus dose of insulin through your pump when you eat a meal or snack. (A bolus dose of insulin is given to cover food intake.)

**Your Hospital Stay**

When you come to the hospital, you may be very ill. This could change how much insulin you need to keep your blood glucose in the normal range.

Your activity level, eating times, and food choices are also likely to be different in the hospital. This may affect how much bolus insulin you need to give yourself. You will need to work closely with your care team to decide if using your insulin pump during your hospital stay is the best choice for you.

Ask your nurse if you have any questions about using your insulin pump while you are in the hospital.
For example, if you have an infection, your normal doses of insulin may not be enough to control your blood glucose. Your healthcare provider may decide to manage your diabetes with an IV infusion of insulin or with injections instead of using your insulin pump.

**Follow These Guidelines**

You may find that you know more about insulin pumps than some of the hospital staff. If you are able to use your pump during your hospital stay, follow these guidelines to make sure you receive the best care possible:

- Bring your blood testing supplies to the hospital with you.
- Bring all the supplies you need to use your pump. Bring enough insulin for the first day.
- Maintain your pump. Change the tubing every 3 days, or more often if needed.
- Refill the pump reservoir with insulin when needed. Tell your nurse when your insulin is running low. The nurse will obtain more insulin for you from the pharmacy at the hospital.
- Tell your nurse if you see any changes (such as redness) at the pump (infusion) site.
- To ensure your safety, your nurse will check your blood glucose level before each meal, at bedtime, and if you show any signs of hypoglycemia (low blood sugar).
- You are responsible for giving yourself any bolus and correction doses, based on what you eat and what your blood glucose levels are.
- Record both your basal and bolus insulin doses on a daily log sheet. Your nurse will give you a log sheet form to use.

**When Other Options Are Needed**

Your healthcare team may decide to manage your insulin with an *intravenous* (IV) infusion or injections because:

- Your blood sugars are not well controlled by your insulin pump.
- You are too sleepy or confused to manage your insulin pump.
- You need a test, such as an MRI, where an insulin pump is not allowed.

The team will work with you to decide when you can safely start using your insulin pump again.

**Questions?**

Your questions are important. Call your doctor or health care provider if you have questions or concerns.