

**MY DIABETES SICK DAY ACTION PLAN**

# Type 2 diabetes using insulin

**This guide can help you plan how to manage your diabetes when you are feeling sick and know when to get medical help.**

Illness and infection may increase or lower your blood glucose levels and make it harder to manage your diabetes. A plan to manage sick days before you become unwell is essential.

The Australian Diabetes Educators Association (ADEA) recommends you work with your Credentialed Diabetes Educator (CDE) to prepare a sick day kit. Keep it up to date. Your sick day kit should always include your personal sick day action plan.

**Be prepared for managing diabetes when you are unwell**

- Know when to use your sick day plan.
- Have a sick day kit prepared and check it regularly to replace any expired items.
- Know how often to monitor your blood glucose levels.
- Know if you need to stop or adjust any of your diabetes medications, including your insulin doses.
- Keep a selection of suitable foods and drinks to consume when you are unwell.
- Know who to call if you need help with managing your diabetes while unwell.
- Know when to seek urgent medical help.

**Name:**

**Date of plan:**

**My emergency contacts:**

Credentialed Diabetes Educator:

Endocrinologist:

General practitioner:

Local hospital emergency:

Healthdirect:

**1800 022 222** (24-hour health advice helpline)



Your trusted partner in diabetes care

ADEA is a National Health Professional  
Body Agent for the NDSS.



The NDSS is administered by Diabetes Australia

### Follow your sick day action plan when:

- you feel unwell, even if your blood glucose level is within your target range
- your blood glucose level is higher than 15.0 mmol/L for 8–12 hours or more, even if you feel well.

### Why it's important to be prepared for sick days

When you are sick, your body produces stress hormones like cortisol and adrenaline. These stress hormones often cause your glucose levels to rise. Your pancreas may not produce enough insulin to use the extra glucose. The body tries to get rid of the extra glucose through the urine, which can cause you to become dehydrated. This dehydration can sometimes be severe and can lead to a serious condition called Hyperglycaemic Hyperosmolar Syndrome (HHS) which can be life threatening. While HHS is more common in older people, it can occur in people of any age.

Symptoms of HHS can develop over several days and include:

- very high blood glucose levels (often over 30.0 mmol/L)
- excessive thirst and/or a dry mouth
- increased urination
- feeling drowsy, weak, or confused
- dry skin
- fever.

Remember to check your sick day kit at least every three months to make sure items haven't expired. Replace used items.

If you are taking diabetes medications called SGLT2-inhibitors (brand names include Forxiga, Qtern Xigduo, Jardiance, Jardiamet and Glyxambi) you are also at risk of developing a condition called diabetic ketoacidosis (DKA). DKA requires urgent medical attention. It can cause similar symptoms to HHS, but blood glucose levels are not always high.

Other symptoms of DKA include nausea, vomiting, stomach pains, rapid breathing, and fruity-smelling breath. If you experience any of these symptoms, it is important that you seek urgent medical help or call an ambulance.

### What to have in your sick day kit

Your diabetes sick day kit should contain all the items you might need to manage your diabetes when unwell, including:

- your sick day action plan, including emergency contact details (people you can call on for help if needed, such as family, friends or neighbours, members of your healthcare team and your local hospital emergency department)
- spare insulin pens and pen needles or syringes
- a record book/diary or smartphone app to record results of your glucose and ketone checks
- a thermometer (optional)
- foods to treat hypoglycaemia (hypos) such as glucose gels, tablets, or jellybeans
- easy-to-eat carbohydrate foods such as plain biscuits or crackers
- drinks including water, sweetened and sugar-free drinks
- rehydration fluids such as Gastrolyte® or Hydralyte® (these can help to keep you hydrated if you are vomiting or have diarrhoea)
- pain relief medications (if you use a continuous glucose monitor (CGM) check whether some pain medications (paracetamol) may affect the accuracy of your device).

### Sick day action plan

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#### Key steps for diabetes sick day management

- Check blood glucose levels more regularly, usually every 2–4 hours.
- Never stop taking your insulin, although the dose may need adjusting. You will often need more insulin when unwell, even if you are eating less than usual.
- If your blood glucose levels are above 15 mmol/L for six hours or more, you may need to increase your basal or intermediate insulin by 10–20%.
  - If your blood glucose levels remain high with an increase in basal or intermediate insulin, you may need extra doses of short- or rapid-acting insulin.
  - If you don't usually take rapid-acting or short- acting insulin, your doctor may prescribe this for you to use when you are unwell.
- If you have persistent vomiting and/or diarrhoea, you may need to reduce your insulin doses by 10–20%, but never stop taking your insulin.
- If you take any of the following diabetes medications, stop taking them if you have vomiting, diarrhoea, or are not eating much:
  - metformin (brand names include Diabex, Diaformin, Metex, Formet)
  - SGLT-2 inhibitors (brand names include Forxiga, Qtern Xigduo, Jardiance, Jardiamet, Glyxambi)
  - GLP-1 agonists (brand names include Victoza, Saxenda, Ozempic, Mounjaro, Wegovy).
- If you take a sulphonylurea (brand names include Diamicon, Glyade, Amaryl and Glimel) and are unable to eat you may need to stop taking it or reduce the dose to prevent hypoglycaemia.
- Continue to eat and drink if possible.
- If you stop any diabetes medications, restart them when you are feeling well again (normally when you have been eating and drinking normally for 24–48 hours).
- Seek urgent medical care (speak with your doctor or diabetes team or go to your nearest hospital emergency department) if you remain unwell or cannot manage your diabetes.

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#### Keep up food and fluid intake:

- Try to have half to one cup (125–250 mL) of fluid every hour to avoid dehydration, unless your doctor has asked you to restrict your fluid because of other health conditions. This could include water, tea, sugar-free cordial or lemonade, or any other sugar-free non-alcoholic drinks.
- Eat foods containing carbohydrate regularly to keep up your energy levels and prevent low blood glucose levels:
  - If you feel nauseous, try having foods such as toast, plain cracker biscuits, plain rice or pasta, or mashed potato.
  - If you cannot eat your normal meals, aim to have around 15 g of carbohydrate every hour during waking hours from easy-to-digest carbohydrate foods such as 1 slice of bread or toast, 1 small banana, 6 water crackers, 9 rice crackers or 2–3 medium plain cracker biscuits, ¼ cup cooked rice, ½ cup mashed potato or 2 plain sweet biscuits (e.g. milk arrowroot).
- If you can't eat, try to replace the carbohydrate in your usual meals with carbohydrate-containing fluids such as fruit juice, regular cordial or lemonade, Gatorade, tea with sugar, milk, regular jelly or lemonade ice blocks.
- If you are eating carbohydrate foods and your blood glucose level is over 10.0 mmol/L, choose carbohydrate-free fluids such as water, diet lemonade or cordial, broth, tea or herbal tea without milk or sugar, sugar-free jelly or Hydralyte ice blocks.

## Sick day action plan (continued)

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### Continuous glucose monitoring:

If you use CGM, confirm glucose readings with a finger prick check:

- before taking action to correct out-of-range readings (remembering there is a lag time between the two readings)
  - when taking more than 500 mg/day of vitamin C if using FreeStyle Libre 2
  - when taking paracetamol if using Medtronic Guardian 4 (or Dexcom G6 if taking more than 1000 mg every 6 hours).
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### My action plan:

Medications to stop with vomiting, diarrhoea or poor food intake

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When to monitor blood glucose levels

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How often to monitor blood glucose levels

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When to increase insulin dose

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Name of insulin to be increased

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How much to increase

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When to decrease insulin dose

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Name of insulin to be decreased

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How much to decrease

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### Seek help if needed

- When you're unwell, it can be hard to follow your sick day action plan, especially if it's the first time.
- Include in your sick day action plan details of who might stay with you to help support you. This could be a family member, friend, or neighbour.
- Phone your CDE/healthcare team early for help; this may prevent you from getting worse and needing emergency care.
- Seek medical advice to treat the underlying illness or infection.



### Seek urgent medical help if:

- your glucose levels continue to rise despite following your sick day action plan
- your blood glucose levels remain below 4.0 mmol/L despite two hypoglycaemia treatments
- you have persistent vomiting, especially if more than 4 hours, or if it becomes stained with red or yellow/green
- you have symptoms of severe dehydration (including increased thirst, dry mouth, weakness, feeling faint or dizzy, rapid heartbeat, headache, confusion, blurred vision, dry skin and lack of sweating and reduced urination or dark urine)
- you become drowsy or confused
- you develop fast or unusual breathing
- you have stomach pain
- you or your support person(s) cannot carry out or follow your sick day action plan.

## The NDSS and you

Whether you have just been diagnosed with diabetes, or have been living with diabetes for a while, the NDSS provides a range of support services, information, and subsidised products to help you manage your diabetes, stay healthy and live well. For access to more resources (including translated versions), or to find out more about support services, go to [ndss.com.au](https://www.ndss.com.au) or call the **NDSS Helpline 1800 637 700**.

This information is intended as a guide only. It should not replace individual medical advice. If you have any concerns about your health, or further questions, you should contact your health professional.