

An Australian Government Initiative

NDSS Helpline 1800 637 700 ndss.com.au

Resident sick day plan

If a resident is sick their blood glucose levels (BGLs) may increase or decrease.

All residents with diabetes should have a sick day plan.

Date:	.//		
Resident:			
GP:			

START

Start this plan this plan if:

- » there is a notable change: feeling weak, drowsy, anxious, irritable, tired, sleepy
- » there are signs of fever or infection (chest, urinary, skin)
- » diarrhoea or vomiting
- » changes in appetite (hungry, thirsty or loss of appetite or poor intake of food)
- » new or increased pain.

NEVER STOP ALL INSULIN

You may need to increase or decrease doses

ASSESS

Do a BGL (is it high or low per resident's diabetes care plan?)

Note clinical signs such as:

- » increase/decrease in temperature, change in breathing rate (laboured, increased)
- » increased heart rate, sweaty
- » signs of dehydration e.g. skin turgor, hypotension, dry mouth, low urine output
- » Notify GP (see REPORT, below).

» BGL every 2-4 hours

- » ketones (if type 1 or type 2 at risk of DKA including those on SGLT2 inhibitors) every 4 hours (more frequently if positive & report to GP)
- » vital signs every 4 hours (more frequent if out of target)
- » commence fluid balance chart
- » document food intake (last food intake).

You may need to stop diabetes tablets

TREAT

MONITOR

If a resident's BGL is above 15 mmol/L:

- » 1/4 to 1/2 cup of fluid every hour (for example water, broth, sugar-free jelly)
- » food intake as usual.

If a resident's BGL is below 15 mmol/L:

» include sugar-containing fluids hourly – aim for 15 grams carbohydrate/hour (for example, small jelly, one icy pole, 100 mL sports drink, gastrolyte).

You may need to start insulin temporarily

REPORT

Report to GP immediately if:

- » resident is unable to eat or drink
- » resident becomes drowsy
- » BGLs remain above 15mmol/L for more than 24 hours despite treatment
- » ketones are present.

