

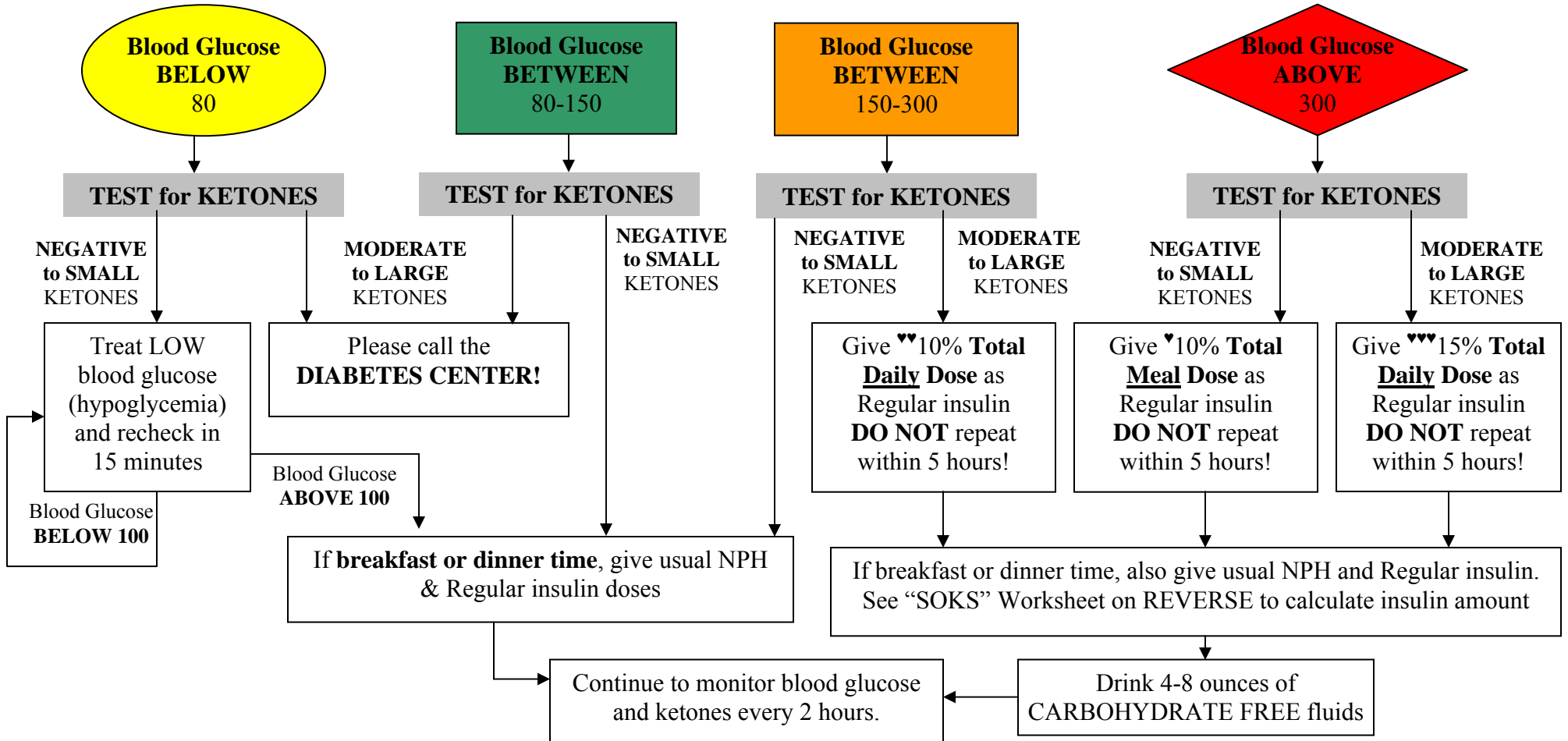
## NPH & Regular Insulin Therapy Flowchart

### When **ABLE** to **EAT & DRINK**

### Self-Management Of Ketones & Sick Days “SOKS”

**DIRECTIONS** for children on **NPH & Regular Insulin Therapy** who are **ABLE** to eat and drink:

- Locate the blood glucose and ketone level below and follow the flowchart all the way to the bottom of the page.
- Follow usual meal plan with carbohydrates from foods or **CAFFEINE FREE** fluids.
- Continue using the “**SOKS**” flowchart according to blood glucoses and ability to eat or drink until sickness and/or ketones are gone.



**\*\* CALL the Diabetes Center (513) 636-2444 (option 9) or 1-800-344-2462 if any of the following occur\*\***

- There is an **EMERGENCY** or you are **CONFUSED**
- You have treated a **LOW** blood glucose (hypoglycemia) **TWICE** in a row with **NO** improvement
- Your child has **MODERATE** to **LARGE** ketones for **8** hours

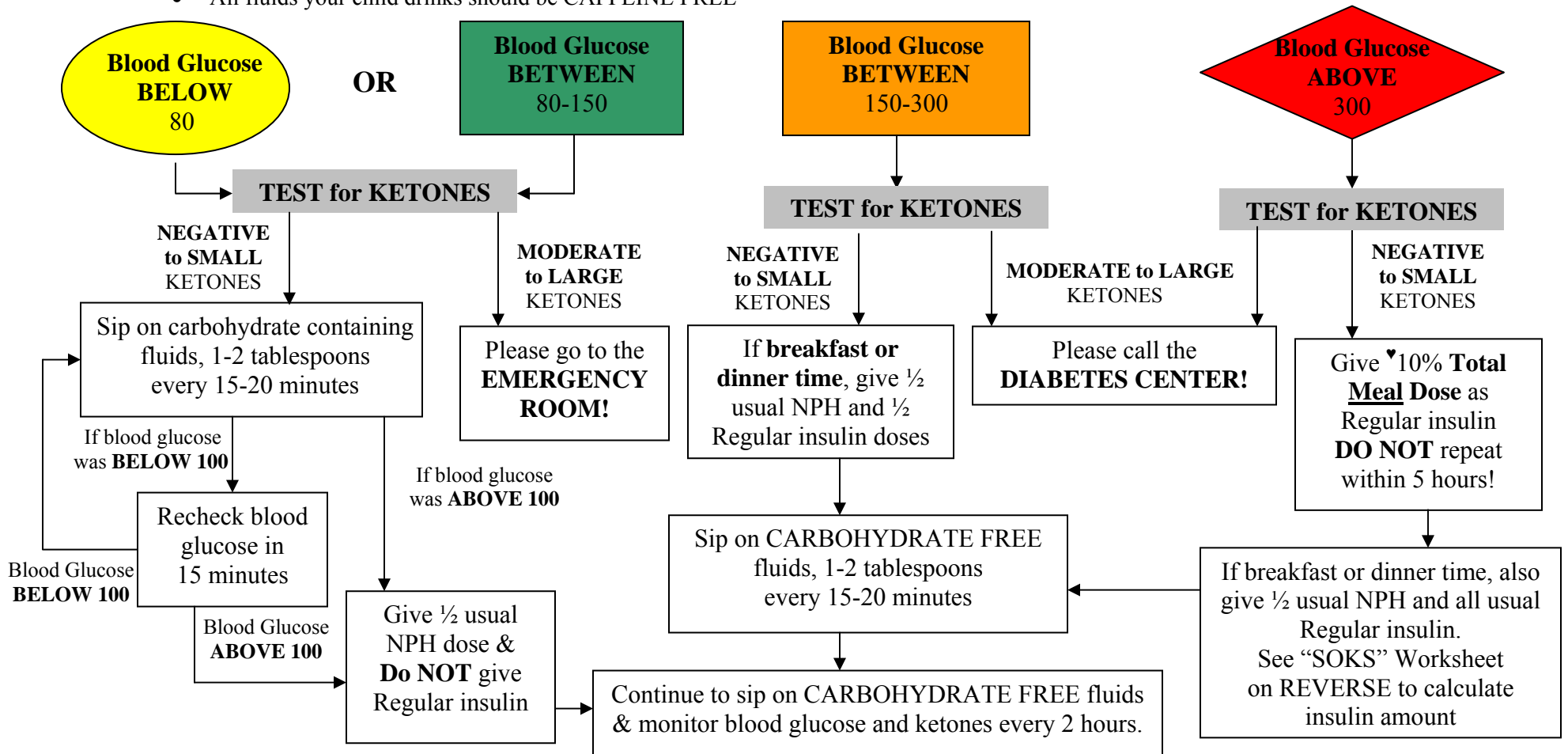
## NPH & Regular Insulin Therapy Flowchart

### When **NOT ABLE** to EAT/DRINK (VOMITING)

### Self-Management Of Ketones & Sick Days “SOKS”

**DIRECTIONS** for children on **NPH & Regular Insulin Therapy** who are **NOT ABLE** to eat and drink (vomiting):

- Locate the blood glucose and ketone level below and follow the flowchart all the way to the bottom of the page.
- Continue using the “SOKS” flowchart according to blood glucoses and ability to eat or drink until sickness and/or ketones are gone.
- All fluids your child drinks should be CAFFEINE FREE



**\*\* CALL the Diabetes Center (513) 636-2444 (option 9) or 1-800-344-2462 if any of the following occur\*\***

- Call IMMEDIATELY if your child is **under 2** years of age!
- There is an **EMERGENCY** or you are **CONFUSED**
- You have treated a **LOW** blood glucose **TWICE** in a row with **NO** improvement
- Your child has **MODERATE** to **LARGE** ketones at **ANYTIME**

## NPH & Regular Insulin Therapy Worksheet

### Self-Management Of Ketones & Sick Days “SOKS”

**When ketones and/or high blood glucose (hyperglycemia) are present, additional insulin is needed. Use the following formulas to calculate extra insulin for ketones and/or high blood glucose (hyperglycemia).**

**♥10% of Total Meal Dose as REGULAR Insulin:** 6am-3pm use morning doses & 3pm-6am use evening doses

NPH Dose \_\_\_\_\_ + Regular Dose \_\_\_\_\_ = \_\_\_\_\_ x (0.10) = \_\_\_\_\_ units of additional Regular (♥10% TMD)

**\*If breakfast/dinner time:** ♥10% TMD \_\_\_\_\_ + Regular Dose \_\_\_\_\_ = \_\_\_\_\_ total units of Regular insulin + NPH Dose \_\_\_\_\_

**\*If NOT ABLE to EAT at breakfast/dinnertime:** ♥10% TMD \_\_\_\_\_ + Regular Dose \_\_\_\_\_ = \_\_\_\_\_ total units of Regular insulin + NPH Dose \_\_\_\_\_ ÷ 2 = \_\_\_\_\_ total units of NPH insulin reduced because NOT eating and/or vomiting

**♥♥10% of Total Daily Dose as REGULAR Insulin:**

AM NPH Dose \_\_\_\_\_ + AM Regular Dose \_\_\_\_\_ + PM NPH Dose \_\_\_\_\_ + PM Regular Dose \_\_\_\_\_ = Total Daily Dose

**TDD \_\_\_\_\_ x (0.10) = \_\_\_\_\_ units of additional Regular (♥♥10% TDD)**

**\*If breakfast/dinner time:** ♥♥10% TDD \_\_\_\_\_ + Regular Dose \_\_\_\_\_ = \_\_\_\_\_ total units of Regular insulin + NPH Dose \_\_\_\_\_

**♥♥♥15% of Total Daily Dose as REGULAR Insulin:**

AM NPH Dose \_\_\_\_\_ + AM Regular Dose \_\_\_\_\_ + PM NPH Dose \_\_\_\_\_ + PM Regular Dose \_\_\_\_\_ = Total Daily Dose

**TDD \_\_\_\_\_ x (0.15) = \_\_\_\_\_ units of additional Regular (♥♥♥15% TDD)**

**\*If breakfast/dinner time:** ♥♥♥15% TDD \_\_\_\_\_ + Regular Dose \_\_\_\_\_ = \_\_\_\_\_ total units of Regular insulin + NPH Dose \_\_\_\_\_

*Example:* If your AM dose is 8N 5R and the PM dose is 3N 2R and you were **sick** at breakfast, but could eat and had a **blood glucose of 200** with **moderate ketones**. You would take an injection of **7 units of Regular** (8+5+3+2=18 x 0.10=1.8+5=7) and 8 units of NPH and continue to follow the “SOKS” flowchart.

**Call the Diabetes Center if Signs & Symptoms of Diabetic KetoAcidosis (DKA) are present at ANYTIME!**

Your child may require treatment in the hospital if one or more of the following are present:

- Rapid deep breaths with a fruity odor
- Increased heart rate/pulse
- When you pinch up the skin on the back of their hand and let go, the skin does not immediately flatten out again like the skin on your own hand
- Dizziness
- Lethargic or unable to arouse
- Prolonged vomiting and/or abdominal pain

#### Sick Day Logbook:

You should be checking your child for the following at least every 2 hours or more frequently, especially if vomiting. *Remember*, if your child is **younger** than **2** years old and vomiting, please call the Diabetes Center immediately!

TIME:													
Blood Glucose													
Ketones													
Insulin given													
Fluids													
Temperature													
Urine output													
Vomiting													