

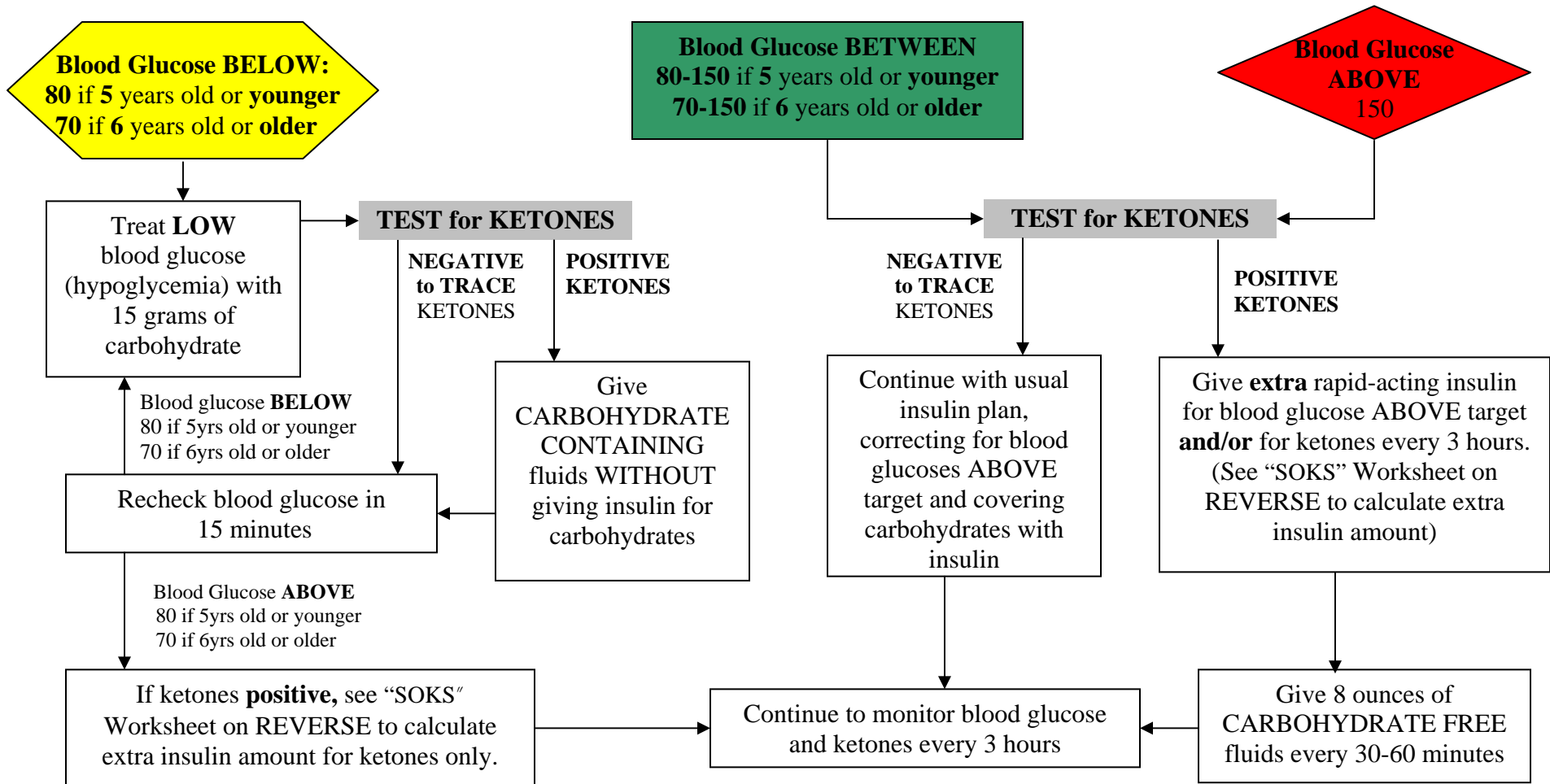
Basal/Bolus Insulin Injection Therapy Flowchart

When **ABLE** to EAT & DRINK

Self-Management Of Ketones & Sick Days "SOKS"

DIRECTIONS for children on **Basal/Bolus Insulin Injection Therapy** who are **ABLE** to eat & drink:

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



****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
- You have treated **MODERATE** to **LARGE** ketones **TWICE** in a row with **NO** improvement

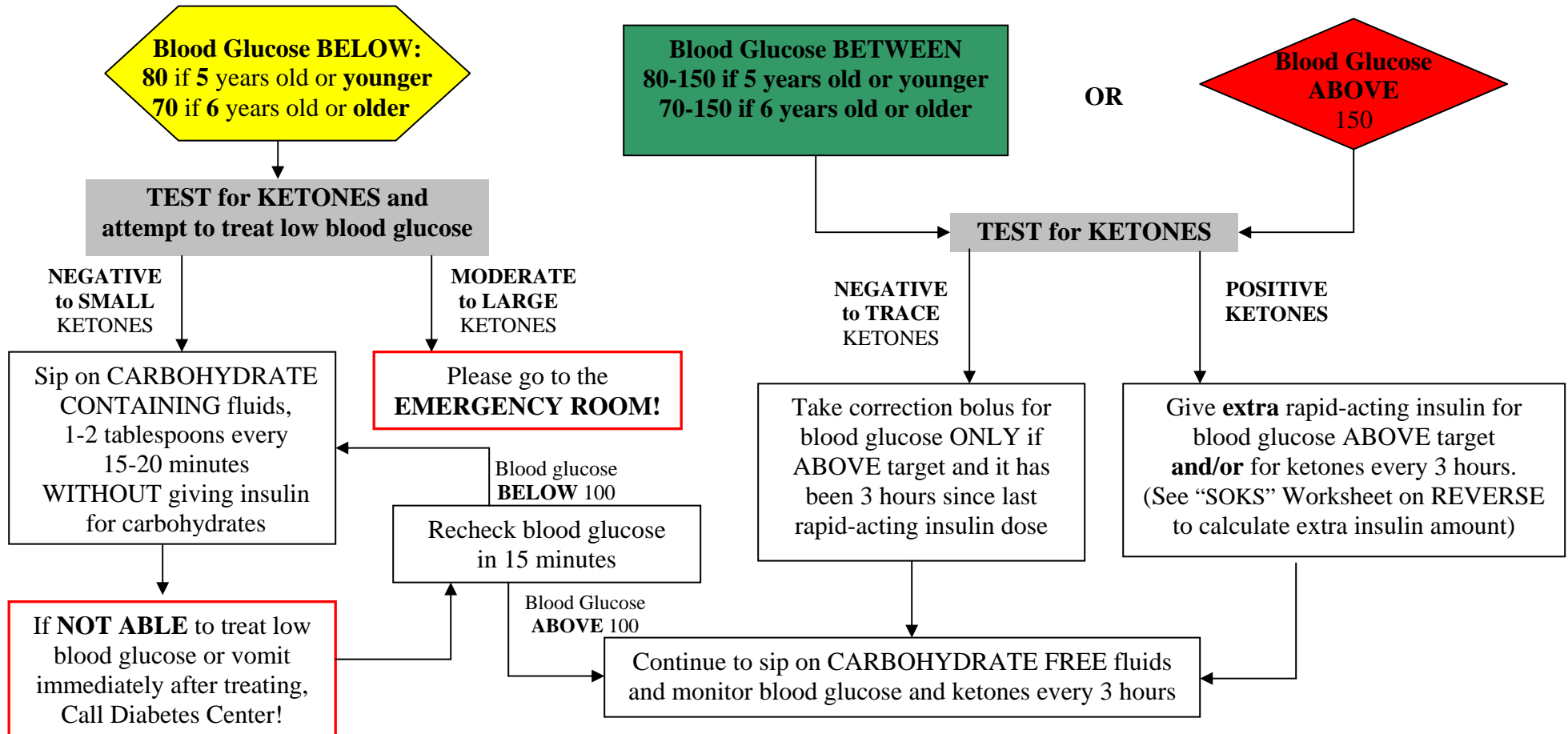
Basal/Bolus Insulin Injection Therapy Flowchart

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

Self-Management Of Ketones & Sick Days “SOKS”

DIRECTIONS for children on **Basal/Bolus Insulin Injection Therapy** who are **NOT ABLE** to eat & drink (vomiting):

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



****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 (hypoglycemia) **TWICE** in a row with **NO** improvement
- You have treated **MODERATE** to **LARGE** ketones **TWICE** in a row with **NO** improvement

Basal/Bolus Insulin Injection 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).

For **SMALL ketones** give **5%** of glargine (Lantus®) dose as rapid-acting insulin:

(glargine (Lantus®) Dose _____ units) x (0.05) = _____ units of **lispro (Humalog®)** or **aspart (NovoLog®)** to give for small ketones.

For **MODERATE ketones** give **10%** of glargine (Lantus®) dose as rapid-acting insulin:

(glargine (Lantus®) Dose _____ units) x (0.10) = _____ units of **lispro (Humalog®)** or **aspart (NovoLog®)** to give for moderate ketones.

For **LARGE ketones** give **15%** of glargine (Lantus®) dose as rapid-acting insulin:

(glargine (Lantus®) Dose _____ units) x (0.15) = _____ units of **lispro (Humalog®)** or **aspart (NovoLog®)** to give for large ketones.

REMEMBER: If blood glucose above target, add correction for high blood glucose to above calculated dose.
If eating carbohydrates, add insulin for carbohydrates to above calculated dose and/or correction.

Example: If your **glargine (Lantus®)** dose is **10 units** everyday and you use **aspart (NovoLog®)** as your bolus insulin and you are **sick** and have a **blood glucose of 148** (target **120**, correction factor **56**) and you have **small ketones** in the late afternoon. You should take an injection of **1 unit of aspart (NovoLog®)** ($148 - 120 = 28 \div 56 = 0.5$; $10 \times 0.05 = 0.5$; $0.5 + 0.5 = 1$) and continue to follow the “SOKS” worksheets.

Call the Diabetes Center if Signs and 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 3 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													