A Guide to being hospitalized



Having to stay in the hospital, whether it's planned or an emergency, can be a stressful and an uncomfortable experience. Preparation beforehand will alleviate some of the stress and help ensure your diabetes is well managed throughout your stay. First and most importantly, be aware of and knowledgeable about your own health and your own needs.

Be prepared to speak up clearly and concisely when you are confused or worried about anything that is happening. Knowing what to expect and being prepared with up-to-date information about your medical history will help you feel less anxious. It will also help the hospital staff take better care of you, and hopefully have you on the mend and on your way home as soon as possible.

Who and what you need to prepare

Talk to your healthcare team

Even before you are admitted, talk to all of the medical people who are involved in your care (surgeon, family doctor, diabetes health providers), so that you can be confident that everyone has accurate and consistent information about you. Before going to the hospital, you should also be clear about and confident in the diabetes care you can expect to receive. Consider asking your healthcare team these questions in advance:

- Who will manage your diabetes when you are in the hospital? Will you be able to do this yourself? Will you have input with the healthcare team?
- What adjustments to your diabetes medications or insulin dose may be necessary before and after the medical procedures or surgery?
- What blood glucose levels are too high or too low?
- If you use an insulin pump, are hospital staff familiar with pump therapy?

Ask a family member or friend to be your advocate while you are in the hospital

Talk to this person about how you manage your diabetes and also about any concerns you may have about going into the hospital. Give your advocate's name and contact numbers to the hospital staff when you are admitted.

Write down important information to take with you

It's easy to forget important information, especially if you are worried or ill. Before entering the hospital, spend time making a list for each of the following:

- Your medical history, including food or drug allergies and previous medical procedures or surgeries.
- All the medication you are currently taking, including:
 - diabetes medications: brand name, strength, dosage, times to be taken
 - if you take insulin(s): dosage (# of units), how often, times to be taken
 - other prescription medications (including creams or lotions)
 - vitamins or herbal remedies.
- The meal plan you follow at home.

Packing

You can make your hospital stay more comfortable by taking the following with you:

- Your lists (medical history, medications, meal plan at home)
- Your diabetes medications because hospitals do not always have all types of insulin or other diabetes medications (such as glucagon) readily available.
- Blood glucose meter strips, lancing device and lancets because there may be times when you want to do your own monitoring.
- Fast-acting glucose such as glucose tablets, juice boxes, lifesavers, candy or whatever you usually take when your blood glucose is too low (hypoglycemia).
- Cream or lotion for elbows, knees and feet (especially heels) to avoid skin irritations from the hospital bedding.
- Sturdy slip-on bedroom slippers or shoes.
- Warm, loose-fitting socks, especially if you have circulatory problems, to keep your feet warm and possibly prevent irritation on heels and ankles.
- Personal hygiene items such as toothbrush, toothpaste, shampoo, tissues. Many hospitals do not provide these.

Don't forget: Mark your name on your belongings and supplies.

Remember: Make copies of your lists and keep them up to date! Provide one set to the hospital staff when you are admitted, and another set to your advocate. Don't give up your original; always photocopy for anyone else who might need them.

When you are admitted

Once you are in your room, a nurse will talk to you about your medical history.

- Give as much detail and be as specific as you can about what has worked for you and what hasn't in the past.
- Give the nurse a copy of your lists (medical history, medication, meal plan at home). Make sure you highlight any food or drug allergies. Remember to also provide the name and contact numbers of your advocate.
- Give the nurse any medication you have brought with you.
- Keep your blood glucose meter, strips, lancing device, lancets, record book and whatever you have brought to treat low blood glucose (hypoglycemia) near your bedside for easy access.
- Explain your meal plan and ask that it be shared with the hospital dietitian, who can use it as a basis for your meals at the hospital. Or if you prefer, you can ask that the dietitian visit you personally to discuss the meal plan.

In an emergency

To prepare yourself for an emergency:

- Always carry your essential diabetes supplies with you.
- Always wear your medical ID bracelet (for example, MedicAlert ®).
- Report to emergency staff that you have diabetes and show your medical ID bracelet.
- Carry an up-to-date list of your medications and drug and food allergies in your wallet.
- Carry your emergency contact number in your wallet so you or someone else can call a family member or friend. You may be in the emergency room for a long time, so it will help to have someone who can bring your diabetes supplies, get you a snack, speak on your behalf if necessary, and provide support while you wait.
- If you require immediate assistance but no one is helping, stay calm and keep asking until you receive the help you need.

Remember:

When your nurse is talking to you, this is your chance to discuss what role you will play in managing your diabetes while in hospital. Not all hospital visits can be planned ahead of time. If you have to go to a hospital emergency room, whether for a diabetes related or other urgent health matter, remember priority is given to the most critically ill. Depending on the urgency of your situation, you may be asked to wait. A long wait may cause you to miss required meals, snacks or even medication.



It's important to know

Blood glucose changes

While in the hospital, your blood glucose levels may be higher than your usual target range. The stress of your illness, being in the hospital, different medical procedures and even infections may cause your blood glucose levels to rise, and your diabetes medications may need to be changed. While this can be frustrating, it is also quite common.

Timing of meals

It is difficult for nurses to know the exact time your meal tray will arrive, so timing your diabetes medications before your meal may be a challenge. If your meal is delayed, try to have a supply of glucose on hand to avoid low blood glucose (hypoglycemia).

Insulin administration

In cases of surgery, severe blood loss, or serious dehydration, insulin taken through an insulin pump or injection is not absorbed well. Intravenous (IV) insulin may be used as it is delivered more effectively. An insulin solution is slowly dripped into a vein throughout the surgery and for several hours after surgery. The rate of the drip can be easily adjusted by your doctor to maintain your blood glucose level within a target range.

Diabetes specialist

If your own doctor doesn't admit you, and you have concerns about your diabetes care while in hospital, you can ask to speak with a diabetes specialist (if available). When you meet with the specialist, be specific about your concerns, and be clear about what has and hasn't worked for you in the past.

When you are discharged

Before you actually leave the hospital, make sure that you:

- Have written instructions about changes in your dosage of medication or insulin injections and any new medications or treatments.
- Have instructions about meal plans and activity levels once you are home.
- Know how often to check your blood glucose level (and, if necessary, ketone levels) and what the expected levels should be.
- Know what symptoms to watch for once you leave the hospital, and know who and when to call for medication adjustments or other medical problems.
- Schedule a follow-up appointment to review your progress and your diabetes management.

Remember:

Tell the nurse if your meal arrives before you have been given your pre-meal insulin or pills – or if your meal is delayed when you have already taken your diabetes medication. Talk to your doctor about making a referral to a diabetes educator or a diabetes education program. If your hospital stay was diabetes related, this can help with your self-care once you are home again.



Patient rights and responsibilities

As a patient, you have the right to:

- Receive quality medical care from competent healthcare providers who know and follow accepted safety standards.
- Obtain easily understood information about your diagnosis, treatment, possible outcomes, and your hospital stay in general. No jargon please!
- Read your medical file. Most institutions have rules to be followed if you would like to see your medical records.
- Request a second medical opinion, if you think one is necessary, or talk to a diabetes specialist about your treatment. Your doctor can make these referrals for you.
- Have the hospital staff respect your knowledge about your condition, and listen and act on your concerns if you think certain medical procedures (for instance, the timing of medications or meals) are putting you at risk.
- Immediate treatment if you are experiencing low blood glucose (hypoglycemia).
- Receive a copy of the hospital's patient bill of rights.
- Ask for a meeting with the hospital's Patient Representative or Patient Advocate if you are concerned about your care or if you think your concerns are not being heard.

You have the responsibility to:

- Be polite and respectful to everyone involved in your care, even if you are tired, frustrated or uncomfortable. They will appreciate the courtesy, and may even be more willing to listen to you.
- Provide accurate information about your medical history, medications you are taking, and your diabetes management plan.
- Work as a partner with your healthcare team and follow hospital standards.
- Report immediately any episodes of low blood glucose (hypoglycemia), sudden weakness, sweating, shaking, or blurred vision.

Remember:

If no one is listening, particularly in emergency situations, keep asking calmly, but forcefully, until you receive the help you need.

Across the country, the Canadian Diabetes Association is leading the fight against diabetes by helping people with diabetes live healthy lives while we work to find a cure. Our community-based network of supporters help us provide education and services to people living with diabetes, advocate for our cause, break ground towards a cure and translate research into practical applications.



 $\hbox{*This document reflects the 2013 Canadian Diabetes } Association Clinical Practice Guidelines. \\ @2013 Copyright$