

# PATIENT / CAREGIVER'S INSULIN PUMP LOG Insulin Pump Self Management in Emergency and Acute Care: Adult and Pediatric

This document is to help the patient/caregiver self-manage as well as to inform medical staff of diabetes management.

	• Minimum of 4 blood glucoses per 24 hrs, all hypoglycemia (blood glucose less than 4 mmol/L), or greater than 15 mmol/L
Required	Changes to pump settings including; basal rates, insulin sensitivity factor (ISF) or carbohydrate ratio
Information:	Notify hospital staff/physician of any high (> 15 mmol/L) or low (< 4 mmol/L) blood glucose readings, infusion set or
	pump setting changes or pump removal/suspensions.

Date:		Make/Model of Insulin Pump:											
	8 am	9 am	10 am	11 am	12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	
Blood Glucose													
Carbohydrates													
Meal Bolus													
Correction Bolus													
Basal Rate													
Infusion Set Change													
Pump suspended / removed													
Pump Reconnected													
Pump Setting Changes													
Comments:													

	8 pm	9 pm	10 pm	11 pm	12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am
Blood Glucose												
Carbohydrates												
Meal Bolus												
Correction Bolus												
Basal Rate												
Infusion Set Change												
Pump suspended / removed												
Pump Reconnected												
Pump Setting Changes												
Comments:	1	1	1	1	1	1	1	1	1	1	1	1

## Nurse Signature (reviewed pump log and verified compliance):

Date:

8:00 am:

12:00 pm: \_\_\_\_\_

4:00 pm: \_\_\_\_\_

\_\_\_\_\_ 10:00 pm: \_\_\_\_\_

#### PATIENT/CAREGIVER TO COMPLETE NURSE TO REVIEW AND FILE IN PATIENT CHART

**NOTE:** For care of women during labour and delivery, the nurse will record the Capillary Blood Glucose and insulin rates on the BC Perinatal Triage & Assessment Record (PSBC 1590) and/or the BC Labour Partogram (PSBC 1583).

Interior Health
PATIENT/CAREGIVER'S
INSULIN PUMP LOG
Insulin Pump Self Management in Emergency
and Acute Care: Adult and Pediatric

This document is to help the patient/caregiver self-manage as well as to inform medical staff of diabetes management.

		• Minimum of 4 blood glucoses per 24 hrs, all hypoglycemia (blood glucose less than 4 mmol/L), or greater than 15 mmol/L
Requi	red	<ul> <li>Changes to pump settings including; basal rates, insulin sensitivity factor (ISF) or carbohydrate ratio</li> </ul>
Inform	nation	Notify hospital staff/physician of any high (> 15 mmol/L) or low (< 4 mmol/L) blood glucose readings, infusion set or
		pump setting changes or pump removal / suspensions.

Date:		Make/Model of Insulin Pump:											
	8 am	9 am	10 am	11 am	12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	
Blood Glucose													
Carbohydrates													
Meal Bolus													
Correction Bolus													
Basal Rate													
Infusion Set Change													
Pump suspended / removed													
Pump Reconnected													
Pump Setting Changes													
Comments:													

	1	1			

Nurse Signature (reviewed pump log and verified compliance):

Date:	8:00 am:	12:00 pm:
	4:00 pm:	10:00 pm:

## PATIENT/CAREGIVER TO COMPLETE

### NURSE TO REVIEW AND FILE IN PATIENT CHART

NOTE: For care of women during labour and delivery, the nurse will record the Capillary Blood Glucose and insulin rates on the BC Perinatal Triage & Assessment Record (PSBC 1590) and / or the BC Labour Partogram (PSBC 1583).