

INSULIN ADJUSTMENT

TIME OF DAY	IF BLOOD SUGAR TOO HIGH	IF BLOOD SUGAR TOO LOW
before breakfast	 if high at 2 AM, ↑ dinner/bedtime N/basal if low at 2 AM, move dinner N to bedtime or switch to basal ↓ bedtime snack and check at 2 AM 	 if low at 2 AM, ↓ dinner/bedtime N/basal if high at 2 AM, may need to reconsider dinner vs bedtime N or to ↓ bedtime snack; speak with MD ↑ bedtime snack and check at 2 AM
before lunch	 ↑ morning R/rapid ↓ breakfast and/or morning snack if only using rapid in morning, add R to cover big morning snack, or combine snack into breakfast 	 ↓ morning R/rapid ↑ breakfast and/or morning snack if not eating a morning snack, consider switching morning R to rapid
before dinner	 ↑ morning N ↓ afternoon snack if having a large afternoon snack, consider adding pre- snack rapid to cover this 	 ↓ morning N ↑ afternoon snack if taking extra rapid for afternoon snack, ↓ dose
before bed	 ↑ dinner R/rapid ↓ dinner 	 ↓ dinner R/rapid ↑ dinner
2-3 AM	 if high before breakfast, ↑ dinner/bedtime N/basal if high before breakfast, ↓ bedtime snack slightly if low before breakfast, may need to reconsider dinner vs bedtime N or to decrease bedtime snack; speak with MD 	 if low before breakfast, ↓ dinner/bedtime N/basal if high before breakfast, move dinner N to bedtime or switch to dinner/bedtime basal ↑ bedtime snack and then check morning sugars consider whether a delayed low from exercise? consider switching dinner R to rapid

Abbreviations: N = N or NPH; R = Regular or Toronto; basal = Lantus or Levemir; rapid = Humalog, NovoRapid or Apidra

REMEMBER:

- always consider immediate and delayed effects of exercise
- always consider possibility of extra or missed meals/snacks
- whenever pre-breakfast blood sugars are out of target, check at 2 AM!

See also our handout *Guidelines for Insulin Adjustment* and our *Online Insulin Dose Adjustment Self-Learning Program for Parents of Children with Diabetes*.