

Diabetes Mellitus Discharge Information

What is diabetes mellitus?

Having diabetes means that there is too much sugar (glucose) in your blood. When you eat food, your body breaks down much of the food into glucose. Your blood carries the glucose to the cells of your body. An organ in your upper belly, called the pancreas, makes and releases a hormone called insulin when it detects glucose. Your body uses insulin to help move the glucose from the bloodstream into the cells for energy. When your body does not make enough insulin or has trouble using insulin, glucose cannot get into your cells. The glucose level in your blood goes up. Too much glucose in your blood (also called hyperglycemia or high blood sugar) can cause many problems.

There are 3 common types of diabetes: type 1, type 2, gestational, and a related condition called prediabetes.

Type 1 diabetes is when you have no insulin. This is because the cells in the pancreas that make insulin are destroyed. The cause is not yet understood. Type 1 diabetes usually starts in childhood or young adulthood and requires that you take insulin the rest of your life.

Type 2 diabetes is when you cannot use your own insulin. People are at higher risk for type 2 diabetes if they are of certain race (it's more common in African Americans, Latinos, Native Americans, and Asian Americans), have a family history, get little physical activity, are overweight, or eat a high-calorie diet.

Gestational diabetes is when a woman has high blood sugar levels during pregnancy. Diagnosis and treatment is very important. The mother can have problems from high blood sugar, such as high blood pressure. The baby can have problems, such as being born too early.

Prediabetes is a term used for people whose blood sugar level is above normal but not yet high enough to be called diabetes. People who have prediabetes are at high risk of getting diabetes. These people need to lower their risk by eating healthy and increasing their activity.

All of these types of diabetes, and prediabetes, have one thing in common, blood sugar levels that are too high if not treated.

How can I take care of myself when I go home?

How long it takes to get better depends on how well you respond to treatment, your overall health, and any complications you may have. Having diabetes can put you at a higher risk for other illnesses, including heart disease, kidney disease, eye and nerve damage, and certain infections. However, these problems can be delayed or even prevented by taking good care of yourself.

Management

- Know when and how to test your blood sugar. Keep a log of your blood sugar measurements.

- Your provider will give you a list of your medicines when you leave the hospital.
 - Know your medicines. Know what they look like, how much you should take each time, how often you should take them, and why you take each one.
 - Take your medicines exactly as your provider tells you to.
 - Carry a list of your medicines in your wallet or purse. Include any nonprescription medicines and supplements on the list.
- Your provider may prescribe medicines to:
 - Keep your blood sugar controlled
 - Treat other medical problems that may have been caused by or made worse because of diabetes
 - Treat pain
 - Treat or prevent an infection
 - Prevent side effects, such as nausea or constipation, from other treatments
- Ask your healthcare provider about the symptoms and causes of low blood sugar and what to do when you have low blood sugar. Carry some form of sugar at all times, so you can treat low blood sugar quickly.

Appointments

- Follow your provider's recommendations for follow-up visits and routine tests.
- Talk to your provider about the following tests:
 - Regular hemoglobin A1c testing to check your average blood sugar control over the past 3 months. This is the best way to see if you are keeping your diabetes under control.
 - Regular blood pressure and yearly cholesterol screenings. Knowing and controlling your blood pressure and cholesterol will help prevent heart attacks and strokes.
 - A yearly dilated eye exam by an eye doctor. Women with diabetes who become pregnant should have their eyes checked each trimester because diabetic eye problems can worsen quickly during pregnancy.
 - A yearly foot exam by a healthcare provider to check for foot problems. You should also be checking your feet at home each day for red skin areas and open sores.
 - Yearly urine and blood tests to check how well your kidneys are working
- Talk with your provider about any questions or fears you have.

Diet, Exercise, and Other Lifestyle Changes

- Follow the treatment plan your healthcare provider prescribes.
- Learn about diabetes and its complications so you can make the correct decisions to control your blood sugar levels. Talk to your healthcare provider about how you can learn all you need to know. You can also check with the local American Diabetes Association chapter, hospital, or health department about classes in your area or diabetes educators who can help you.

- You will probably need to make changes in some of the foods you eat. Ask your provider about the benefits of talking to a dietician to learn what you need in a healthy diet.
- Ask your healthcare provider if there are any foods or medicines you should avoid.
- Drink enough fluids to keep your urine light yellow in color, unless you are told to limit fluids.
- Limit the amount of alcohol you drink. It can cause low blood sugar as well as worsen nervous system problems caused by diabetes.
- Lose weight if you need to and keep a healthy weight.
- Exercise as your provider recommends.
- When you increase your activity, check your blood sugars more often. You may need to eat more or decrease the insulin you are taking. This will help prevent low blood sugar.
- Follow activity restrictions, such as not driving or operating machinery, as recommended by your healthcare provider or pharmacist, especially if you are taking pain medicines.
- Do not smoke.
- Be prepared for illness by knowing what to do when you get sick. Diabetes is harder to control when you are sick. Blood sugar can get very high during an illness and become a medical emergency. Your healthcare provider will work with you to develop a sick-day plan just for you.
- It is important to try to prevent infection. People who have diabetes are at risk for infection. If you are diabetic and have an infection, your blood sugar often rises above your usual levels.
- Learn how to do proper skin and foot care every day.
 - Look for injuries on the skin of your feet and lower legs daily.
 - Wear comfortable, well-fitting shoes to help prevent foot injury.
 - Break in new shoes gradually.
 - Ask your provider about how to trim your toenails properly.
- Carry an ID card or bracelet that says you have diabetes, in case of an emergency.
- It's good for your family to also learn about diabetes. Make sure your family members know what to do if your sugar is too high or too low.
- Find ways to make your life less stressful.
- Having diabetes or complications of diabetes can be scary or depressing. You may wish to talk with a therapist about your feelings.

Call your healthcare provider if you have new or worsening:

- Very low or very high blood sugar that you cannot control with your usual treatments
- Increased urination or trouble emptying the bladder
- Increased thirst and dry mouth
- Increased appetite or loss of appetite

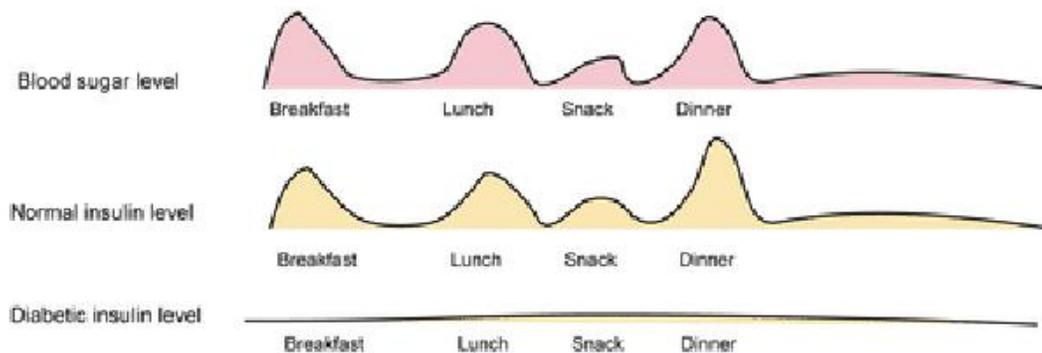
- Weight loss more than your healthcare provider recommends in any month
- Fast or irregular heartbeat
- Tiredness
- Fruity odor to breath
- Change in vision, such as double vision, blurred vision, or trouble seeing out of one or both eyes
- Floaters, which are black spots or cobweb-like shapes in your vision
- Numbness in your feet or hands
- Redness, bumps, blisters, or sores on your skin
- Infection that does not go away or frequent infection

Developed by RelayHealth.

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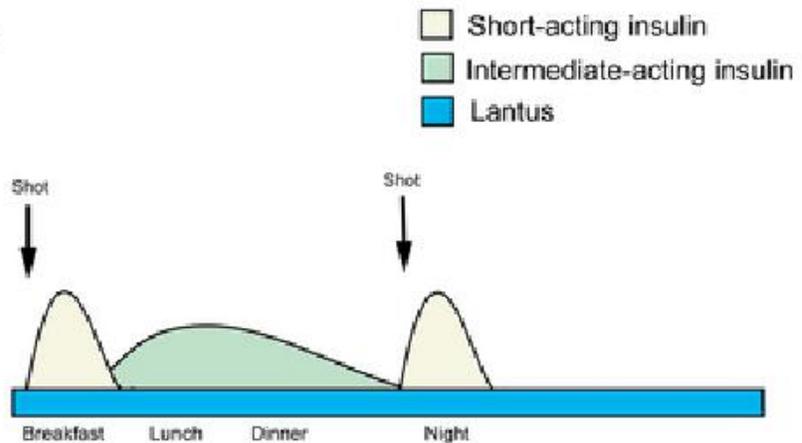
Diabetes and Insulin

Throughout the day your blood sugar level goes up and down like a roller coaster everytime you eat. Your body should make just the right amount of insulin to help turn the food you eat into energy. A person with diabetes does not make insulin and needs to take insulin at the right times to help the body use the sugar for energy.



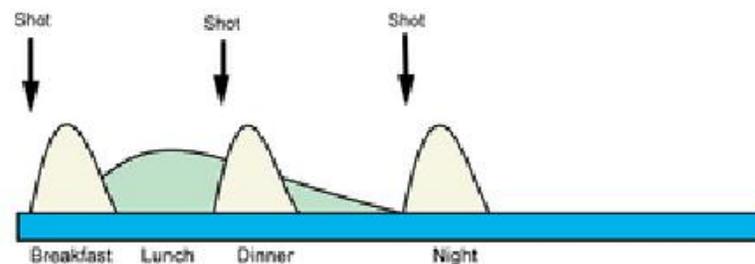
Taking Insulin Twice a Day

You may need to take insulin twice a day. One common way is to take one shot in the morning that contains a mix of a rapid-acting insulin and intermediate-acting insulin. Then, take a rapid-acting insulin shot again at dinner time. Lantus insulin may be taken at any time of day, but it should be taken at the same time each day, such as before dinner.



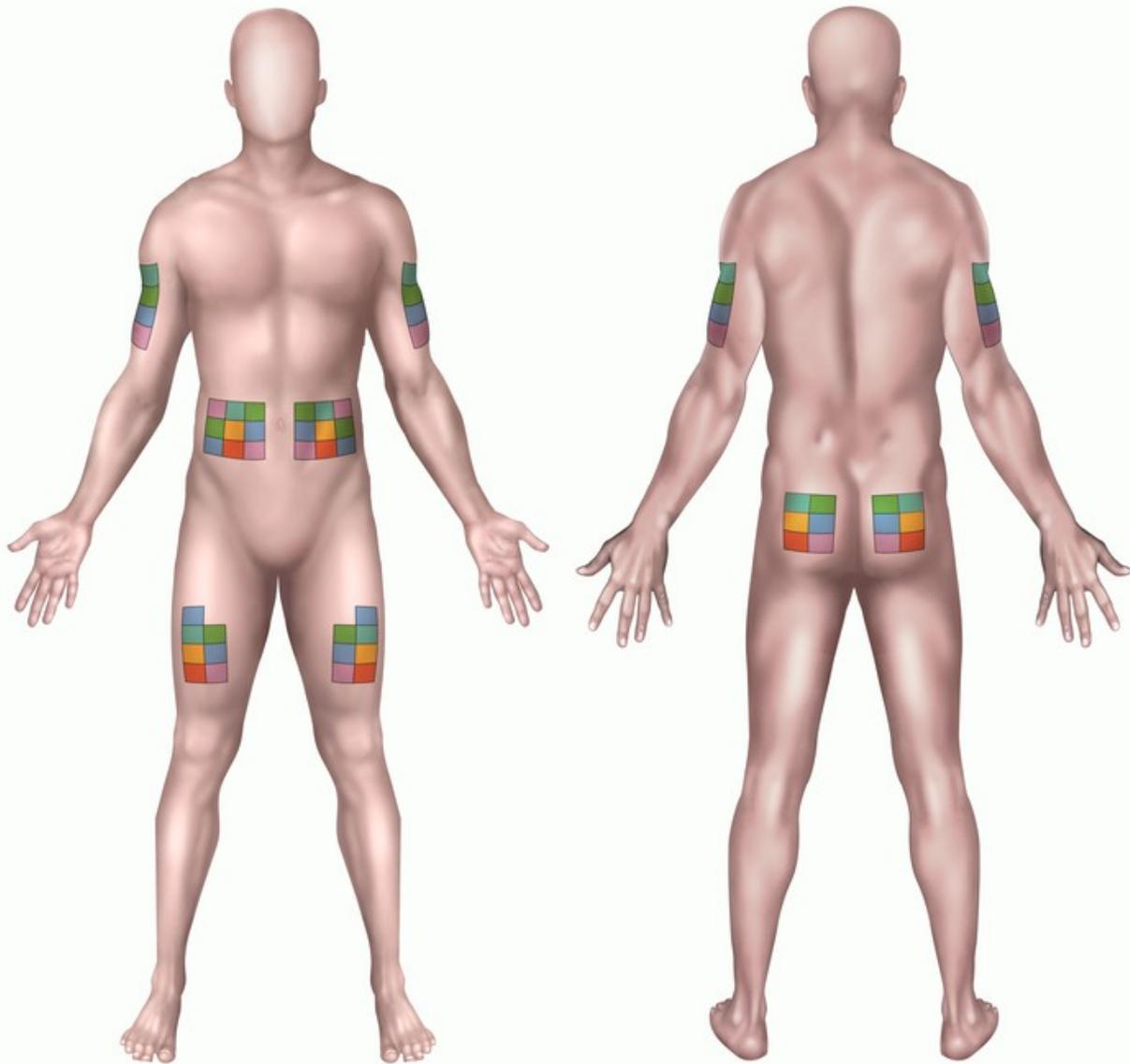
Taking Insulin Three Times a Day

For even better control, some people take three (or more) shots per day. You can adjust the time of your shots to fit your lifestyle and eating patterns.



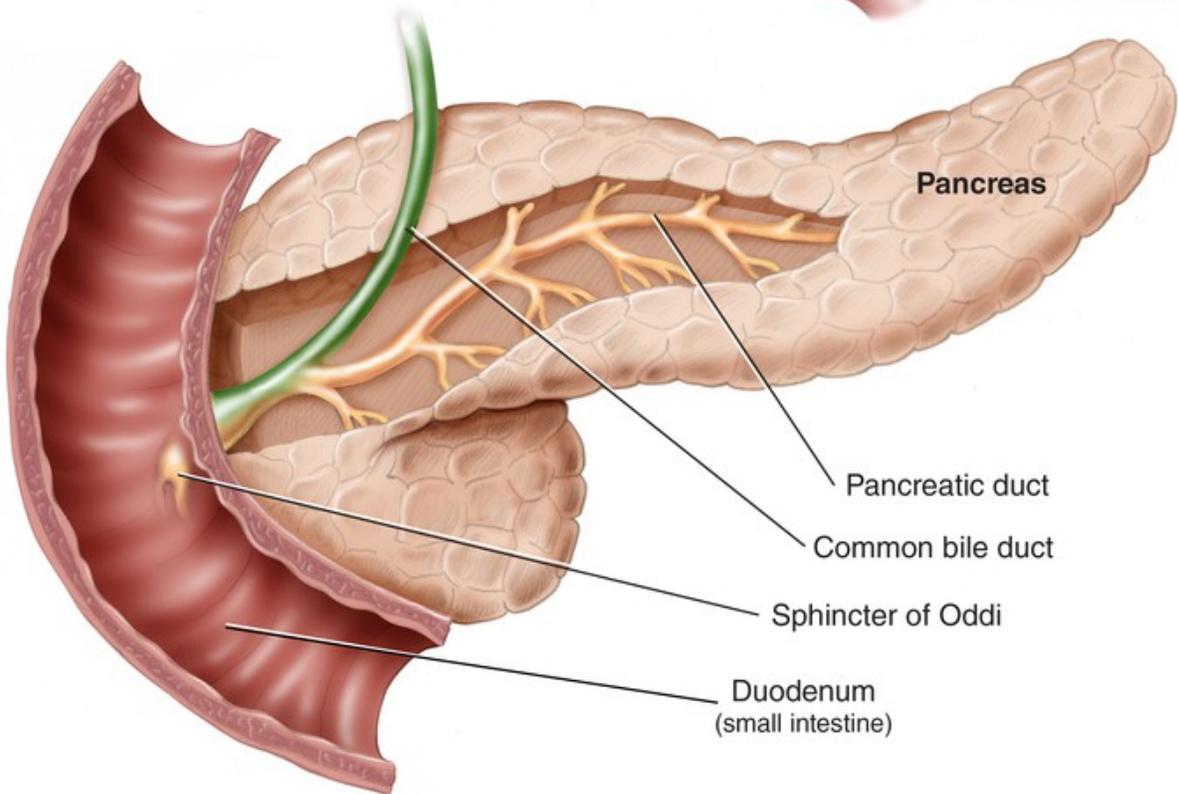
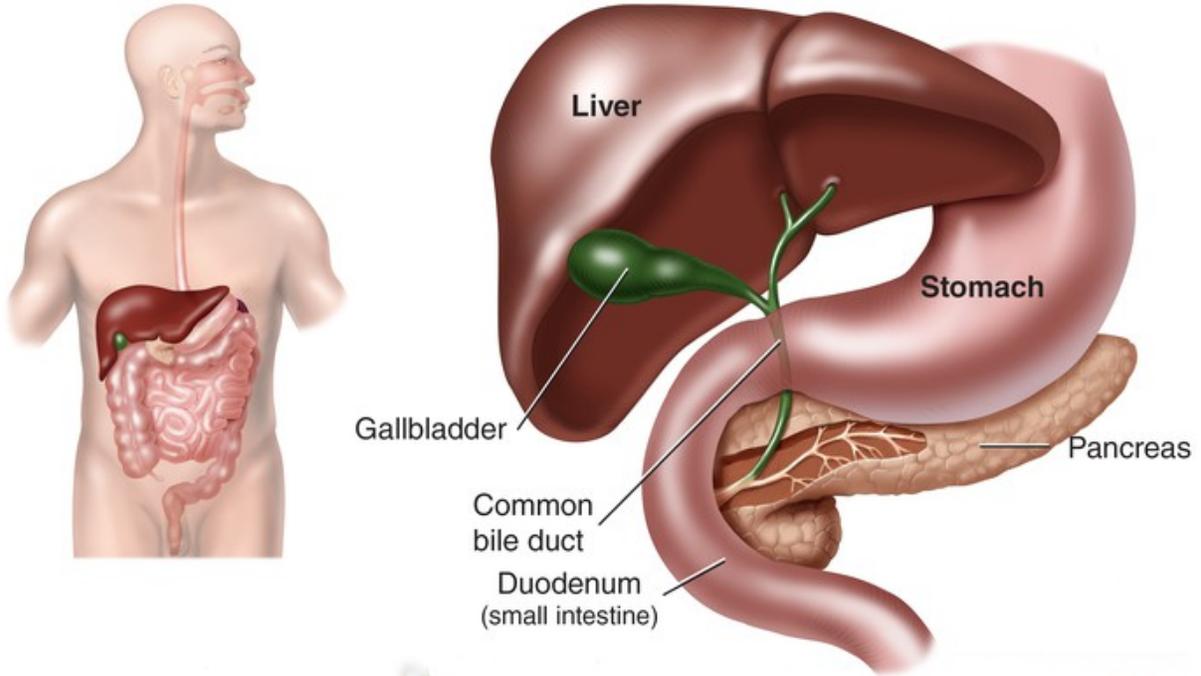
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Diabetes: Injection Rotation Chart



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Pancreas



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How to Give a Subcutaneous Shot with Aspiration



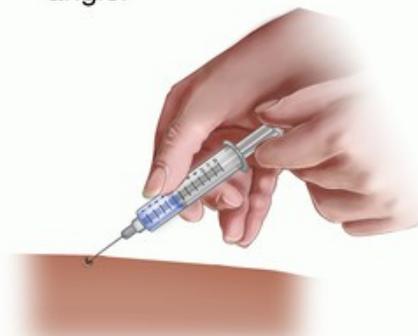
1. Use an alcohol swab to clean the skin where you will give the shot.



2. Gently pinch the skin and insert the needle into the skin at a 45° angle.



3. After you insert the needle completely, release your grasp on the skin.



4. Gently pull back on the plunger of the syringe to check for blood. (If blood appears when you pull back on the plunger, withdraw the needle and syringe and gently press the alcohol swab on the injection site. Start over with a fresh needle.)



5. If no blood appears, inject all of the solution by gently and steadily pushing down the plunger.



6. Withdraw the needle and syringe and press an alcohol swab gently on the spot where the shot was given.

Ask your healthcare provider or pharmacist if you should wear gloves when you give a shot.

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How to Give a Subcutaneous Shot



1. Use an alcohol swab to clean the skin where you will give the shot.



2. Gently pinch the skin and insert the needle into the skin at a 45-degree or 90-degree angle. Follow your provider's instructions.



3. After you insert the needle completely, release your grasp on the skin.



4. Inject all of the solution by gently and steadily pushing down the plunger.



5. Withdraw the needle and syringe and press an alcohol swab gently on the spot where the shot was given.

Ask your healthcare provider or pharmacist if you should wear gloves when you give a shot.

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