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اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید۔

ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ فون ਕਰੋ: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

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यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

Ashford Hospital
London Road
Ashford, Middlesex
TW15 3AA
Tel: **01784 884488**

St. Peter's Hospital
Guildford Road
Chertsey, Surrey
KT16 0PZ.
Tel: **01932 872000**

Website: www.ashfordstpeters.nhs.uk

Sick Day Rules: Information for Parents and Carers

Paediatric Diabetes



Sick Days

If you suspect your child may be unwell make sure you have a good supply of the following:

1. Blood ketone strips (ensure they are in date)
2. Sweet food and drinks
3. Rapid-acting insulin
4. Blood glucose strips

NEVER STOP OR REDUCE YOUR CHILD'S LONG ACTING INSULIN I.E. LANTUS OR LEVEMIR, EVEN WHEN UNWELL AND EATING LESS THAN USUAL

What is happening inside your child's body?

One of the body's responses to stress and illness is to produce more glucagon (blood glucose raising hormone). This will most likely increase their insulin requirements. However, it is also usual to eat less when feeling unwell; therefore, these two factors must be considered and managed throughout the days your child is unwell.

Important tips

- Test your child's blood glucose levels **2-4 hourly** depending on severity of illness.

References

British Society for Paediatric Endocrinology and Diabetes (BSPED) (2015) *Patient Advice for Management of Type 1 Diabetes Mellitus during illness in children and young people under 18 years (Sick Day Rules)*. Available at: https://www.bsped.org.uk/clinical/docs/Sick_day_guideline_patient.pdf

Hanas, Ragnar (2015) *Type 1 Diabetes in children, adolescents and young adults: How to become an expert on your own diabetes*. 6th edn. London : Class Health Publishing.

National Institute for Health and Care Excellence (NICE) (2015) *Diabetes (type 1 and type 2) in children and young people: diagnosis and management*. Available at: <https://www.nice.org.uk/guidance/ng18>

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Advice and Liaison Service (PALS) on 01932 723553 or email pals@asph.nhs.uk. If you remain concerned, PALS can also advise upon how to make a formal complaint.

Author: Jocelyn Hall

Department: Paediatric Diabetes

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Who to contact for advice

Paediatric Diabetes Nurse Specialists during office hours, 09:00-17:00: **01932 723314**

Transition Diabetes Nurse Specialist during office hours, 09:00-17:00: **01932 723633**

If you cannot get through to the diabetes nurses please contact the main switchboard, telephone **01932 872000** and ask the operator to bleep the on-call paediatric registrar.

- Check your child's blood regularly for **ketones**. If levels are above 0.6mmol/mol, see advice under What are ketones?
- Encourage your child to **drink plenty** of water or unsweetened fluids. When the blood glucose levels are high your child is likely to be passing more urine and, therefore, more likely to become dehydrated.
- If your child is **unable to eat normally** replace their meals/snacks with something sweet e.g. biscuits, ice-cream, fruit juice, milkshakes etc to give their body nourishment and to prevent hypoglycaemia.

Do I need to adjust my child's insulin dose?

Depending on the illness the blood glucose levels may increase and you will need to give more rapid-acting insulin i.e. NovoRapid or Humalog. As a general rule, you will need to give your child an extra bolus of fast acting insulin as a correction dose, if their blood glucose levels are above 10mmol. Or, follow the advice on their 'dose advisor' meter or insulin pump.

If the blood glucose levels are constantly low your child will need *less* fast-acting insulin i.e. NovoRapid or Humalog. (This only tends to occur with younger children or with vomiting and diarrhoea). Remember the only way to find out what your child's requirements are, is to test your child's blood glucose levels regularly.

What are Ketones?

Ketones are made when the body breaks down fat to use as energy when it cannot use carbohydrates. You can check if your child has ketones by testing a drop of their blood with a blood ketone meter. All families should have one of these at home and one at school. Ask your diabetes nurse, if you have not been given one.

Ketones and low blood glucose: These ketones have been produced because the body is hungry. If your child's blood glucose levels are very low and ketones are positive then your child's body is hungry for food. Respond by offering sweet drinks/food or whatever can be tolerated.

Ketones and high blood glucose: These ketones have been produced because the body does not have enough insulin. If your child's blood glucose levels are high, encourage your child to drink plenty of unsweetened fluids. Depending on the amount of ketones, your child may require extra rapid acting insulin. Please call the diabetes team for help and advice.

What if the ketones don't go away and my child isn't getting better?

Ketones are an acid and can make your child very sick because too many can alter the acidity of the blood and may cause diabetic ketoacidosis (DKA). This is life threatening and requires urgent medical attention. If ketones are above 0.6mmol/mol, watch out for the following signs and symptoms of DKA:

- Nausea and vomiting
- Abdominal pain
- Deep rapid breathing
- Breath smelling like pear drops or nail varnish
- Drowsiness
- Eventual unconsciousness

It is essential you ring the diabetes team for advice. It may mean your child needs to come into hospital for extra fluids via a drip or extra insulin.

Remember:

- To treat the symptoms of the illness as well e.g. paracetamol (calpol) for a temperature. Ask your pharmacist for sugar free alternatives
- To visit your GP if the illness needs treatment e.g. antibiotics for chest infection.
- To check blood glucose levels and ketones regularly and act upon them if abnormal.
- To call the diabetes team if you have any questions or concerns.