

# YOUR SAFE DISCHARGE FROM HOSPITAL

AN INFORMATION LEAFLET FOR PEOPLE WITH DIABETES

**DiABETES UK**  
KNOW DIABETES. FIGHT DIABETES.



## YOU'RE LEAVING HOSPITAL

Sometimes being discharged from hospital can feel confusing. This leaflet lets you know what to expect when you are discharged. There are also handy tips on things to think about after leaving hospital

If you're not sure about any aspects of your care, **PLEASE** ask before you leave hospital

## WHAT YOU SHOULD EXPECT ON DISCHARGE

The hospital should supply you with:

- ✔ Information on who to contact for advice about your diabetes (see the 'Getting follow-up support' section on the last page)
- ✔ A follow-up plan for your diabetes care (if needed)
- ✔ A discharge letter for you to take home explaining the care you received whilst in hospital, and advising on any changes to your medication, or follow-up advice. This letter will also be sent to your GP
- ✔ Any extra information you might need, such as leaflets on hypoglycaemia, driving or 'sick day rules'
- ✔ Any equipment you might need
- ✔ If needed, you may be referred to the community team, e.g. the district nurses or community diabetes nurses



## THINGS YOU'LL NEED TO THINK ABOUT AFTER LEAVING HOSPITAL

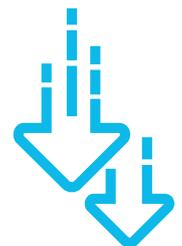
### Medication

- › Some of your diabetes treatments may have been changed or stopped while you were in hospital; this should be reviewed by your usual diabetes care provider after your discharge
- › If you are treated with steroids (e.g. prednisolone, dexamethasone) your diabetes medication may require adjustment because when steroid doses are reduced or stopped your blood glucose levels may fall. You may have been given advice on monitoring your blood glucose (or urine glucose) and how to adjust your treatment in response to the change in glucose levels
- › It is important to request a prescription for on-going medications and testing supplies from your GP before your hospital supplies run out



### Hypoglycaemia – 'Hypos'

- › You may be at risk of 'hypos' (blood glucose lower than 4 mmol/L) if you are treated with insulin or medication called 'sulphonylureas' (e.g. Gliclazide)
- › Treat any hypos immediately. You can do this by eating or drinking 15 to 20g of a fast-acting carbohydrate. This could be 5 - 6 glucose or dextrose tablets; five jelly babies; a small glass (200ml) of a sugary (non-diet) drink; or a small carton of pure fruit juice
- › Follow this with 15 to 20g of a slower-acting carbohydrate. This could be: half a sandwich; a piece of fruit; a cereal bar; a glass of milk; or your next meal - if it's due
- › Contact your usual diabetes care provider if you need advice to prevent further hypos



### Blood glucose

- › If you've been advised to monitor your blood glucose it's recommended aiming for levels between 6 - 10 mmol/L, during recovery from illness. Your team may suggest targets specifically for you - for example, higher glucose levels may be advised if you are at increased risk of hypoglycaemia
- › When you leave hospital you may need to initially test your blood glucose more often. It is not uncommon for your blood glucose levels to be quite variable in the days after discharge, before settling down
- › Contact your diabetes care provider if you need advice



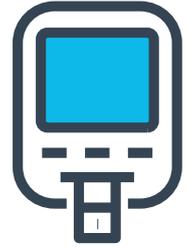
## Illness

- › It's important to keep hydrated by drinking water or unsweetened drinks regularly
- › If you've been advised to monitor your blood glucose it's important to check it more frequently when you are unwell
- › Your diabetes care provider can give you advice ('sick day rules') to manage your diabetes during illness



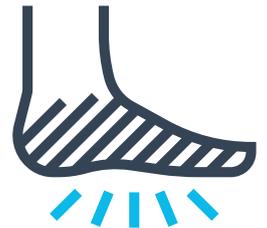
## Ketone testing

- › If you have type 1 diabetes you should be supplied with a ketone meter and strips or urine ketone test strips. There may also be a few people with type 2 diabetes who are given advice to check ketones during illness
- › If you are unwell, particularly if your blood glucose is elevated, you should check for ketones and follow the 'sick day rules'
- › For advice on 'sick day rules' and checking ketones contact your usual care provider or look at the websites in the 'Further sources of on-line information' section of this leaflet
- › Seek urgent medical help if you are vomiting; are unable to keep fluids down; have abdominal pain; feel breathless; or you feel very unwell and you are not sure what to do



## Feet

- › Check your feet daily - look for breaks in the skin, changes in colour or injuries
- › If you currently have an active foot problem, you should wear your protective footwear, follow advice on dressing changes if necessary and check daily for any signs that things are getting worse (e.g. pain; increase in wound discharge; smell; heat; changes in colour; swelling or fever)
- › If you have concerns about your feet, contact your usual foot care provider or your GP urgently. There are contact details for your local foot clinic below in the 'Getting follow-up support' section



## THINGS TO THINK ABOUT IF YOU ARE NEW TO INSULIN

The hospital should provide you with an information starter pack along with everything you need to safely manage your insulin:



**Insulin, needles and pen device**



**Blood glucose meter with strips & lancets**



**Resources to record your blood glucose and insulin**



**Sharps box**

You should be told your insulin dose(s) before you leave hospital, which may need to be adjusted following discharge. This is particularly important if you are new to insulin or if your insulin dose(s) were changed in hospital

## GETTING FOLLOW-UP SUPPORT

There are lots of ways that you can access support and guidance after you leave hospital. You can contact:

### Your diabetes care provider

- › If your diabetes care is usually provided by your GP practice, and you need support, advice on your medications, or follow up in the community you should contact your practice.
- › If your care is usually provided by a specialist diabetes team, or specialist follow up has been arranged, they can be contacted at:



### Diabetes foot care team (for those with diabetes foot problems)

- › If you need a follow up appointment with the diabetes foot team, or the community podiatry team, this should be made for you.
- › If you have urgent concerns about your feet, contact your GP, local podiatry service or seek emergency medical advice.
- › If you have questions about your foot problem, your usual foot care provider can be contacted at:



### Local diabetes support groups

- › Your local diabetes support group is a great way to get support from people who also live with diabetes
- › Further information can be found at:



### Diabetes UK Helpline

For further information and support you can contact the Diabetes UK helpline at:

0345 123 2399

helpline@diabetes.org.uk

OR

0141 212 8710 (Scotland)

helpline.scotland@diabetes.org.uk

### Further sources of online information

- › [www.diabetes.org.uk/learning-zone](http://www.diabetes.org.uk/learning-zone)
- › [www.diabetes.org.uk/diabetes-guide](http://www.diabetes.org.uk/diabetes-guide)
- › [www.trend-uk.org/trend-uk-releases-updated-sick-day-rules-leaflets/](http://www.trend-uk.org/trend-uk-releases-updated-sick-day-rules-leaflets/)
- › [www.leicesterdiabetescentre.org.uk/mydiabetes](http://www.leicesterdiabetescentre.org.uk/mydiabetes)
- › [www.mydiabetesmyway.scot.nhs.uk/](http://www.mydiabetesmyway.scot.nhs.uk/)
- › [www.pocketmedic.org/links](http://www.pocketmedic.org/links)



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