

## Peri-operative VRIII – Prescribing Checklist

### Indications:

If one of the following conditions is met, commence VRIII:

- Type 1 diabetes + more than 1 missed meal\*
- Type 1 diabetes + has not received background insulin
- Type 2 diabetes + more than 1 missed meal + CBG > 12mmol/mol\*\*
- Diabetes + HbA1c > 69mmol/mol
- Diabetes + emergency surgery

### Practical Tips:

\*It is reasonable to start all T1DM patients on VRIII peri-operatively as starvation periods are unpredictable.

\*\*VRIII is not necessarily required for all regular T2DM insulin users. E.g. a T2DM patient with an HbA1c < 69 and CBG < 12 may not need VRIII. Monitor CBG hourly during the starvation period; if CBG rises above 12mmol/mol, VRIII can be started.

### On eMeds:

#### Prescribe 'refer to paper chart'.

Protocol → Adults – Insulin → 1. Insulin – Refer to paper options → 4. Adults – Variable rate insulin infusion (surgery) chart

#### Prescribe IV glucose (rescue medication).

Listed automatically as an add-on when prescribing the 'refer to paper chart'.

#### Does the patient take oral anti-diabetes medications?

If so, withhold doses while the patient is on VRIII (usually not more than 1-2 doses).

*Exception: GLP-1 analogues (Dulaglutide, Exenatide, Liraglutide, Lixisenatide) can be administered as normal while on VRIII*

#### Does the patient use rapid/short-acting insulin?

If so, withhold doses while the patient is on VRIII (usually not more than 1-2 doses).

Rapid/short-acting insulin – e.g. Novorapid, Humalog, Actrapid, Humulin S, Insuman Rapid

#### Does the patient use biphasic insulin?

If so, withhold doses while the patient is on VRIII (usually not more than 1-2 doses).

Biphasic insulin – e.g. Novomix 30, Humulin M3, Humalog Mix 25, Humalog Mix 50, Insuman Comb 25, Insuman Comb 50

#### Does the patient use intermediate/long-acting insulin?

If so, prescribe a reduced dose (80% of usual dose).

Intermediate-acting insulin – e.g. Isophane insulin, Humulin I, Insulatard, Insuman basal

Long-acting insulin – e.g. insulin glargine (Lantus), Levemir, Toujeo, Tresiba

*Withhold the full dose when the patient is due to be on VRIII and prescribe a STAT at 80% of the usual dose to replace this. (e.g. 30 units of Lantus normally taken at 08:00. Withhold this dose. Prescribe 24 units of Lantus stat for 08:00.)*

#### Is the patient on a continuous subcutaneous insulin infusion (CSII), pregnant, or on parenteral or enteral feeding?

If so, contact the diabetes team for advice on how to commence VRIII.

#### Prescribe fluid.

First choice: Sodium chloride 0.18%/glucose 4% with potassium chloride as needed (20-40mmol/L) – 1 litre over 12 hours