As a patient with diabetes you have an increased risk of complications when you have surgery. These risks are increased if you:

- have had diabetes for an extended period of time
- frequently have high blood sugars
- have difficulty controlling your glucose level
- have major diabetic complications.

Complications include:

- high blood sugar
- low blood sugar
- poor wound healing
- infection
- electrolyte imbalance
- diabetic ketoacidosis.

However, with careful planning, your operation will be made as safe as possible and your recovery period less stressful. In this fact sheet, we hope to answer some of your questions about diabetes and your surgery.

**Preadmission Clinic**

Several weeks before your surgery, you will be asked to attend the preadmission clinic. At this appointment you will see a doctor, who will develop a plan to control your blood glucose ready for the surgery. Having good control of your blood glucose will lessen the chance of reactions high blood glucose (hyperglycemia) or low blood glucose (hypoglycemia) during and after the operation or procedure. Good blood glucose control also reduces the risk of infections and promotes healing.

The doctor will also do a complete medical history, a physical examination and other tests before your surgery. It is important that the doctor knows your medical history, including details about your diabetes. Be sure to include your current medication regimen and any diabetes-related complications you have.

Your surgical team will discuss your diabetes management plan with you, along with any concerns that you may have. During your preadmission consultation, you will also be given an instruction form called *Management of your Diabetes before your Operation.*

**The day before and the day of your surgery**

Before surgery, you must not eat or drink anything. Your doctor will let you know the date and the time that you will need to start your fast. Because you are fasting, you may need to change your dose of insulin or oral diabetes tablets – this will be different for different people. Your doctor will specify what you are required to do and it will be recorded on your instruction form.

- If you use insulin, the directions for your insulin doses are recorded in Section C of the form *Management of your Diabetes before your Operation.*
- If you use oral tablets, the directions for your oral tablets doses are recorded in Section D of the form *Management of your Diabetes before your Operation.*

**Record your blood glucose level**

You will be asked to test your blood glucose levels on the day before surgery and/or on the day of surgery.

- Record all your blood glucose levels in Section E of the form *Management of your Diabetes before your Operation.*
- bring the form to hospital on the day of your procedure.

**Going to hospital**

When you go to hospital, bring all your current medicines with you. Also, have a list of all of your medicines, including how much and how often you take them.
Remember to bring the *Management of your Diabetes before your Operation* form on the day of your surgery.

The length of hospital stay varies from person to person, once you are well enough to leave, you will be discharged.

When you are discharged, make sure you know what changes have been made to your diabetes management and whether you need to continue with these changes or to revert to your original treatment plan. If you have any concerns about your diabetes or your management plan, please speak to a member of the medical staff.

**References**


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*The Women’s is a smoke free hospital. For more information and support visit www.quit.org.au*

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