



For those who do not have diabetes and are taking GLP-1 medicines for weight loss:

Please follow the instructions for the following medicine you are taking:

- Diabetes medicine taken by mouth Semaglutide (Rybelsus®)
- Non-insulin injections (shots) taken every day
- Non-insulin injections (shots) taken weekly

For those who have diabetes, the day of surgery:

- If you use a blood glucose monitor (fingerstick) or a CGM (continuous glucose monitor), check your blood sugar when you wake up and every 4 hours, until you arrive at the hospital.
- If you have low blood glucose (less than 70), you should drink a **clear sugar-containing** beverage that has 15 grams of carbohydrates, such as 4 oz. of apple juice or 8 oz. of Gatorade[®]. Please continue to monitor blood glucose levels and do **not** drink orange juice.
- If you do not have a blood glucose monitor at home, but have signs and symptoms of low blood sugar, you should drink a clear sugar-containing beverage that has 15 grams of carbohydrates, such as 4 oz. of apple juice or 8 oz. of Gatorade[®]. Please continue to monitor for signs and symptoms of low blood sugar and **do not** drink orange juice.

- Please do not have more than 28 oz. of a clear **liquid** within the last hour before you are asked to stop drinking, which is 3 hours before your scheduled surgery time.
 - People with type 2 diabetes You may drink a clear liquid electrolyte beverage containing 50 grams of carbohydrates (such as 28 oz. Gatorade®) in the last hour before you are told to stop drinking. **Do not** eat or drink anything within 3 hours of your scheduled surgery time.
 - People with type 1 diabetes or known uncontrolled type 2 diabetes - You may drink a non-low-sugar clear electrolyte drink (such as 28 oz. Gatorade G2® or Gatorade Zero® if G2 is unavailable). **Do not** eat or drink anything within 3 hours of your scheduled surgery time.
- The preadmission testing staff will also remind you of these guidelines when they call the day before surgery with your pre-surgery instruction.
- If you take insulin, please see the table below.
- If you take any other insulin or injectable that does not appear in the table below, you should contact the care provider who prescribed it at least **1 week before surgery** to get instructions.
- Contact your diabetes care provider for more instructions on how to manage your diabetes before surgery.



Medicine	Instructions	
Diabetes medicines taken by mouth		
 Most tablets and capsules not listed below. Examples: Metformin, Micronase®, Glucotrol®, etc. 	 Do not take the morning of surgery. Follow your usual diet through the day before surgery. 	
Diabetes medicine taken by mouth	Stop taking 7 days before surgery.	
 Semaglutide (Rybelsus®) is a GLP-1 agonist taken daily but may remain in your body for 7 days. 	You must contact your diabetes care provider at least 2	
Diabetes medicines taken by mouth (SGLT-2 inhibitors)	Stop taking SGLT-2 inhibitor medicines 3 days before	
 Canagliflozin (Invokana®) Dapagliflozin (Farxiga®) Empagliflozin (Jardiance®) Ertugliflozin (Steglatro®) Dapagliflozin/metformin (Glyxambi®) Empagliflozin/metformin (Synjardy®) Dapagliflozin/metformin (Xigduo®) Canagliflozin/metformin (Invokamet®) 	 Ask your diabetes care provider at least 2 weeks before surgery how to manage your blood sugar during these 3 days before surgery. If you are taking an SGLT-2 inhibitor medicine for heart failure, check with your cardiologist (heart doctor) about how to manage this medicine. 	
Non-insulin medicines taken by injection (shot) – Taken every day (GLP-1 inhibitors)	Cton tolving 24 house before view askedulad surren	
 Exenatide (Byetta™) Liraglutide (Victoza®; Saxenda®) Lixisenatide (Adlyxin®) Pramlintide (Symlin®) 	 Stop taking 24 hours before your scheduled surgery. Follow your usual diet through the day before surgery. 	
Combination GLP-1 and insulin medicines taken by injections (shots) - Taken every day Insulin glargine/Lixisenatide (Soliqua®) Insulin degludec/Liraglutide (Xultrophy®)	 Soliqua® and Xultrophy® are injectable products that contain both long-acting insulin and GLP-1. Stop taking these medicines 24 hours before surgery. You still need to take insulin. You must contact your diabetes care provider at least 2 weeks before surgery for instructions to manage your insulin/blood sugars during the 3 days before surgery. 	
Non-insulin medicines taken by injection	madini blood sugars during the 3 days before surgery.	
 (shot) - Taken weekly (GLP-1 inhibitors) Dulaglutide (Trulicity™) Exenatide (Bydureon®) Semaglutide (Ozempic®, Wegovy®) Tirzepatitide (Mounjaro®, Zepbound™) 	 Stop taking 7 days before surgery. You must contact your diabetes care provider at least 2 weeks before surgery for instructions on how to manage your blood sugar during the 7 days before surgery. 	
inzepatitide (modificio, zepodulid)		



Medicine	Instructions
 Rapid-acting insulin injection (shot) Insulin lispro (Humalog®, Admelog®, Lyumjev™) Insulin aspart (NovoLog®, Fiasp®) Insulin glulisine (Apidra®) 	 Do not take the morning of surgery. Follow your usual diet and blood sugar management plan through the day before surgery.
Short-acting insulin injection (shot) • Regular insulin (Humulin® R or Novolin® R)	 Do not take the morning of surgery. Follow your usual diet and blood sugar management plan through the day before surgery.
 Premixed insulin injection (shot) Humulin® 70/30 Humalog® 75/25, Humalog® 50/50 NovoLog® 70/30 Ryzodeg™ 70/30 	 Do not take the morning of surgery. Follow your usual diet and blood sugar management plan through the day before surgery.
Long-acting insulin injection (shot) – Taken every day • Insulin glargine (Lantus®, Toujeo®, Basaglar®, Semglee®) • Insulin detemir (Levemir®)	 Follow your usual diet and blood sugar management plan through the day before surgery. If you normally take your dose in the evening or at bedtime, then the evening before surgery you should take ½ the usual dose. If you normally take your dose in the morning at a time that is before your scheduled hospital arrival time, take ½ the usual dose on the day of surgery and let the surgical staff know when you arrive. If you normally take a dose in the morning at a time that is after your scheduled hospital arrival time, do not take this dose and let the surgical staff know when you arrive.
Long-acting insulin injection (shot) • Insulin degludec (Tresiba®)	 Tresiba lasts longer than 24 hours. You must contact your diabetes care provider at least 1 week before surgery for instructions on how to manage your insulin the evening before and the morning of surgery. Some diabetes providers may recommend a reduced dose during the days leading up to surgery.
Intermediate-acting insulin injection (shot) • NPH (Humulin® N, Novolin® N)	 Follow your usual diet and blood sugar management plan through the day before surgery. If you normally take your dose in the evening or at bedtime, then the evening before surgery you should take ½ the usual dose. If you normally take your dose in the morning at a time that is before your scheduled hospital arrival time, take ½ the usual dose on the day of surgery and let the surgical staff know when you arrive. If you normally take a dose in the morning at a time that is after your scheduled hospital arrival time, do not take this dose and let the surgical staff know when you arrive.



Medicine	Instructions
Humulin® R U-500 (concentrated insulin) injection (shot)	 Do not take the morning of surgery unless you are instructed to by your diabetes care provider. You must contact your diabetes care provider at least 1 week before surgery for instructions on how to manage your insulin/blood sugar the evening before and the morning of surgery.
Insulin Pump	 You must contact your diabetes care provider for instructions on how to adjust basal rates and correction doses during the evening before and the morning of surgery. If the pump will be worn during the surgery, you should change the insertion site, tubing, and reservoir the day before surgery. For surgery involving the abdomen (belly), place your pump in an area other than the abdomen, such as the outer arm, upper thigh, or outer thigh. Bring extra supplies to the hospital (insertion set, tubing, reservoir, batteries, chargers, insulin, pods, etc.). Please remind the surgical staff that you use an insulin pump, especially if you are wearing it into surgery.
V-Go® Pump	 Contact your diabetes care provider for more instructions on managing diabetes the evening before and the morning of surgery.