



REASSESSING YOUR PUMP SETTINGS

It is recommended you reassess your pump settings two times a year or more frequently if:

- your A1c is elevated with no consistent pattern.
- your pump settings have been significantly changed by your diabetes care provider.
- you wish to lower your A1c.
- you are having frequent low blood sugar.

INSTRUCTIONS:

1. Before beginning your pump reassessment, insert a new infusion set. It is recommended that you use a steel needle set (Contact Detach™ or Sure-T™) so that there are no infusion set problems. Be sure to change the set after 48 hours.
 2. Eat 3 meals at regular times. **Bolus 10 to 15 minutes before the meal.** You may snack on carb free food between meals, avoiding big servings of protein.
 3. Check blood glucose:
 - before each meal.
 - 2 hours after each meal.
 - at midnight and 3 a.m.
- Note:** If you use a continuous glucose monitoring system you only need to check before meals.
4. **Record** time, blood glucose, carbohydrate, and bolus dose on the pump glucose log.
 - To obtain a log, see page 2 of this document or click [here](#).)
 - Also record exercise (type and amount) or infusion set issues or changes in the comments column.
 5. Only correct high blood glucose at meal time. **Do not correct** after meals. Only correct a blood glucose that is ≥ 15 mmol/L at midnight or 3 a.m.
 6. Follow the above routine for 3 days.
 7. Download to Care Link™ or Diasend™. Use both your written records and downloaded data in your analysis.



Blood Glucose Log for _____ **Insulin Carb Ratio: Breakfast _____ Lunch _____ Dinner _____ Bedtime _____**

| Date | | Night | Breakfast | Lunch | Supper | Bed | Basal Insulin | Comments: |
|------|---------|-------|-----------|-------|--------|-----|---------------|-----------|
| Mon | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Tue | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Wed | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Thu | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Fri | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Sat | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |
| Sun | Time | | | | | | | |
| | B/G | | | | | | | |
| | CHO | | | | | | | |
| | Bolus + | | | | | | | |