

## Introduction to Insulin Pump Therapy Questionnaire

Please fill out this questionnaire and review it with your diabetes educator from an approved diabetes centre. This is needed if you are applying for funding through the Alberta Insulin Pump Therapy Program.

Name of patient: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Name of guardian if patient less than 18 yrs \_\_\_\_\_

Alberta Health Care Number: \_\_\_\_\_

Date: \_\_\_\_\_

1. The insulin pump will deliver meal insulin without the user knowing or doing any work.

- True
- False

2. Choose all the correct answers. Basal insulin delivered from the pump:

- is delivered with meals
- is background insulin
- is delivered 24 hours a day
- if stopped and not replaced, can result in diabetic ketoacidosis (DKA) in as few as 2 hours

3. Choose all the correct answers. Bolus insulin is:

- given with meals
- given for high blood sugar readings
- delivered 24 hours a day

4. People on insulin pumps who use a continuous blood glucose monitor don't have to take finger blood glucose readings.

- True
- False

5. Explain why the risk of DKA is high when using an insulin pump.

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6. Explain what someone using an insulin pump must do to prevent DKA:

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7. A lot of problem solving is needed when on an insulin pump. Suppose the infusion set comes out when you arrive for supper at a friend's house. Suppose you don't have your (or your child's) safety kit with you. This means there would be no way to deliver insulin.

Would it be fairly safe to eat a meal with no carbohydrates and put a new infusion set in when you get home in 3 hours?

Yes

No

Please explain your answer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. How committed are you to carrying a safety kit at all times? This kit must have insulin, syringe or insulin pen, infusion set, glucose and ketone testing supplies, extra batteries and a source of glucose.

I'm confident I will

I need more information before I can commit to doing this all the time

I can't see myself doing this most of the time

I'm not sure

9. We want to learn why you want pump therapy. Please finish this sentence below. Please speak with your diabetes educator if you have trouble finishing this sentence.

Insulin pump therapy will be a success for me or my child if . . .

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10.** Blood sugar levels may rise quickly when using an insulin pump. Many people say it is like nothing they've experienced before. How important to you is testing ketones if blood sugars are over 14 mmol/L? Choose the answer that is closest to your thoughts.

- Very important—I know I will do this if blood sugars are over 14 mmol/L.
- Very important—a few things may get in the way of me doing this.
- Important — but if I test my blood sugar often, I don't think I'll need to test for ketones.
- I'm not sure why I'd need to do this. I have never, or rarely, had a problem with ketones.
- I need more information before I can answer this question.

**11.** Starting insulin pump therapy can be frustrating. Some reasons for this are below. Check off the ones that you and your family are prepared to accept and manage.

- Blood sugars may be high or unstable until basal and bolus settings are figured out. This can take up to 3 to 6 months.
- Sleep is interrupted many nights to test blood sugars.
- High and low blood sugars still happen even after basal and bolus settings are figured out.
- Unexpected infusion set changes and ketone testing is needed at the most inconvenient times (for example: during a meal out at a restaurant or at 1 a.m. with an occlusion alarm). In these cases, timers may have to be set often to retest ketones and blood sugars.

**12.** Starting insulin pump therapy takes a lot of time and effort. Some reasons for this are below. Check off the ones that you and your family are prepared to accept and manage.

- A lot of contact with the diabetes centre:** You need time off work, school, or both before and after starting a pump. You can expect a lot of contact and appointments for months after starting the pump.
- Detailed food and exercise records,** and perhaps other worksheets.
- Frequent blood sugar checking:** It can be 7 to 10 times a day to start, and often at unusual or inconvenient times. You will need to test your blood sugar often, even after you're established on pump therapy.
- Frequent downloading, printing and/or emailing pump records** to the diabetes team. You will need to learn the software for downloading pump information.
- Pump programming:** You will need to program new settings into your pump, especially during the first few months. This may mean reading the instruction manuals several times, calling the 1-800 number for your pump, or calling your healthcare team.
- Problem solving:** Managing diabetes on a pump is different. You need more time to review and make decisions. You need to re-think common scenarios and learn new ones. Some examples include having to:
  - relearn how to manage exercise
  - learn how and when to replace basal insulin with injections (rapid, intermediate, or long-acting insulin)
  - set temporary basal rates
  - understand insulin on board
  - problem-solve infusion sites (unexplained high blood sugars, bent cannulas, accidental rip outs, site irritation)

**13.** It is important that you are sure insulin pump therapy is right for you or your child.  
What questions would you like answered to help you decide?

My questions are:

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
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