

Morning Appointment

Insulin recommendations Day before Procedure

If you take long acting insulin such as:

Lantus, Levemir, Humulin I, Insuman Basal, Abasaglar, Toujeo, Tresiba

Reduce your dose of insulin by 20% the day before your procedure

Day of Procedure

Type of Insulin	What to do
Once daily (long acting insulin) evening injection Lantus Levemir Humulin I Insuman Basal Abasaglar Toujeo Tresiba 100 or 200	Do not need to do anything – will be able to have usual evening insulin after the procedure
Once daily (long acting insulin) morning injection Lantus Levemir Humulin I Insuman Basal Abasaglar Toujeo Tresiba 100 or 200	Reduce dose by 20%
Twice daily insulin Humulin M3 Novomix 30 Humalog Mix 25 Humalog Mix 50 Levemir or Lantus given twice a day	Half usual morning dose. You can take usual evening dose after the procedure as normal
Three times daily mixed insulin Humulin M3 Humalog Mix 25 Humalog Mix 50 NovoMix 30	Half usual morning dose Omit lunch time dose Resume normal if eating a normal meal. If small give half usual dose
Multiple daily injection regime This includes an injection of short acting insulin with meals and once or twice daily background insulin	Omit morning dose of short acting insulin Reduce morning long acting insulin dose if taken in morning by 20%

Morning appointment
Non – insulin medication recommendations

**York and Scarborough
Teaching Hospitals**
NHS Foundation Trust

Day before procedure

Omit the SGLT2 inhibitor (e.g dapagliflozin, canagliflozin, ertugliflozin)
Take all other medication as normal the day before

Day of procedure

Medication	What to do
Metformin	Take as normal in morning - if a dose is taken at lunchtime – omit this dose
Sulfonylureas (e.g. gliclazide, glipizide, glimepiride)	Omit the morning dose. Take usual evening dose if taken twice a day following procedure
Meglitinides (e.g. repaglinide or nateglinide)	Omit morning dose Take usual evening dose if taken twice a day following procedure
Pioglitazone	Take as normal
DPP4 inhibitors (e.g. sitagliptin, linagliptin, alogliptin, saxagliptin)	Take as normal
SGLT2 inhibitors (e.g. dapagliflozin, canagliflozin, empagliflozin)	Omit dose
GLP1 injections (e.g. exenatide, liraglutide lixisenatide, dulaglutide, Mounjaro)	Take as normal

Remember to test blood glucose more regularly if you usually test, and that your glucose level may be a little erratic for a few days after the procedure.

Keep hypo treatment with you in case of low blood glucose levels (glucose level under 4 mmol/L)

For further advice contact the Diabetes Team:
York (01904) 725789
Scarborough (01723) 342274

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact Nic Lloyd-Jones, Diabetes and Endocrine Unit, York Hospital, telephone 01904 725789 or email Nicola.lloyd-jones1@nhs.net

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net

An answer phone is available out of hours.

Teaching, training and research

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Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

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