

Appendix A: Gastroscopy or ERCP

Medication instructions for people with type 2 diabetes controlled with tablets and/or GLP-1 agonist injectable therapy. (**Diet control alone require no action**)

Diabetes medication	If your gastroscopy or ERCP is in the morning	If your gastroscopy or ERCP is in the afternoon
Acarbose	Omit morning dose	Take morning dose if eating breakfast. If normally have lunchtime dose omit this.
Meglitinides: repaglinide or nateglinide	Omit morning dose	Take morning dose if eating breakfast. If normally have lunchtime dose omit this.
Metformin	Omit morning dose If only taken once daily with breakfast, then take with lunch.	Take morning dose if usually taken at breakfast. If normally have lunchtime dose omit this.
Sulfonylureas: glibenclamide , glipizide, glimepiride , gliclazide , tolbutamide	Omit morning dose. If only taken once daily with breakfast, then take with lunch.	Omit morning dose
Thiazolidinediones: pioglitazone	Omit morning dose	Take as normal
DPP-IV inhibitors: sitagliptin , saxagliptin, vildagliptin, alogliptin, linagliptin	Omit morning dose. If only taken once daily with breakfast, then take with lunch.	Omit morning dose
SGLT2i - sodium-glucose co-transporter inhibitors: empagliflozin , canagliflozin , dapagliflozin , ertugliflozin , sotagliflozin	Omit dose	Omit dose
GLP-1 agonist oral therapy: Rybelsus® (semaglutide),	Omit dose	Omit dose
GLP-1 agonist injectable therapy: Ozempic® (semaglutide), Victoza® (liraglutide), Trulicity® (dulaglutide), Bydureon® (exenatide), Mounjaro® (tirzepatide).	Omit dose	Omit dose
<i>People on weekly medication; please access advice from the healthcare professional that supports you in your diabetes management. If due on day of procedure delay weekly injection by one day.</i>		

Note: Drugs in bold are on the Bucks formulary, drugs not in bold are non-formulary.

Appendix B Part 1: Gastroscopy or ERCP

Medication instructions for people with type 1 diabetes or type 2 diabetes managed with insulin therapy.

Insulin	Example	Day prior to procedure	Day of procedure	
			If your gastroscopy or ERCP is in the morning	If your gastroscopy or ERCP is in the afternoon
Once daily basal (morning)	Levemir® (detemir) Lantus® Abasaglar® Semglee® Toujeo® (glargine) Tresiba® (degludec) Xultophy® (degludec and liraglutide) Humulin I® Insulatard® (Isophane) Hypurin® Porcine Isophane	Make no change to dose	Give 80% of dose	Give 80% of dose
Once daily basal (evening)	As above	Give 80% of dose	Make no change to dose	Make no change to dose
Twice daily basal	Levemir® (detemir) Lantus® Abasaglar® Semglee® Toujeo® (glargine) Humulin I® Insulatard® (Isophane) Hypurin® Porcine Isophane	Make no change to morning dose Give 80% of evening dose	Give 80% of morning dose Make no change to evening dose	Give 80% of morning dose Make no change to evening dose

Appendix B Part 2: Gastroscopy or ERCP

Medication instructions for people with type 1 diabetes or type 2 diabetes managed with insulin therapy.

Insulin	Example	Day prior to procedure	Day of procedure	
			If your gastroscopy or ERCP is in the morning	If your gastroscopy or ERCP is in the afternoon
Twice daily pre-mixed insulin	Novomix 30 [®] , Humalog Mix25 [®] , Humalog Mix50 [®] , Humulin M3 [®] , Hypurin Porcine 30/70 Mix [®]	Make no change to dose	Give 50% of morning dose	Give 50% of morning dose
Three times daily pre-mixed insulin	As above	Make no change to dose	Give 50% of morning dose	Give 50% of morning dose Omit lunchtime dose
Multiple daily injection regimen with short acting insulin with meals (1 to 4 injections per day) with once or twice daily basal insulin	Short acting Insulins: Actrapid [®] Humulin S [®] (insulin soluble human) Hypurin [®] Porcine Neutral (insulin soluble porcine) Admelog [®] (lispro) Lyumjev [®] (lispro) Humalog [®] (lispro) Apidra [®] (glulisine) Fiasp [®] (aspart) NovoRapid [®] (aspart) Trurapi [®] (aspart) Basal insulins: as above - Appendix B Part 1	Short acting insulin: no change to dose Basal insulins: changes as above – Appendix B Part 1	Short acting insulin: omit morning dose Basal insulins: changes as above – Appendix B Part 1	Short acting insulin: take morning dose if eating breakfast. If normally have lunchtime dose omit this. Basal insulins: changes as above – Appendix B Part 1
Pump therapy	Keep basal rate unchanged but make the team aware you use a pump as it may need to be disconnected if you are having X-rays.			
Self Mix Insulin	<i>Please access advice from the healthcare professional that supports you in your diabetes management</i>			

Please remember that you may need to reduce the doses of insulin after your procedure if you are eating less than usual to avoid hypoglycaemic episodes.

Appendix C: For patients undergoing colonoscopy or sigmoidoscopy requiring bowel preparation

Medication instructions for people with type 2 diabetes controlled with tablets and/or GLP-1 agonist injectable therapy. **(Diet control alone require no action)**

Diabetes medication	If your procedure is in the morning	If your procedure is in the afternoon	After procedure
Acarbose	Omit dose	Omit dose	Restart when eating and drinking normally and next due
Meglitinides: repaglinide or nateglinide	Omit the day before and omit morning of procedure	Take morning dose on day before procedure and omit further doses	Restart when eating and drinking normally and next due
Metformin	Omit morning dose	Omit morning dose and lunchtime dose (if normally taken)	Restart when eating and drinking normally and next due
Sulphonylureas: glibenclamide , glipizide, glimepiride , gliclazide , tolbutamide	Omit morning dose on the day before procedure and omit further doses	Take morning dose on the day before procedure and omit further doses	Restart when eating and drinking normally and next due
Thiazolidinediones: pioglitazone	Continue taking medication	Continue taking medication	Continue taking medication
DPP-IV inhibitors: sitagliptin , saxagliptin, vildagliptin alogliptin, linagliptin	Continue taking medication	Continue taking medication	Continue taking medication
SGLT2 – sodium-glucose co-transporter inhibitors: empagliflozin , canagliflozin , dapagliflozin , ertugliflozin , sotagliflozin	Omit day before procedure and omit day of procedure	Omit day before procedure and omit day of procedure	Restart when eating and drinking normally & next due
GLP-1 agonist oral therapy: Rybelsus® (semaglutide),	Omit dose	Omit dose	Restart when eating and drinking normally and next due
GLP-1 agonist injectable therapy: Ozempic® (semaglutide), Victoza® (liraglutide), Trulicity® (dulaglutide), Bydureon® (exenatide), Mounjaro® (tirzepatide).	Omit dose	Omit dose	Restart when eating and drinking normally and next due
<i>People on weekly medication; please access advice from the healthcare professional that supports you in your diabetes management. If due on day of procedure delay weekly injection by one day.</i>			

Appendix D Part 1: For patients undergoing colonoscopy or sigmoidoscopy requiring bowel preparation

Medication instructions for patients with type 1 diabetes or type 2 diabetes using insulin therapy.

Insulin	Example	Day Prior to Procedure	Day of Procedure		After Procedure
			If your procedure is in the morning	If your procedure is in the afternoon	
Once daily basal (morning)	Levemir® (detemir) Lantus® Abasaglar® Semglee® Toujeo® (glargine) Tresiba® (degludec) Xultophy® (degludec and liraglutide) Humulin I® Insulatard® (Isophane) Hypurin® Porcine Isophane	Give 80% of dose	Give 80% of dose	Give 80% of dose	Restart usual dose once eating and drinking normally and next due
Once daily basal (evening)	As above	Give 80% of dose	Make no change to dose - usual dose in evening as long as eating and drinking normally		
Twice daily basal	Levemir® (detemir) Lantus® Abasaglar® Semglee® Toujeo® (glargine) Humulin I® Insulatard® (Isophane) Hypurin® Porcine Isophane	Give 80% of both doses	Give 80% of morning dose and take usual evening dose when next due as long as and drinking normally	Give 80% of morning dose and take usual evening dose when next due as long as and drinking normally	Take usual doses when next due as long as eating and drinking normally
<i>If normal eating and drinking has not resumed after procedure seek advice from healthcare professionals and please remember that you may need to reduce the doses of insulin after your procedure if you are eating less than usual to avoid hypoglycaemic episodes.</i>					

Appendix D Part 2: For patients undergoing colonoscopy or sigmoidoscopy requiring bowel preparation

Medication instructions for patients with type 1 diabetes or type 2 diabetes using insulin therapy.

Insulin	Example	Day Prior to Procedure	Day of Procedure		After Procedure
			If your procedure is in the morning	If your procedure is in the afternoon	
Twice daily pre-mixed insulin	Novomix 30®, Humalog Mix25®, Humalog Mix50®, Humulin M3®, Hypurin Porcine 30/70 Mix®	Give 50% of both doses	Give 50% or morning dose	Give 50% of morning dose	Take usual doses when next due as long as eating and drinking normally
Three times daily pre-mixed insulin	As above	Give 50% of all doses	Give 50% or morning dose	Give 50% of morning dose Omit lunchtime dose	Take usual doses when next due as long as eating and drinking normally
Multiple daily injection regimen with short acting insulin with meals (1 to 4 injections per day) with once or twice daily basal insulin	Short acting Insulins: Actrapid® Humulin S® (insulin soluble human) Hypurin® Porcine Neutral (insulin soluble porcine) Admelog® (lispro) Lyumjev® (lispro) Humalog® (lispro) Apidra® (glulisine) Fiasp® (aspart) NovoRapid® (aspart) Trurapi® (aspart) Basal insulins: as above - Appendix D Part 1	Short acting insulin: omit all short acting (meal time) insulin while not eating Basal insulins: changes as above – Appendix D Part 1	Short acting insulin: omit all short acting (meal time) insulin while not eating Basal insulins: changes as above – Appendix B Part 1	Short acting insulin: omit all short acting (meal time) insulin while not eating Basal insulins: changes as above – Appendix B Part 1	Take usual doses when next due as long as eating and drinking normally
Pump therapy	Keep basal rate unchanged but make the team aware you use a pump as it may need to be disconnected if you are having X-rays.				
Self Mix Insulin	Please access advice from the healthcare professional that supports you in your diabetes management				
If normal eating and drinking has not resumed after procedure seek advice from healthcare professionals and please remember that you may need to reduce the doses of insulin after your procedure if you are eating less than usual to avoid hypoglycaemic episodes.					