DIABETES MEDICATIONS: PREPARING AND INJECTING INSULIN USING A PEN

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Some people who inject insulin use an insulin pen. At first glance, the insulin pen looks a lot like a writing pen, but it has a needle instead of a writing point, and an insulin cartridge rather than an ink cartridge.

Though you can't mix different types of insulin and put them into an insulin pen, pens do come pre-mixed. Keep in mind that there are several different pens to choose from and each will have its own special instructions. Work with your diabetes care team to learn how to use your pen.

The following step-by-step preparation method can be used with most insulin pens:

Before starting, always make sure that your pen or cartridge contains the type of insulin that has been prescribed for you.

Gather your supplies. They include your pen, needle, alcohol swab, and a sharps container or heavy plastic bottle.

Wash your hands with soap and warm water and dry them.

Pull the outer cap of the pen off.

If you're using cloudy insulin, roll the pen between your hands and tip the pen end-toend to mix the insulin thoroughly.

Next, wipe the rubber seal at the top of the pen with alcohol.

Get the needle and take the protective paper tab off.

Screw the needle onto the pen tightly. You'll notice that it is still in its protective cap.

Remove the outer needle cap.

Take off the inner needle cap.

It is important to prime your pen before each injection to help ensure your proper dose. This means doing a trial air shot or safety shot before injecting insulin. To prime your pen, dial your pen to deliver two units of insulin by turning the dose knob until you see a 2 in the window.

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Point the pen straight up and push the injection button. You should see insulin come out of the needle tip. If you don't, prime your pen again. Now you can set your dose. To set your dose, turn the knob until your dose amount appears in the window. Now you are ready to inject your insulin.

Insulin should be injected into fatty tissue. The recommended injection areas are the abdomen or belly, the backs of the arms, the tops or sides of the thigh, and the buttocks, or rear. With most insulins, where you inject on your body can make a difference in how fast the insulin will go to work, or its onset. Generally, the abdomen works fastest, followed by the backs of the arms, the top or outer thigh, and then the buttocks. Work with your diabetes care team to find the injection area that is best for you.

Try to use the same area at the same time every day but make sure you change the actual injection site each time you inject. This helps keep your skin and underlying tissues healthy. When injecting into your abdomen, make sure to stay two inches away from any scar tissue or your belly button.

If you are about to exercise, be aware that injecting the part of your body that you are going to exercise can cause your insulin to work more quickly. For example, if you inject your leg and then go for a run, your blood glucose level may drop more quickly and go much lower than usual. So, before a strenuous run, you may want to choose a different area, and you may need to eat a snack before your run.

Once you have selected an injection site, wipe the skin with alcohol and wait a few seconds for it to dry.

Pick up the pen and inject at a 90-degree angle.

Firmly press the insulin pen injection button. Depending on the pen you are using, you may have to hold it for five to 10 seconds. Then pull the needle straight out.

With time and practice, injecting your insulin will become a routine part of your day. Meet with your diabetes care team on a regular basis to review the way you take your insulin. She may have tips that can make taking your insulin easier.

