

# Insulin PocketCard™



Download Success!  
Get Our Free CDE® Coach App



Action	Insulin Name	Onset	Peak	Effective Duration	Considerations	
Bolus	Rapid Acting Analogs	Aspart (Novolog) Lispro (Humalog)* Glulisine (Apidra)	5 - 15 min	30 - 90 min	< 5 hrs	Bolus insulin lowers after-meal glucose. Post meal BG reflects efficacy.
	Short Acting	Regular*	30 - 60 min	2 - 3 hrs	5 - 8 hrs	
Basal	Intermediate	NPH	2 - 4 hrs	4 - 10 hrs	10 - 16 hrs	Basal insulin controls BG between meals and nighttime. Fasting BG reflects efficacy. Side effects: hypoglycemia, weight gain. Typical dosing range: 0.5-1.0 units/kg body wt/day. Discard open vials after 28 days. For pen storage guidelines, see package insert.
		Detemir (Levemir)	3 - 8 hrs	No peak	6 - 24 hrs	
	Long Acting	Glargine (Lantus)* Glargine (Basaglar)	2 - 4 hrs	No peak	20 - 24 hrs	
		Degludec (Tresiba)*	~ 1 hr		< 42 hrs	
Basal + Bolus	Intermediate + short	Combo of NPH + Reg 70/30 = 70% NPH + 30% Reg 50/50 = 50% NPH + 50% Reg	30 - 60 min	Dual peaks	10 - 16 hrs	
		Novolog® Mix - 70/30 Humalog® Mix - 75/25 or 50/50 Ryzodog Mix 70/30 (degludec/aspart)	5 - 15 min		24 hrs	

\* Concentrated insulins available - see next page for details.

Insulin action times vary. Time periods listed here are general guidelines only; please consult prescribing information for details.

# Concentrated & Inhaled Insulins

DiabetesEd.net

Name/Concentration	Insulin/Action	Considerations
Humulin Regular U-500 <ul style="list-style-type: none"><li>• 500 units insulin/mL</li><li>• KwikPen or Vial</li></ul>	Regular Bolus / Basal	5 xs concentration of u-100 insulin. Indicated for pts taking 200+ units insulin daily. 3 mL Pen – Once opened, good for 28 days. 20 mL Vial – Once opened, good for 40 days. Use designated U-500 insulin syringe.
Humalog KwikPen U-200 200 units insulin/mL	Lispro (Humalog) Bolus	2 xs concentration of u-100 insulin. 3 mL Pen. Once opened, good for 28 days
Toujeo SoloStar U-300 Pen 300 units insulin/mL	Glargine (Lantus) Basal	3 xs concentration of u-100 insulin 1.5 mL Pen. Once opened, good for 42 days
Tresiba FlexTouch U-200 Pen 200 units insulin/mL	Degludec (Tresiba) Ultra basal	2 xs concentration of u-100 insulin 3 mL Pen. Once opened, good for 8 weeks

**All concentrated insulin pens and the U-500 syringe automatically deliver correct dose (in less volume). No, conversion, calculation or adjustments required. For example, if order reads 30 units, dial the concentrated pen to 30 units or draw up 30 units on the U-500 syringe. Important – never withdraw concentrated insulin from the pen using a syringe.**

## Inhaled Insulin

Action	Insulin Name	Dose Range	Onset	Peak	Duration	Considerations
Bolus – Rapid-acting	Aftezza Inhaled regular human insulin	4, 8, and 12 unit cartridges before meals	15 min	1 hr	3 hrs	Assess lung function. Avoid in lung disease — bronchospasm risk. Side effects: hypo, cough, throat irritation.

*The information listed here are not guidelines. Please consult prescribing information for details.*

# Injectables that Lower Glucose



Class/Main Action	Name	Dose Range	Considerations
<b>GLP-1 Receptor Agonist (GLP-1 RA)</b> <b>“Incretin Mimetic”</b> <ul style="list-style-type: none"> <li>Increases insulin release with food</li> <li>Slows gastric emptying</li> <li>Promotes satiety</li> <li>Suppresses glucagon</li> </ul>	exenatide (Byetta)	5 or 10 mcg BID	<b>Side effects for all:</b> Nausea, vomiting, weight loss, injection site reaction. Report signs of acute pancreatitis (severe abdominal pain, vomiting), stop med. Renally excreted.  <b>Black box warning:</b> Thyroid C-cell tumor warning for liraglutide, exenatide XR, albiglutide, and dulaglutide (avoid if family history of medullary thyroid cancer, notify MD of hoarseness, throat lump).  Lowers A1c 0.5 – 1.6% Wt loss of ~ 3lbs
	exenatide XR (Bydureon)	2mg 1x a week	
	liraglutide (Victoza)	0.6 - 1.8 mg daily	
	lixisenatide (Adlyxin)	10 mg daily for 2 weeks. Then increase to 20 mg daily.	
	albiglutide (Tanzum)	30 and 50 mg 1x a week pen injector	
dulaglutide (Trulicity)	0.75 and 1.5 mg 1x a week pen injector		
<b>Amylin Mimetic</b> <ul style="list-style-type: none"> <li>Slows gastric emptying</li> <li>Suppresses glucagon</li> <li>Promotes satiety</li> </ul>	pramlintide (Symlin)	Type 1: 15 - 60 mcg; Type 2: 60 - 120 mcg  immediately before major meals	For Type 1 or 2 on insulin.  <b>Black box warning:</b> severe hypoglycemic risk 3 hrs post injection. Prevent hypoglycemia, decrease insulin dose when starting pramlintide. Side effects: nausea, weight loss.  Lowers A1c 0.5 – 1%

The information listed here are general guidelines only; please consult prescribing information for details.

# Insulin/Injectable Combos

Download FREE CDE<sup>®</sup> Coach App for latest Pocketcard versions and update notifications | DiabetesEd.Net



Name	Combines	Considerations
<b>IDegLira*</b> Xultophy 100/3.6	Insulin degludec (IDeg or Tresiba) Ultra long insulin + Liraglutide (Victoza) GLP-1 Receptor Agonist (GLP-1 RA)	<b>Xultophy 100/3.6 pre-filled pen</b> = 100 units IDeg / 3.6 mg liraglutide per mL Once daily injection – Dose range 10 to 50 = 10 – 50 units IDeg + 0.36 -1.8 mg liraglutide <b>Recommended starting dose:</b> <ul style="list-style-type: none"><li>• 16 IDegLira (= 16 units IDeg + 0.58 mg liraglutide)</li></ul> Titrate dose up or down by 2 units every 3-4 days to reach target. Supplied in package of five single-use 3mL pens. Once opened, good for 21 days.
<b>iGlarLixi*</b> Soliqua 100/33	Insulin glargine (Lantus) Basal Insulin + Lixisenatide (Aldylin) GLP-1 Receptor Agonist	<b>Soliqua 100/33 SoloStar Pen</b> = 100 units glargine / 33 µg lixisenatide per mL Once daily injection an hour prior to first meal of day. Dose range 15 – 60 = 15-60 units glargine + 5 – 20µg lixisenatide <b>Recommended starting dose:</b> <ul style="list-style-type: none"><li>• 15 units for pts not controlled on 30 units basal insulin or GLP-1 RA</li><li>• 30 units for pts not controlled on 30 -60 units basal insulin or GLP-1 RA</li></ul> Titrate dose up or down by 2-4 units every week to reach target. Supplied in package of five single-use 3mL pens. Once opened, good for 14 days.

\*Discontinue basal insulin /GLP-1 RA therapy before starting. If dose missed, resume with next usual scheduled dose.

*These are general guidelines only; please consult prescribing info. Observe precautions of each component drug.*