

# SIMPLE, NON-STOP INSULIN DELIVERY FOR PEOPLE WITH DIABETES WHO INSIST LIFE STILL COMES FIRST.

INSULIN MANAGEMENT SYSTEM

Ratie R.





PODDER<sup>TM</sup> RESOURCE GUIDE

**Omnipod® Insulin Management System** 

\*Up to 72 hours of continuous insulin delivery

The Pod has a waterproof IP28 rating for up to 7.6 metres for up to 60 minutes. The PDM is not waterproof.

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# GET TO KNOW THE OMNIPOD® INSULIN MANAGEMENT SYSTEM

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# OMNIPOD® SYSTEM

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This Resource Guide is intended to be used in conjunction with your Diabetes Management Plan, input from your healthcare professional, and the Omnipod<sup>®</sup> Insulin Management System User Guide. PDM imagery is for illustrative purposes only and should not be considered suggestions for user settings.

Refer to the Omnipod<sup>®</sup> Insulin Management System User Guide for complete information on how to use the Omnipod<sup>®</sup> System, and for all related warnings and cautions. The Omnipod<sup>®</sup> Insulin Management System User Guide is available online at myomnipod.ca or by calling your local 24/7 Insulet Customer Care team at 1.855.763.4636.

This Resource Guide is for PDM models CAT45E and CAT45F. The PDM model number is written on the back cover of each PDM. Contact your healthcare professional or visit myomnipod.ca for more information.

# WELCOME

### Dear Podder™,

# Welcome to your new Omnipod® Insulin Management System. We are delighted to have you on board.

What's different about the Omnipod<sup>®</sup> System? Simple. Most insulin pumps have tubes. The Omnipod<sup>®</sup> System, however, is tubeless. But that's just a part of what makes the Omnipod<sup>®</sup> System different and makes people become dedicated Podders<sup>™</sup>.

The Omnipod<sup>®</sup> System is a simple system consisting of just 2 primary parts – the tubeless Pod and the handheld Personal Diabetes Manager (PDM) – that you keep nearby to program your insulin delivery wirelessly\*.

Made to be convenient and discreet, the Pod can provide up to 3 days of non-stop insulin delivery\*\*. It can be worn anywhere you would inject and it's waterproof\*\*\*, meaning you can shower and swim as you please, wear what you want, and do what you want. The Omnipod® System helps simplify insulin delivery, so that you can live your life and manage diabetes around it.

Please take time to read through this Podder<sup>™</sup> resource guide and take it with you to your Omnipod<sup>®</sup> System training session, where your healthcare professional will assist you with the initial set up of your Omnipod<sup>®</sup> System.

Consider this a "how to" use your Omnipod<sup>®</sup>. It contains step-by-step instructions to help you activate, place and change Pods, guide you through some key functions and explore the advanced features on your PDM. There are also troubleshooting sections and tips and reminders to help you get the most out of your Omnipod<sup>®</sup> System. Please refer to the user guide for more details.

If you need help or have further questions you can contact our 24-hour Customer Care Team at 1.855.763.4636 or visit myomnipod.ca.

Yours sincerely, The Insulet Team



\*At start up, the PDM and Pod should be adjacent and touching, either in or out of tray to ensure proper communication during priming. At least 1.5 metres during normal operation. \*\*Up to 72 hours of continuous insulin delivery. \*\*\*IP28: 7.6 metres for up to 60 minutes for the Pod. The PDM is not waterproof.

This resource guide will help you learn more about the Omnipod<sup>®</sup> System and how to use it, but if you have any questions about the Omnipod<sup>®</sup> System, please ask your healthcare professional. This resource guide is not intended to provide you with medical advice about your condition or treatment. Your healthcare professional should provide you with medical advice about your condition and treatment. You must always ask your healthcare professional to decide the Omnipod<sup>®</sup> System setting which is the most suitable for you.

This Resource Guide is for PDM models CAT45E and CAT45F. The PDM model number is written on the back cover of each PDM.

# SUPPLY LIST

# It is recommended that you have the following supplies with you wherever possible:

- + Several new, sealed Pods
- + Extra, new PDM batteries (at least two AAA alkaline)
- + A vial of rapid-acting U-100 insulin
- + Syringes or pens/needles for injecting insulin
- + Instructions from your healthcare professional about how much insulin to inject if delivery from the Pod is interrupted
- + Blood glucose test strips
- + Ketone test strips

# **ADDITIONAL NOTES**

- + Lancing device and lancets
- + Glucose tablets or another fast-acting source of carbohydrates
- + Alcohol prep swabs
- + Glucagon emergency kit and written instructions for giving an injection if you are unconscious
- + Additional blood glucose meter
- + Phone numbers for your healthcare professional in case of an emergency

# THE POD

A small, lightweight and tubeless Pod that's easy to apply and wear.



# **THE PDM**

# A wireless\* Personal Diabetes Manager (PDM) that's easy to use.



# MAIN MENU ITEMS

**Bolus:** Deliver bolus doses to cover carbohydrates and/or correct high blood glucose (BG) levels.

### More actions:

- + Change the Pod
- + Add BG readings
- + Assign/edit BG tags

**Temp basal:** Adjust insulin delivery during exercising or illness, according to your Diabetes Management Plan. This menu item is present only if the Temp basal option is enabled.

**My records:** Review insulin delivery, blood glucose history, alarm history, carbohydrate history, and personal user information.

### Settings:

- + Enter, edit and name basal programs
- + Program temp basal, carbohydrate and bolus presets
- + Customize system settings

**Suspend:** Temporarily suspend, cancel or resume insulin delivery programs.

Your healthcare professional will assist you with the initial set up of your PDM at your Omnipod\* System training session.

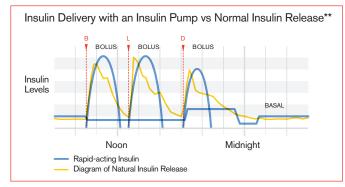
\*At start up, the PDM and Pod should be adjacent and touching, either in or out of tray to ensure proper communication during priming. At least 1.5 metres during normal operation. PDM screens may vary based on user settings and country.

# **BASAL INSULIN DELIVERY**

# What is a basal rate?

Your body needs a small amount of insulin that's constantly delivered throughout the day, which is called basal insulin. The exact amount of insulin your body needs changes often depending on the following:

- + The things you're doing throughout the day
- + The amount of stress you have
- + Your meal timings
- + Whether you're ill



# The Omnipod<sup>®</sup> System lets you personalize your basal rates.

When you first set up your Omnipod<sup>®</sup> System, your healthcare professional will assist you in programing your PDM to deliver your required basal rates. If you need to adjust your settings, you have up to 24 time intervals per basal program. You can have up to 7 basal programs\*.

# **DELIVERING BOLUS INSULIN DOSES**

# What is a bolus dose?

A bolus is an extra dose of insulin, delivered when needed to match the carbohydrates in a meal or snack and/or to lower your blood glucose when it gets too high. There are two types of bolus doses:

### + Meal bolus

With the Omnipod<sup>®</sup> System, you can deliver either a **normal** or an **extended** meal bolus.

- A normal meal bolus usually delivers enough insulin for a meal or snack you are about to eat.
- An extended meal bolus delivers insulin over a longer period of time. When you eat foods high in fat and/or protein or are eating them over a long period of time, such as at a party, you might need an extended meal bolus.

### + Correction bolus

A correction bolus can be delivered with or without a meal bolus if you need to lower your blood glucose level.

# The Omnipod<sup>®</sup> System will help to deliver your bolus doses.

Your healthcare professional will assist you in programing your PDM to deliver predetermined bolus doses when you first set up your Omnipod<sup>®</sup> System. As your insulin needs change, you can later adjust these settings.

# Calculate bolus insulin doses.

The Omnipod<sup>®</sup> System also features a **Suggested Bolus Calculator**. It helps you deliver an accurate bolus dose. The calculator uses your current blood glucose, carbs entered and your insulin on board (IOB) to determine a suggested bolus dose.

\*\*Smart Pumping For People with Diabetes, A Practical Approach to Mastering the Insulin Pump, Howard Wolpert, MD, Editor. American Diabetes Association.

<sup>\*</sup>Be sure to check with your healthcare professional before adjusting these settings.

# INTRODUCTION

# YOUR PERSONAL OMNIPOD® SYSTEM SETTINGS

# It is always a good idea to keep a copy of your Omnipod<sup>®</sup> System settings handy in the event you have to set up another PDM.

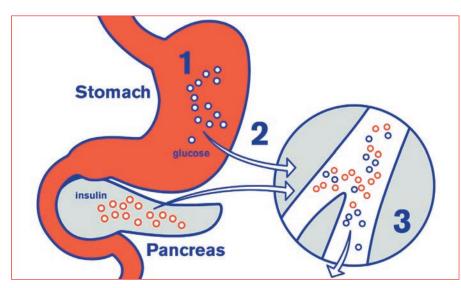
Your healthcare professional will provide you with the initial rates and help program your PDM on your Omnipod<sup>®</sup> System training session. They will also advise you on any future changes to be made to the settings.

**CAUTION:** Do not attempt to start or make any changes to your PDM settings without formal instructions from your healthcare professional.

Dat	e				
1.	Maximum basal rate	U/h			
2.	Basal 1	12:00 to	U/hr		
		to	U/hr		
		to	U/hr		
		to	U/hr		
3.	Temporary basal rate	%	U/h	Off	
4.	BG sounds	On	Off		
5.	BG goal limits	Lower Limit	mmol/L		
		Upper Limit	mmol/L		
6.	Suggested bolus calculator	On	Off		
7.	Target BG	12:00 to	Target	Correct above	mmol/L
		to	Target	Correct above	mmol/L
		to	Target	Correct above	mmol/L
8.	Min BG – for bolus calculations		mmol/L		
9.	Insulin to carb ratio	12:00 to	mmol/L		
		to	mmol/L		
		to	mmol/L		
		to	mmol/L		
			1 unit of insulin decre	eases BG by	
10.	Correction factor	12:00 to	mmol/L		
		to	mmol/L		
		to	mmol/L		
_		to	mmol/L		
	Reverse correction	On	Off		
12.		hours			
	Bolus increment	0.05 U	0.10 U	0.50 U	1.00 U
	Maximum bolus	U		-	
	Extended bolus	%	Units	Off	
_	Low volume reservoir alert	U			
17.	Expiration alert	hours			

# WHY CARBOHYDRATES MATTER

Carbohydrates are important because they provide us with energy and essential vitamins and minerals. Proteins and fats also contain calories, vitamins, and minerals, but do not contain carbohydrates unless the food is a mixed item like a casserole. Carbohydrates are the primary foods that affect glucose levels. Nearly 100% of digestible starches and sugars become glucose soon after eating.Glucose is then released into the blood stream to provide immediate energy needs, or stored in the muscle or liver as glycogen. Excess glucose is converted to fat for storage.



### Impact on blood glucose levels.

Proteins and fats take longer to digest and are slower to affect your blood glucose. Higher consumption of protein or fat at meals can delay glucose absorption and create higher blood glucose levels later. The section "Omnipod<sup>®</sup> System Advanced Features" will teach you more about bolusing for certain meals with the Omnipod<sup>®</sup> Insulin Management System. **Carbohydrate** is found in many foods including grains and starches, fruits, beans and legumes, milk and milk alternatives, sugary foods and sweets, and baked goods. For best blood glucose control it is important to balance your carbohydrate intake with the appropriate amount of bolus insulin. Read on for basic information about how to estimate carbohydrate intake by Carbohydrate Counting. It is also recommended to work with your Diabetes Educator to learn more about Carbohydrate Counting.

Making Healthy Food Choices. American Diabetes Association website. http://www.diabetes.org/food-and-fitness/food/what-can-i-eat/understanding-carbohydrates/ types-of-carbohydrates.html. Updated March 9, 2015. Accessed June 21, 2017

Beaser RS. Joslin's Diabetes Deskbook: A guide for primary care providers. 3rd ed. Boston, MA. Joslin Diabetes Center; 2014

Making Healthy Food Choices. American Diabetes Association website. http://www.diabetes.org/food-and-fitness/food/what-can-i-eat/making-healthy-food-choices/. Accessed June 21, 2017

Basic carbohydrate counting for diabetes management. Diabetes Canada website. http://guidelines.diabetes.ca/docs/patient-resources/basic-carbohydrate-counting.pdf. Updated April 2018. Accessed September 12, 2018.

# Check the label.

The two key pieces of information on the nutrition facts label for carb counting are the serving size and total carbohydrates.

For more detailed label information, visit *Understanding the Nutrition Label* at https://www.diabetes.ca/diabetes-and-you/healthy-living-resources/diet-nutrition/understanding-the-nutrition-label

The amount of carbohydrate in a food is listed in the Nutrition	Per 90 g serving (2 slices)
Facts panel on every packaged foods.	Amount % Daily Value
First, check the serving size listed. Are you eating more or less	Calories 170
	Fat 2.7 g 4 %
than the serving size? If so, you'll have to adjust the rest of the numbers accordingly.	Saturated 0.5 g + Trans 0 g 5 %
Next look at the total amount of carbohydrates in grams.	Cholesterol 0 mg
	Sodium 200 mg 8 %
This number includes fibre, sugars and starches even if starches	Carbohydrate 36 g 13 %
are not listed separately.	Fibre 6 g 24 %
Fibre does not raise blood sugar levels and should be subtracted	Sugars 3 g
from the total carbohydrate to provide the number of available	Protein 8 g
carbohydrates and the amount needed to match insulin to.	Vitamin A 1 % Vitamin C 0 %
In this example: $36g$ carbohydrate – $6g$ fibre = $30g$ of available carbohydrate.	Calcium 2 % Iron 16 %

# Know your favorites.

Below is a chart to give you an idea of the carbohydrate content of common foods. For a more extensive list you can read the Nutrient Value of Some Common Foods from the Health Canada website listed here: https://www.canada.ca/en/health-canada/services/food-nutrition/healthy-eating/nutrient-data.html

Food Category	Food	Serving Size	Carbohydrate Grams*
	White or whole wheat	2 slices	25 - 30
	Hotdog or hamburger bun	1 whole	18 - 20
Breads	Dinner roll whole wheat	1 roll (28 g)	12
	Flour tortilla	1 tortilla (8" dia.)	25
	Corn tortilla	1 tortilla (6" dia.)	6
	White or brown rice cooked	125 mL	23
Cereals/	Spaghetti, cooked	250 mL	40
Grains/ Pasta	Dry cereal (Plain Cheerios)	250 mL	16
	Instant oatmeal - reg cooked with water	1 packet	17
	Corn (on or off the cob, fresh or frozen)	125 mL	17
Starchy	Potato (baked with skin)	1 medium	34
Vegetables	Edamame	125 mL	4
	Carrots (baby)	8	6
	Black beans, canned	175 mL	17
Dried beans,	Peas, boiled	175 mL	27
Peas, Lentil	Chickpeas, Canned	175 mL	32
	Lentils, boiled	175 mL	26

Food Category	Food	Serving Size	Carbohydrate Grams*
	Apple	7 cm diameter	16
	Blueberries	125 mL	9
Fruit and	Watermelon	125 mL	6
Fruit Juices	Fruit cocktail (canned in juice)	125 mL	14
	Apple juice	125 mL	15
	Grape juice	125 mL	20
Milk and	Low-Fat Milk (fat-free, 2%, whole)	250 mL	12
Milk Products	Plain low-fat yogurt	175 mL	13
	Honey	5 mL	6
Sweets.	Vanilla Ice cream (regular)	125 mL	18
Desserts &	Chocolate Chip Cookie (commercial)	2 cookies	13
Snacks	Sugar Cookies (commercial)	2 crackers	20
	Popcorn (regular, microwave)	250 mL popped	6

# **ACTIVATE A NEW POD**

- + Assemble the following supplies:
  - Vial of insulin at room temperature (U-100, rapid-acting). See the Omnipod® Insulin Management System User Guide for the insulins that are recommended for use with the Omnipod<sup>®</sup> System
  - One sealed Pod
  - PDM
  - Alcohol prep swab
- + Wash your hands.



### **1.** Fill the Pod



- 1.1 + Remove the Pod from its sterile packaging.
  - + Use the alcohol prep swab to clean the top of the insulin vial.
  - + Assemble the fill syringe by twisting the needle onto the syringe.



1.2 + Remove the protective cap.



- **1.3** + Draw air into the fill syringe equal to the amount of insulin indicated in your Diabetes Management Plan.
  - + Depress air into the vial of insulin.
  - + Turn the vial and syringe upside down.
  - + Withdraw insulin from the vial and fill the syringe with the amount of insulin determined by your healthcare professional; fill it at least to the MIN line.
  - + Remove any air bubbles from the syringe.

# WARNING:

+ NEVER inject air into the fill port. Doing so may result in unintended or interrupted insulin delivery NEVER use a Pod if you hear a crackling noise or feel resistance when you depress the plunger. These conditions can result in interrupted insulin delivery

**CAUTION:** Do not use any other type of needle or filling device besides the fill syringe provided with each Pod.



[1]

insulin.

"Next."

Cancel

Fill a new Pod with

After filling Pod, listen for 2 beeps, then press

NOTE: Do not remove needle cap at this time.

Next

+ Press Next.

15:00 15/5

1.5 + Return to the PDM. If the PDM screen time is up, press and hold the **Home/Power** button

Pod so they are in contact.

+ The PDM establishes a one-to-one

to turn it back on. Place the PDM next to the

relationship with the Pod, which will prevent

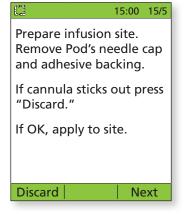
while it is active. Once the Pod successfully

completes its priming and safety checks, the

it from communicating with any other Pod

- **1.4** + Insert the needle straight down into the fill port on the underside of the Pod. To ensure a proper fill, do not insert fill syringe at an angle into the fill port.
  - + Completely empty the syringe into the Pod.
  - The Pod will beep twice, indicating that the Omnipod<sup>®</sup> System is ready to start.

# 2. Apply the Pod



 2.1 + Select the infusion site, while being careful to avoid the areas where the Pod will be affected by the folds of the skin. Refer to the figures on page 14 of this resource guide for the sites your healthcare professional may recommend and placement tips.



2.2 + For optimal adhesion, always clean the site thoroughly with an alcohol swab to remove all body oils and lotions, which may make the Pod's adhesive ineffective. Let the site air-dry completely; do not blow on the site to dry it.



**2.3** + Remove the Pod's needle cap.

If the PDM screen times out during the process, press and hold the Home/Power button to continue.

PDM screens may vary based on user settings and country.

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INSTRUCTIONS



2.4 + Remove and discard the white paper backing from the adhesive.



- **2.5** + Apply the Pod to the selected site.
  - + Secure the adhesive using your fingers.
  - + Press Next on the PDM.
  - To facilitate insertion, place one hand over the Pod and make a wide pinch around the skin surrounding the viewing window; this step is critical if the insertion site does not have much fatty tissue.

### 3. Press Start



**3.1** + The Pod automatically inserts the cannula and delivers a prime bolus to fill the cannula with insulin. It takes a few seconds to complete this process. Release the skin after the cannula inserts.

# 15:00 15/5 Pod is active. '' "basal 1" has been programmed. '' Check infusion site and cannula. '' Is cannula properly inserted? '' No Yes

- **3.2** + Once complete, the PDM indicates that the Pod is active and asks you to check the infusion site.
  - + Look through the Pod's viewing window, if properly inserted, press Yes. Press No if you see a problem with the cannula.

+ If the PDM screen times out during the process, press and hold the **Home/Power** button to continue.

#### WARNING:

- + Check the infusion site after insertion to ensure that the cannula was properly inserted. The individual should check their blood glucose 1.5-2 hours after each pod change and check the infusion site periodically. If the cannula is not properly inserted, hyperglycemia may result. Verify there is no wetness or odour of insulin, which may indicate the cannula has dislodged.
- + NEVER inject insulin (or anything else) into the fill port while the Pod is on your body. Doing so may result in unintended or interrupted insulin delivery.
- + Verify cannula does not extend beyond adhesive backing once needle cap is removed.

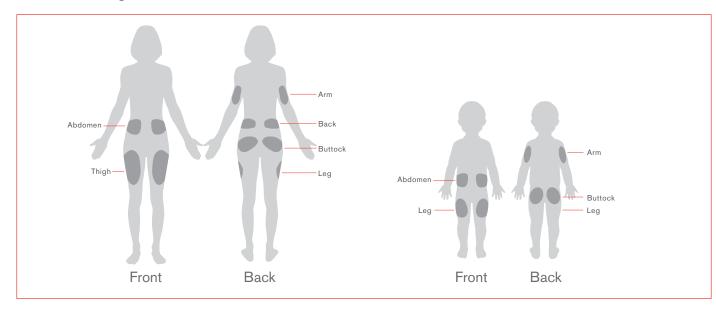
PDM screens may vary based on user settings and country.

# MAKING OMNIPOD® SYSTEM A PERFECT FIT IN YOUR WORLD

It's easy to find a place for your Pod, as it is tubeless and lightweight, so you can wear it with freedom.

### Where to wear your Pod.

It's important to circulate the area where you place your Pod to avoid site overuse, which could result in variable absorption. The new area should be at least 2.5 cm away from the previous one, 5.1 cm away from the navel and not over a mole, scar or tattoo, where insulin absorption may be reduced. Be sure to put your Pod somewhere you'll be comfortable – avoid sites where belts, waistbands or tight clothing may rub against, disturb or dislodge the Pod.



### How to place your Pod.

### Arm and leg

Position the Pod vertically or at a slight angle.

### Back, abdomen or buttocks

Position the Pod horizontally or at a slight angle.

### Pinching up



This step is important if your Pod location is very lean or doesn't have much fatty tissue. Place your hand over the Pod and make a wide pinch around your skin surrounding the viewing window. Then press the **start** button on the PDM. You can let go when the cannula inserts.

# FEEL COMFORTABLE AND CONFIDENT

# Prepping for your Pod.

Remember to stay cool and be cool (dry and not sweating) when it's time to change your Pod. Here are more potential sticking points:

Trouble with	Problem	Solutions	
Oily skin	Residue from soap, lotion, shampoo or conditioner can prevent your Pod from staying secure.		
Damp skin	Dampness gets in the way of adhesive.	Towel off and allow your skin to air-dry; do not blow on it.	
Body hair	A lot of hair will prevent the Pod from sticking securely.	Clip or shave the area with a razor to create a smooth surface for your Pod to stick to. Do this 24 hours before putting on your Pod to prevent irritation.	





PDM screens may vary based on user settings and country.

# **HOW TO CHANGE THE POD**

You may need to change the Pod:

- + When the reservoir is low or empty, or the Pod is nearing expiration
- + In response to an alarm
- + In case of a dislodged Pod/cannula
- + If you have a blood glucose reading of 13.9 mmol/L or more and ketones are present
- + If you experience unexpected, elevated blood glucose levels
- + As directed by your healthcare professional
- + If a Pod is active and fails to beep

♠ ➡ 0	15:00	15/5
🖥 Bolus		
More actions		•
🛠 Temp basal		
My records		
<b>T</b> Settings		
😣 Suspend		
Status	Sel	ect

1. Turn on the PDM. Press the **Home/Power** button and then select **More actions**.

	15:00 15/5
0	Pod deactivated.
Press "Confir the Pod char This will dea current Pod.	
	Next
Back Con	firm

3. Press **Confirm** to deactivate the Pod. Gently remove the deactivated Pod by slowly peeling back the adhesive. (Our Podders<sup>™</sup> have reported commercial solvent or baby oil can be helpful to soften the adhesive if necessary.)

<b>∐</b> ≣+;	15:00	15/5
Change pod		
Add BG readin	g	
Assign/Edit BG	tags	
Back	Sel	ect

2. Select Change Pod.

	15:00 15/5			
Last BG	8.3 mmol/L			
Last bolus	14:51 15/5 5.00∪ 15:00 15/5			
IOB 5.00 U				
No active Pod. Would you like to activate a Pod now?				
No	Yes			

4. Press Yes to activate a new Pod. Follow the steps on pages 11 and 12 in this guide to fill a new Pod with insulin. As you proceed, if the PDM screen times out, press and hold the Home/Power button to turn it back on.

If the PDM screen times out during the process, press and hold the **Home/Power** button to continue.

**ADDITIONAL NOTES** 

More actions
K Temp basal

My records
 Settings
 Suspend

# CHECKING YOUR BLOOD GLUCOSE LEVELS

### How often do I need to check my glucose?

You can use the built-in FreeStyle blood glucose meter to check your blood glucose levels as often as you need to. However, you may want to check your blood glucose levels at least a few times a day, in particular:

- + When you feel **weak**, **sweaty**, **nervous**, **confused** or have **headaches**
- + When you have delayed a meal after taking an insulin dose
- + When your healthcare professional advises you to do it

# How do I check my blood glucose levels with FreeStyle and the Omnipod<sup>®</sup> System?

Checking your blood glucose levels with the FreeStyle meter requires just a **small amount of blood** – only 0.3 microlitres. However, the first step involves knowing the anatomy of your lancing device.

NOTE: to make sure your results are accurate, be sure to wash your hands and the test site with soap and water. Make sure all cream and lotion content is removed and dried thoroughly.

### FreeStyle Lancing Device II

2	Depth setting dial Depth setting indicator window
	Lancet device cap
	Lancing button
	Cocking/release slider



Measurements obtained from alternate site testing should not be used to calculate insulin doses with the Omnipod® System.

PDM screens may vary based on user settings and country.

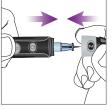
# Prepare your lancing device in 3 easy steps.

- 1. Snap off the cap of the lancing device at an angle, and insert a new lancet firmly into the white holder cup. This action may cock the device, which is fine.
- 2. With one hand, hold the lancet in place while twisting the rounded top with your other hand. Then, replace the cap until it snaps back into place. Make sure you do not touch the exposed needle.
- **3.** Adjust the depth setting; the lancing device offers 9 different settings (including half settings). Level 1 is the shallowest depth and Level 5 is the deepest. Use a lower number to lance. Pull back the grey slider until it clicks. (You may have already cocked the device in step 1)













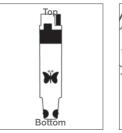
### You're now ready to check!

Lancing device depicted is representative only. Please follow the instructions included with your specific lancing device.

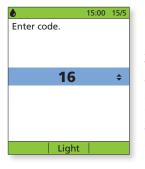
# Testing your blood glucose level.

### 1. Insert your FreeStyle Lite test strip and set the code\*

- a. Insert a new test strip into the test strip port at the bottom of the PDM until it stops. Make sure you insert only the top end of the strip.
  - + To help you see the test strip port in reduced lighting, press the middle soft key labelled **Light**. To turn the light off, press **Light** again.
- b. The PDM will display a code number once you insert the strip. This code must match the code on the side of the test strip vial to ensure test accuracy. To change this code, just press the Up/Down controller to change the numbers until they match.







WARNING: The code number on the screen must match the code number on the side of your test strip vial. They must always match or your route will be

or your results will be inaccurate.

\*From some PDM screens, you cannot access the FreeStyle blood glucose meter. For example, you cannot use the meter while you are activating a Pod or when an alert, alarm or communication error screen is displayed. In these cases, if you insert a test strip, the PDM beeps to alert you. If you do not start the test within 2 minutes, the PDM powers off. To restart the PDM, take out the unused strip and reinsert it, or simply press and hold the **Power** button to turn on the PDM. If you need to adjust the code number after the PDM has moved to the next screen, just press **Up/Down Controller** buttons. The code screen reappears and you can adjust the number. The code number remains on the PDM screen for your reference until you have completed the BG test.

PDM screens may vary based on user settings and country.

### 2. Get your sample and fill the test strip

**Tip:** Before you lance, you'll want to stimulate the blood flow by lowering your hand to waist level and gently massaging your finger.

### 3. Lance the site

- a. Hold the lancing device firmly against the side of your fingertip.
- b. Press the lancing button.
- c. Squeeze your finger, if needed, until blood is visible.
- 4. Return to your PDM; be sure your screen reads 'Apply a blood sample to the strip'.

Bring the strip to the blood at a slight angle.





# What if my levels are too low or high?

'LOW' or 'HIGH' blood glucose readings can indicate a potentially serious condition requiring immediate medical attention. If you get either a 'LOW treat your low BG' reading or a 'HIGH check for ketones' reading, first check and see if you feel any hypoglycemic or hyperglycemic symptoms. If you do not, recheck and perform a control solution test to ensure the Omnipod<sup>®</sup> System is working properly. If not, or if you feel any symptoms related to hypoglycemia or hyperglycemia, follow your healthcare professional's recommendations.

# Test Strip Do's and Don'ts

### DO:

- Only use FreeStyle Lite test strips and FreeStyle Control Solution with the PDM (other brands may produce inaccurate results)
- + Match the code on the PDM to the side of the vial
- + Use a slight angle to bring the test strip to the blood
- + Use only one edge of the strip per test
- + Add more blood to the strip if the PDM doesn't display 'Checking'
- + Only use each strip once
- + Throw away the used lancet in a puncture-resistant container and wash hands thoroughly

### DON'T:

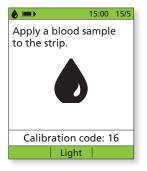
- Test your blood glucose while your PDM is connected via USB to a computer. This could result in a shock.
- + Press the strip against the test site
- + Scrape the blood onto the strip
- + Apply blood to the flat side of the strip
- + Apply blood to the strip when it is out of the meter
- + Put blood or other foreign objects into the test strip port
- + Pull strip away before you hear 1 beep or see 'Checking' on the screen
- + Use strips beyond the expiration date printed on the package, as this may give inaccurate result



Measurements obtained from alternate site testing should not be used to calculate insulin doses with the Omnipod\* Insulin Management System.

For more information about blood glucose testing, control solution testing and manual blood glucose test entry, see Chapter 4, Checking Your Blood Glucose, in your Omnipod\* Insulin Management System User Guide.

# **DELIVERING A BOLUS**



 Wash the finger with soap and water or an alcohol wipe and dry it completely. Prick the finger with the lancing device. Press Light to illuminate the test strip in low-light situations. Apply the blood sample to the test strip.



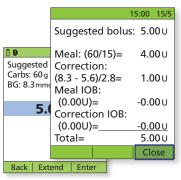
 If you are eating, press the Up/Down controller button to enter the correct number of carbs and then, press Enter.



7. Press Confirm to start the bolus.



2. When the blood glucose reading appears, press **Next** to continue.



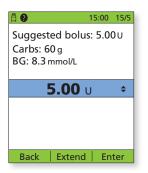
5. Press the **User info/support** button to view how the suggested bolus is calculated. Then, press **Close**.



8. The PDM screen will indicate when the bolus delivery has begun. If necessary, you may press **Cancel** to stop a bolus while it is being delivered. You do not need to remain near the PDM during delivery. The delivery time varies based on the size of the bolus dose. Once the bolus delivery begins, you may press and hold the **Home/Power** button to turn off the PDM screen.



- 3. If you are going to eat now, press Yes. OR
  - If you are not going to eat now, press No.



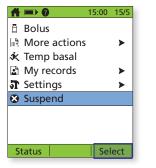
6. Press Enter to accept the suggested bolus. OR

Press **Extend** and follow the on-screen instructions to deliver a portion/percentage of the bolus immediately and the rest over a set period of time. *Only use the* **Extend** *option when directed by your healthcare provider.* If extended boluses are not part of your Diabetes Management Plan, the **Extend** option will not appear on the screen.

The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# **HOW TO SUSPEND INSULIN DELIVERY**

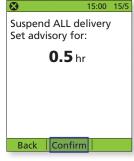
Sometimes, you may need to briefly stop the insulin delivery (for example, when editing an active basal program or changing the time or date).



1. Turn on the PDM. Press the **Home/Power** button and then, select **Suspend**.



2. Enter the length of time the suspension should last *(minimum 0.5 hour, maximum 2.0 hours)* and then, press **Enter**.

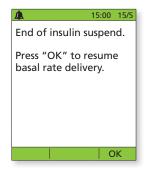


3. Press Confirm.

	~
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<b>50+</b> U	15:00 15/5				
Last BG	3.6 mmol/L 14:45 15/5				
Last bolus	1.00∪ 12:00 15/5				
IOB 0.00U					
INSULIN SUSPENDED					
Pod exp 13:48 18/5					
Home					

4. The Status screen will indicate that the insulin delivery has been suspended.



 The Pod will beep every 15 minutes until the end of the suspension period. At the end of the suspension period, a Pod advisory alarm will ring. At this time, turn the PDM on and press OK to resume the active basal program.

WARNING:

Insulin delivery will not resume until you press OK. If you do not press OK to resume insulin delivery, you could develop hyperglycemia (high blood glucose).

The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

### Important PDM tips and reminders.

These tips are intended for use only with PDM models CAT45E and CAT45F. The PDM model number is found on the back of the PDM next to the REF symbol.

### How to view insulin records.





1. On the home screen, select **My records**.

Back Select

	15:00 15/5	
Insulin totals:	15/5/18	
Bolus (52%)	23.90 U	
Basal (48%)	22.30 U	
Total daily	<b>46.20</b> ∪	
Back Bolus	Basal	

 The PDM provides a summary of today's information including total boluses, total basal and total daily doses. Use the Up/Down controller buttons to view the summary for previous.

### Important reminder



During the activation and priming of the Pod, the PDM and the Pod should be adjacent and in contact. Please refer to the Omnipod<sup>®</sup> Insulin Management System User Guide for a full set of instructions.

# How to view multiple-day BG trends.

A => 0	15:00	15/5
🛱 Bolus		
B More actions		≻
🖈 Temp basal		
My records		•
Settings		*
Suspend		
	_	_
Status	Sel	ect



1. On the home screen, select **My records**.



	13.00 13/5				
1-day (n=7)	15/5/18				
Avg BG: 6.1 mmol/L Min/max: 2.1/8.4 mmol/L					
BG goal: 4.4-7.8 mmol/L Within goal: 57% Above goal: 29% Below goal: 14%					
Back Trends	lict				

**3.** Press **Trends** to show the BG data for the past 7 days.

# 15:00 15: 7 day (n=52) Avg Reads/day: 7 Avg BG: 7.5 mmol/L Min/Max: 2.1/19.4 mmol/L

BG goal: 4.4-7.8 mmol/L Within goal: 48% Above goal: 33% Below goal: 19%

Back | 14 day | Grap

Enter start time for this basal Segment.

15:00

for end time.

4. Enter the start time and

then, press Next and repeat

 Continue pressing the middle soft key to show the trends for previous 14, 30, 60 and 90 days.

### How to change existing basal rate.

NOTE: Insulin delivery must be suspended before changing basal rates.

# 🖦 0	15:00	15/5
Bolus		
Reactions		>
🛠 Temp basal		
My records		>
Settings		->-
Suspend		
	_	
Status	Sel	ect

1. On the home screen, select **Settings**.



5. Enter the **basal rate** for the edited segment and then, press **Enter**.

'		
	15:00	15/5
Basal Programs		
Presets		►
System setup		►
Vibration		
Back	Sol	oct

2. Select Basal Programs.

<u>~</u>	15:00 15/5
basal 2:	
Segment	U/hr
[add new]	
00:00-08:00	0.60
08:00-15:00	0.80
15:00-24:00	0.75
Daily basal: 17.	15 <u>u</u>
Cancel New	Save

6. Press Save



 Select the basal program to be edited. On next screen, select the segment to be edited and then, press Edit.



 Press Save. For additional edits, repeat steps 3-8.

The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# How to change correction factors.



1. On the home screen, select **Settings**.

<b>31</b> 1	5:00	15/5		
Review all settings				
Target BG				
Min BG for calcs:				
3.9 mmol/L				
IC ratio				
Correction factor				
Reverse correction: On				
Insulin action: 4.0 hr				
Back	Sel	ect		

5. Select Correction factor.



2. Select System setup.



 Select add new or choose Segment and hit Edit.
 On the next screen, enter the start time and then, press Next and repeat for end time.

ភ	15:00	15/5
Date/time		≻
Bolus/basal/calcs		•
Alerts/reminders	;	►
BG meter		►
PDM options		►
Diagnostics		►
Back	Sel	ect
	_	

3. Select Bolus/basal/calcs.



15:00	15/5			
rgets	•			
Bolus increment: 0.10 U				
0 U				
U/hr				
Sel	ect			
	rgets t: 0.10 0 U U/hr			

4. Select Ratios/factors/targets. NOTE: Bolus calcs must be 'on'.

7.	Enter the	correction	factor	and	then,	press	Next.

 Repeat steps 6-7 to add or edit segments (up to 8 total segments). Press **Done** and then, **Save** when you are finished modifying the time segments.

# How to change IC ratio or insulin action (duration).

A => 0	15:00	15/5
🛱 Bolus		
More actions		>
🔆 Temp basal		
My records		>
Settings		•
Suspend		
	_	
Status	Sel	ect

1. On the home screen, select **Settings**.

### To change IC ratio.



A. Select IC ratio.



2. Select System setup.

15:00 15

g carb/U

15

Insulin to carb (IC) ratio:

Edit

and hit Edit.

B. Select add new or

choose Segment

On the next screen.

enter the start time

and then, press

Next and repeat for end time.

Segment

add new]

00:00-24:00



3. Select Bolus/basal/calcs.



 Select Ratios/factors/ targets. NOTE: Bolus calcs must be 'on'.

### To change insulin action.

 Isou
 15/5

 Review all settings
 Target BG

 Min BG for calcs:
 3.9 mmol/L

 IC ratio
 Correction factor

 Correction factor
 Reverse correction: On

 Insulin action: 4.0 hr
 Select

A. Select Insulin action.



B. Use the Up/Down controller buttons to change the duration of insulin action and then, press Enter.



Segment: 00:00-24:00

Enter IC ratio. 1 unit of

**20** g carb

C. Enter IC ratio and

then, press Next.

Press Done and then,

finished modifying the

Save when you are

time segments.

nsulin covers

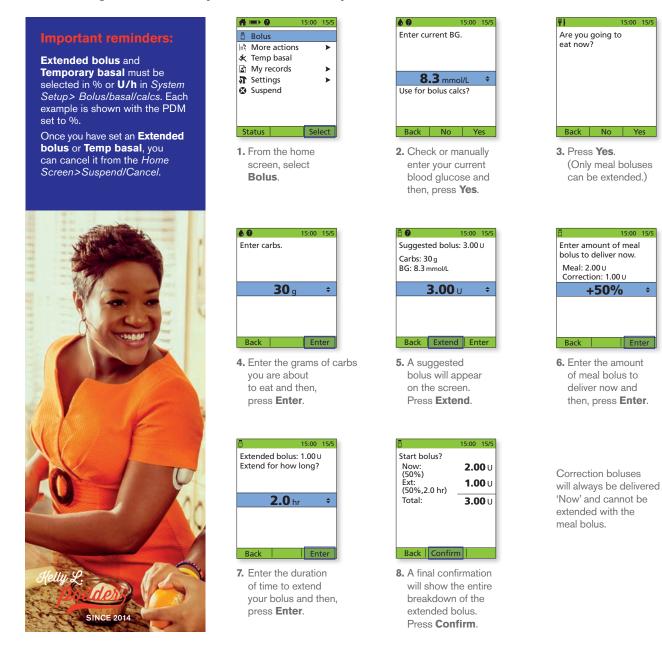
The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# **OMNIPOD® SYSTEM ADVANCED FEATURES**

### How to use the extended bolus feature.

#### When to use:

This feature is most commonly used for high-fat and/or high-protein meals such as pizza, burgers or fried foods when the digestion of carbohydrates could be delayed.



### WARNING:

When using the extended bolus function the user should check their blood glucose levels more frequently to avoid hypoglycemia or hyperglycemia.

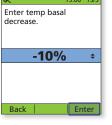
The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# How to set a temporary basal rate.

#### When to use:

A temporary basal rate lets you adjust your background insulin for a predetermined period of time. This feature is best used to account for a temporary change in a daily routine, such as physical activity or times of illness. Temporary basal rates can be set for durations of 30 minutes to 12 hours; once the time limit is reached, the Pod returns to the active basal program.





1. From the home screen, select **Temp basal**.

 Enter the % or U/h change for the temp basal and then, press Enter.

# Change: -10% 2.0 hr \$

 Enter the duration for the temporary basal in increments of 30 minutes and then, press Enter.



 A summary of your temporary basal details will appear on the screen for review. Press Confirm.

# How to create additional basal programs.

### When to use:

Please consult with your healthcare professional prior to creating additional basal programs. Different basal programs are commonly used for entire days of your common routine (e.g., weekends vs. work days).



ADVANCED FEATURES

# **OMNIPOD® SYSTEM ADVANCED FEATURES**

### How to use the temp basal presets.

#### When to use:

It is best used for 'temporary' routine activities, such as an exercise class that occurs twice a week. The PDM can store up to 7 temporary basal presets. You will be able to access your temp basal presets when you select **Temp basal** from your home screen.

#### Important reminders:

Presets are a quick way to get many of your Pod actions complete. If you find yourself eating the same foods or setting the same temp basal rates, presets can be a real time saver. On any preset, you will have the option to rename your entry for even more personalisation.



1. From the home screen, select **Settings**.



2. Select Presets









 Select [add new] and then, press New.



 Enter the duration for the temp basal preset and then, press Next.



5. Keep the default name or rename, for example, Exercise. Press **Save**.



8. A summary of the temp basal preset you just created will appear on the screen. Press **Save**.



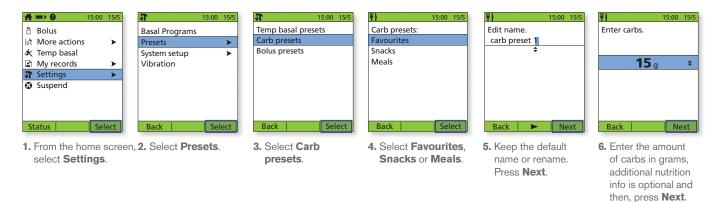
 If temp basals are configured as percentages (%), select Increase or Decrease to specify whether this preset will deliver more or less insulin than the active basal program.

Use the **Up/Down** button to set the desired % or U/h change for the temporary basal present. Press **Next**.

# How to use the carbohydrate presets.

### When to use:

It is best used for easy access to favourite food items, snacks or meals that you eat frequently. You will be able to access your carb preset during the bolus calculator process.



# How to use the bolus presets.

### When to use:

Bolus presets can only be used if your bolus calculator is **OFF**. This feature is best for those utilising set bolus amounts at their meals. You will be able to access your bolus preset when you select **Bolus** from the home screen.



The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# **HYPOGLYCEMIA**

A blood glucose (BG) less than 4 mmol/L or symptoms of hypoglycemia as described below.

Always follow your healthcare provider's guidelines. The below guidelines come from Diabetes Canada Lows and Highs: Blood Sugar Level. For more information visit: http://guidelines.diabetes.ca/docs/patient-resources/ lows-and-highs-blood-sugar-levels.pdf.

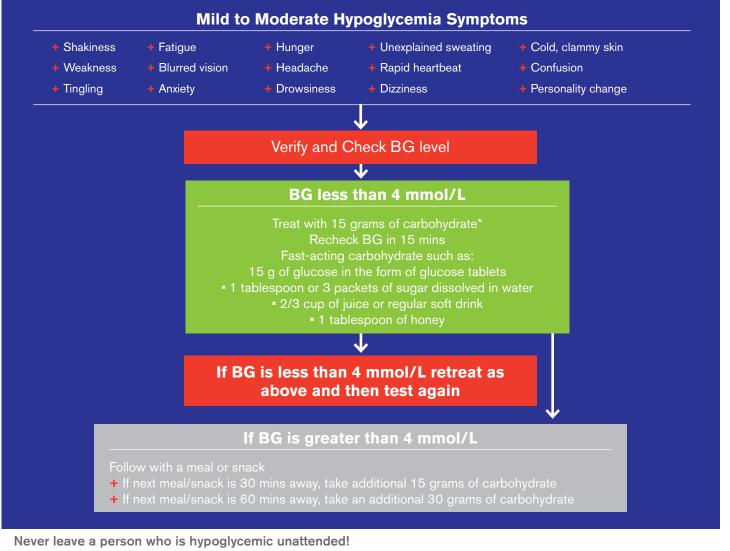
### **Action Plan**

Never ignore the signs of low blood glucose, no matter how mild. If left untreated, severe hypoglycemia may cause seizures or lead to unconsciousness. If loss of consciousness, inability to swallow glucose treatment or seizures are experienced or observed take the following action immediately:

- + Give glucagon as instructed by healthcare provider
- + Notify healthcare provider

+ Call 911

+ Suspend insulin delivery



# IMPORTANT NOTES: Make sure your blood glucose is at least 5.0 mmol/L before driving or working with dangerous machinery or equipment. Even if you cannot check BG, do not wait to treat symptoms of hypoglycemia. Avoid hypoglycemia unawareness by checking your BG more frequently.

The above general guidelines are drawn from Diabetes Canada. For further guidance please consult with your healthcare provider for individualized advice.

# Troubleshooting

### **Check PDM Settings**

- + Is the correct basal program active?
- + Is the PDM time set correctly?
- + Is the temp basal (if active) correct?
- + Are target blood glucose levels correct?
- + Is the insulin sensitivity factor (or correction factor) correct?
- + Is the insulin-to-carb ratio correct?

Consult your healthcare provider for guidance about adjusting settings on your PDM.

🗩 🛿 🕻 50+U	J 3:00	p 5/1
Last BG	10.9 m	mol/L
Last bolus	3:00p 2.90 u 3:00p	,
IOB 2.90 u		
<ul> <li>Temp ba</li> <li>0.25 U/hi</li> </ul>		emains
Pod ex	p 1:48p	5/18
Home		

### **Review Recent Activity**

#### **Physical activity**

- + Has your exercise been unusually long or strenuous?
- + Have you been unusually physically active? (e.g., extra walking, housework, heavy or repetitive tasks, lifting or carrying?)
- + Did you use a decreased temp basal during this activity?
- + Did you consume carbs before, during and/or after activity?

#### Meals/Snacks

- + Did you count the carbs correctly—including subtracting significant fiber?
- + Did you bolus with food?
- + Did you consume alcohol?

Consult your Omnipod<sup>®</sup> Insulin Management System User Guide for additional information.

# SICK DAY MANAGEMENT

# **Action Plan**

Discuss Sick Day Management with your healthcare provider. Always follow your healthcare provider's guidelines for your individual needs. Below are only general guidelines.

### **Emergency situations**

- + For BG of 13.8 mmol/L or more see: Hyperglycemia Action Plan
- + For BG of 4.0 mmol/L or less (and/or symptoms) see: Hypoglycemia Action Plan

### Throughout an illness

If you have a cold, stomach virus, toothache or other minor illness:

- + Check blood glucose more often (every 2-4 hours or at least 4 times a day)
- + Check ketones—any time BG is 13.9 mmol/L or more
- + Use temp basal as directed by your healthcare provider
- + Stay hydrated
- + Monitor urine output
- + Keep a record of information (BG, ketone checks, fluids, and time/amount of urine, vomiting, diarrhea, temperature)
- + Continue taking insulin, even if not eating as usual

# Call your healthcare provider immediately if you have:

- + Persistent nausea and/or if you are vomiting/or have diarrhea over two hours
- + Difficulty breathing or sever stomach pain
- + Unusual behavior (such as confusion, slurred speech, double vision, inability to move, jerking movements)
- Persistent high BG and/or positive ketones after treating with extra insulin and drinking fluids
- + Persistent low BG that is not responsive to decreasing insulin and drinking carbohydrate-containing fluids
- + A fever above 100.5°F
- + Moderate to large urine ketones or ≥ 1.0 mmol/L blood ketones

IMPORTANT NOTE: The symptoms of DKA (diabetic ketoacidosis) are much like those of the flu. Before assuming you have the flu, check your BG to rule out DKA. Consult your healthcare provider for further information. Always consult with your healthcare provider when experiencing hyperglycemia and sick days. Always follow your healthcare provider's guidelines.

The above general guidelines are drawn from Joslin Diabetes Center. For further guidance please consult with your healthcare provider for individualized advice.

# **HYPERGLYCEMIA**

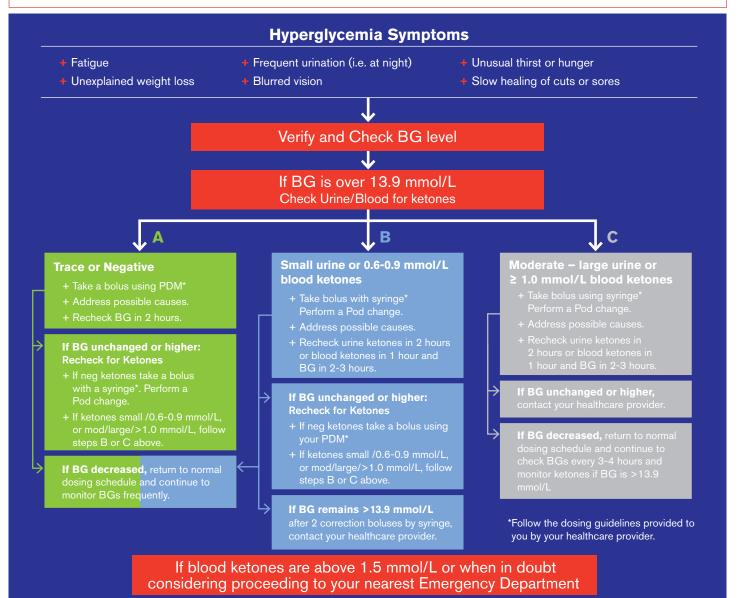
Blood Glucose (BG) reading of 13.9 mmol/L or more

Always follow your healthcare provider's guidelines. The below guidelines are derived from The Joslin Diabetes Center's and Diabetes Canada 2018 Clinical Practice Guidelines recomendations and may differ from your own healthcare providers guidelines.

# **Action Plan**

There are several factors that can cause hyperglycemia. Common causes include illness, stress, infection, and missed insulin doses. As a Podder<sup>™</sup>, only rapid-acting insulin is used in your Pod, so you have no long-acting insulin in your body. If an occlusion or other interruption of insulin delivery occurs, your blood glucose may rise rapidly. It is important you do not ignore the signs and symptoms of hyperglycemia.

If you are experiencing persistent nausea and/or vomiting, or have diarrhea over two hours, contact your healthcare provider immediately.



The above general guidelines are drawn from Joslin Diabetes Center. For further guidance please consult with your healthcare provider for individualized advice.

# Troubleshooting

**Check PDM Settings** 

### Check status screen

- + Last bolus: was the bolus too small?
  - Was the bolus timing correct?
  - Did you account for high-protein or high-fat meal?
- + **Basal program:** Is the proper basal program running?
- + Temp basal: Do you have a temp basal running that you should have turned off?



### Check my records

+ Alarm history: Did you ignore or not hear alarms that should have been addressed?

### Check Pod

### Check your cannula through the viewing window

- + Did the cannula slip out from under your skin?
- + Is there blood in the cannula?
- + Is there redness, drainage, or other signs of infection around the cannula?

If YES, change your Pod. If you suspect an infection, then call your healthcare provider.

### Check your infusion site

- + Is there redness or swelling around the Pod and adhesive?
- + Is insulin leaking from your infusion site or is there odor of insulin?

If YES, change your Pod. If you suspect an infection, then call your healthcare provider.

### Check your adhesive dressing

- + Is the adhesive dressing coming loose from your skin?
- + Is the Pod becoming detached from the adhesive dressing?

If YES, and if cannula is still inserted properly, you may tape down the Pod or adhesive to prevent further detachment.

If cannula is no longer under your skin, change your Pod.

### Check your insulin

- + Is the insulin used expired?
- + Has the insulin used been exposed to extreme temperatures?
- If YES, change Pod using a new vial of insulin.



Hyperglycemia symptoms can be confusing. Always check your BG before treating your hyperglycemia. Consult with your healthcare provider.

Caution: Consult User Guide.

# **CUSTOMIZING REMINDERS AND ALERTS**

# Get to know your Omnipod<sup>®</sup> System reminders.

A **reminder** is a notification you can turn on or off at any time and customize to fit your needs. Your Omnipod<sup>®</sup> System has a number of different reminders:

### + Blood glucose (BG) reminders

Program your Personal Diabetes Manager (PDM) to remind you to check your blood sugar levels every time you deliver a bolus dose.

### + Bolus reminders

Your PDM can remind you if you haven't delivered a meal bolus within a specific time frame.

### + Program reminders

Your Pod will automatically beep to let you know that a temporary basal and/or extended bolus program is in process.

### + Confidence reminders

Your PDM is preset to beep and therefore, you can know when certain programs have started and finished, including:

- Bolus delivery
- Extended bolus
- Temporary basal

### + Custom reminders

Enter text reminders into your PDM to be delivered when you want them.

# Get to know your Omnipod<sup>®</sup> System alerts.

An *alert* is a notification you can adjust based on your needs. There are 4 different kinds of alerts on your Omnipod<sup>®</sup> System:

### + Pod expiration alerts

When your Pod is about to expire (nearing the 72 hour expiration time), you'll hear 2 sets of beeps every minute for 3 minutes. This pattern will repeat every 15 minutes until you press OK on your PDM.

### + Low reservoir alerts

So you can plan ahead to change your Pod and make sure you have enough insulin; your Pod will alert you when your insulin reaches a certain level.

### + Auto-off alerts

Program your PDM to alert you if it hasn't received a Pod status within 1 to 24 hours.

### + Blood glucose meter alerts

If there is an error with your blood glucose meter, test strip, sample or results, your PDM will beep and display an error message number. To learn more about addressing specific error messages, Alerts and Alarms, refer to your Omnipod<sup>®</sup> System User Guide.



#### 🔨 WARNING:

The Low reservoir alert will escalate to an Empty reservoir hazard alarm when insulin is depleted. Be sure to respond to alert when it first occurs.
 The Auto-off alert will escalate to a hazard alarm if ignored, and will result in the deactivation of your active Pod. Be sure to respond to the alert when it occurs.

PDM screens may vary based on user settings and country.

# Programming reminders and alerts.

To program all reminders and alerts except bolus reminders and custom reminders, follow these simple steps. For more information about programming Bolus reminders and Custom reminders, see Chapter 6 – using the Personal Diabetes Manager in your Omnipod<sup>®</sup> Insulin Management System User Guide.

1. On the home screen, choose **Settings**. Then, press **Select**.

A	<b>••• 0</b>	15:00	15/5
ā	Bolus		
l≡ <sup>0</sup>	More actions		►
×	Temp basal		
<b>.</b>	My records		>
T	Settings		•
۲	Suspend		
St	atus	Sel	ect

2. Choose System setup and then, press Select.

จา	15:00	15/5
Basal Programs Presets		*
System setup		•
Vibration		
Back	Sel	ect

3. Choose Alerts/reminders and then, press Select.



- Choose the option you want to set and then, press Select.
- Choose the desired option or set the desired value and then, press Select or Enter.



# Understanding alarms.

### Get to know your Omnipod® System alarms

An alarm is a notification to make you aware of serious, or possibly serious, conditions.

When an alarm goes off, your PDM will display a message with instructions on what to do. If you ignore an alarm, your Pod could be deactivated—so be sure to respond to alarms promptly.

There are 2 types of alarms: *advisory* alarms and *hazard* alarms.

### Advisory alarms

Advisory alarms beep intermittently to let you know about a condition that requires your attention.

When you hear an advisory alarm, turn on your PDM to see the Status screen. A message will appear describing the alarm and informing you about what to do next.

It's important to resolve an advisory alarm as quickly as possible. If you wait too long to address the alarm, it can escalate to a hazard alarm.

### Hazard alarms

Hazard alarms are a continuous tone to let you know when the Pod is in a very serious condition or something is wrong with the PDM.

When a hazard alarm goes off, all insulin delivery stops. To avoid hyperglycemia, it's extremely important to follow the instructions on your PDM to resolve the issue quickly:

Step 1: Press OK on your PDM to silence the alarm.

**Step 2:** Deactivate and remove your current Pod.

**Step 3:** Activate and apply a new Pod.

To learn more about alarms and how to handle them, see Chapter 9, Alarms, Notifications and Other Messages, in your Omnipod® Insulin Management System User Guide.

The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

# **MAKING THE MOST OF YOUR PDM**

# What happens if ...?

You already know that your PDM enables you to live a tubeless life, delivering basal and bolus insulin doses remotely and wirelessly\* to your Pod. However, from time to time, you may find yourself asking the question 'Why does my PDM do that?'.

The Insulet Customer Care Team has heard it all, and we've compiled the top 3 areas our Podders<sup>™</sup> ask or comment about the most. Read on to understand how to use your PDM to its maximum potential.

# Your PDM battery.

The PDM requires two AAA alkaline batteries to perform at the optimal level. If you are using another type of battery, your battery life could suffer and ultimately damage the PDM. AAA alkaline batteries are readily available at most pharmacies, supermarkets or electrical shops.

Your PDM automatically takes steps to maximise the battery life when running low. You'll first see the Low PDM battery alert and then, your PDM will:

- + Turn off your vibration alert (if set)
- + Disable the bright mode
- + Disable the test strip port light

Once you replace your battery, these functions resume.

### PDM communication.

One of the key benefits of the Omnipod<sup>®</sup> System is the wireless<sup>\*</sup>, tubeless communication between the PDM and the Pod. This means that you don't have to keep your PDM next to you all the time. However, there are a few actions that require your PDM and Pod to be in close proximity to communicate.

Here are a few ways you can help that 'conversation':

- + When you deactivate a Pod, it can take a few moments for the Pod to fully deactivate. Often you'll see the 'Please Wait' screen while your Pod and PDM communicate. Make sure you wait until the Pod is fully deactivated before you attempt to activate a new Pod.
- + If you are helping deliver a bolus to someone in your care (or changing the basal rate), remember that the PDM and Pod need to be within 1.5 metres of each other. Once the confirmation screen appears and the pod has begun bolus delivery the PDM can move out of range and the pod will continue the action it was instructed to. Once a basal rate has been changed and insulin delivery has been resumed, the PDM does not need to be within 1.5 metres for the pod to deliver the approrpiate basal rate.

\*At start up the PDM and Pod should be adjacent and touching, either in or out of tray to ensure proper communication during priming. At least1.5 metres during normal operation.

The values shown here are for illustrative purposes only. Actual screens may vary based on user settings and country. Consult with your healthcare professional before using these advanced features. Your healthcare professional can also provide you with your own personalised recommendations.

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Low PDM batteries Check batteries soon.



# Your PDM's environment.

Your Pod can go anywhere you go, but your PDM requires a bit more protection. Following the below guidelines will help you keep your PDM functioning at peak performance!

- + Your Pod is waterproof\* but your PDM isn't make sure to keep it dry.
- + Like all electronics, your PDM needs to be maintained at a moderate temperature. Avoid storing it in extreme heat or cold (such as a hot car or a fridge).
- + While your PDM has a 5-year limited warranty, years of wear and tear can take a toll on your PDM screen in the form of nicks and small scratches. You can help save the integrity of your screen and the overall body of your PDM by keeping it in your storage bag.

For more information, call your local Insulet Customer Care Team 24/7.

# Insuring your PDM.

We highly recommend insuring your PDM. Whilst your PDM is covered under a limited warranty for technical failures, accidental damage or breakage are not covered.

**Tip:** Check to see if your PDM is covered by any of your current insurance policies before taking out a separate insurance.

# Helpful tips from Podders<sup>™</sup>.

As the Insulet Customer Care Team, we pride ourselves on helping our customers navigate the Omnipod<sup>®</sup> System and use it successfully to live life on their terms. However, occasionally, we find ourselves taking notes from our Podders<sup>™</sup>, who have discovered ways to bring their Omnipod<sup>®</sup> System success to the next level. Check out these helpful tips:

- + Try taking a picture of your program settings with your smartphone and keeping it. This way if you don't download your PDM regularly at home, you always have a record of your settings.
- + What happens if you misplace your PDM? Put your phone number as your ID, so that anyone who may find it can easily return it to you.

# TRAVELLING WITH YOUR OMNIPOD® SYSTEM

Going on a holiday with your Omnipod<sup>®</sup> System is easy. The following information will help you plan your trip.

# Holiday Checklist.

### Medical supplies and equipment

- □ Sealed Pods enough to cover your whole holiday, including spares, just in case
- Insulin vials as above (remember to place in a clear plastic bag if you are carrying in your hand luggage)
   PDM
- □ Extra, new PDM batteries (AAA alkaline)
- □ Plenty of alcohol prep swabs
- □ Back-up insulin pens (for long and short-acting insulin)
- □ Insulin cartridges/vials for your back-up insulin pens
- □ Spare syringes or pens/needles
- □ Back-up blood glucose meter (in addition to the one integrated into the PDM)
- □ Blood glucose test strips, for both meters
- □ Ketone testing devise and strips
- □ Lancing device and lancets
- □ Glucose tablets or another fast-acting source of carbohydrate
- □ Glucagon emergency kit and written instructions for administering an injection if you are unconscious

### Documentation

- □ Travel letter from your healthcare professional (see example below) covering the medical supplies and equipment you are required to travel with
- □ Prescriptions for all the medical supplies that you are carrying
- □ List of your latest Omnipod<sup>®</sup> System settings basal rates/target BG/ratios
- □ Travel insurance
- □ Emergency contact details

### Other

If traveling to a different time zone, remember to adjust the time on your PDM to the local time at your destination. This will ensure your basal rate is delivered correctly. For further guidance on travel, please speak to your health care professional.

### Further travel advice.

Your Pod is waterproof\*, so you are free to go swimming and even to dive without disrupting your insulin delivery. Remember to rinse your Pod with fresh water afterwards and gently pat dry. You should check regularly that the Pod is still firmly attached and in place.

It is important to protect your insulin from extreme temperatures that can impact its effectiveness. Remember to keep your Pod out of direct sunlight and avoid saunas, steam rooms and hot tubs.

\*IP28: 7.6 metres for up to 60 minutes for the Pod. The PDM is not waterproof.

# **EXAMPLE TRAVEL LETTER**

### To whom it may concern,

I hereby confirm that [insert full name]

, born [insert DOB]

has insulin dependent diabetes and must carry a supply of insulin and other medicinal equipment at all times, including:

- + Omnipod<sup>®</sup> System Pods and insulin vials
- + Omnipod<sup>®</sup> System PDM (plus spare and extra AAA batteries)
- + Back-up insulin pens (plus insulin cartridges/vials)
- + Additional spare syringes or pens/needles
- + Blood glucose meter and test strips
- + Ketone testing devise and strips
- + Lancing device and lancets
- + Hypoglycemia treatment
- + Other:

Yours faithfully,

Signature

Date

Healthcare professional's name

Address

Postal code

Phone number





**ADDITIONAL NOTES** 







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