

# Insulin Planning Guide

Understanding your insulin regimen — basal, bolus, and correction doses

## Types of Insulin

Type	Examples	Onset	Peak	Duration
Rapid-acting	Humalog, Novolog, Apidra, FIASP, Lyumjev	5–15 min	30–90 min	3–5 hrs
Short-acting	Regular (Humulin R, Novolin R)	30–60 min	2–4 hrs	5–8 hrs
Intermediate	NPH (Humulin N, Novolin N)	1–3 hrs	4–8 hrs	12–18 hrs
Long-acting	Lantus, Basaglar, Toujeo, Tresiba, Levemir	1–2 hrs	Minimal	20–42 hrs
Ultra long-acting	Tresiba (degludec)	~1 hr	No peak	42+ hrs

## Basal Insulin (Background)

Your basal insulin (long-acting) keeps blood sugar stable overnight and between meals. It works continuously at a low level. If your fasting blood sugar is consistently too high or too low, your basal dose may need adjustment.

## Bolus Insulin (Mealtime)

Your bolus insulin (rapid-acting) is taken with meals to handle the carbohydrates you eat. Take it just before eating, or within 15 minutes of starting your meal. If using Regular insulin, take it 30 minutes before eating.

## Correction Doses

A correction dose is extra rapid-acting insulin taken when your blood sugar is higher than your target. Your doctor will give you a correction factor (also called insulin sensitivity factor). For example, if 1 unit lowers blood sugar by 50 mg/dL and your sugar is 250 with a target of 100, your correction dose would be  $(250-100) \div 50 = 3$  units.

## My Insulin Plan

Insulin	Name/Brand	Dose	When
Basal (long-acting)			
Bolus (mealtime)			Before meals
Correction factor	1 unit lowers sugar by:	___mg/dL	As needed

Blood sugar target	Fasting: ____ mg/dL	2hr post-meal: ____ mg/dL	Bedtime: ____ mg/dL
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