Instructions for Healthcare Professionals:
If patients become ill and are unable to maintain adequate fluid intake, or have an acute decline in renal function (e.g. due to gastrointestinal upset or dehydration), they should be instructed to hold medications which will:

A) Increase risk for a decline in kidney function:
• Angiotensin-converting enzyme inhibitor
• Angiotensin receptor blockers
• Direct renin inhibitors
• Non-steroidal anti-inflammatory drugs
• Diuretics
• SGLT2 inhibitors

B) Have reduced clearance and increase risk for adverse effects:
• Metformin
• Sulfonylureas (gliclazide, glimepiride, glyburide)

S	sulfonylureas
A	ACE-inhibitors
D	diuretics, direct renin inhibitors
M	metformin
A	angiotensin receptor blockers
N	non-steroidal anti-inflammatory
S	SGLT2 inhibitors

Please complete the following card and give it to your patient.

Patients should be instructed that increased frequency of self blood glucose monitoring will be required and adjustments to their doses of insulin or oral antihyperglycemic agents may be necessary.

Instructions for Patients
When you are ill, particularly if you become dehydrated (e.g. vomiting or diarrhea), some medicines could cause your kidney function to worsen or result in side effects.

If you become sick and are unable to drink enough fluid to keep hydrated, you should **STOP** the following medications:

• Blood pressure pills
• Water pills
• Metformin
• Diabetes pills
• Pain medications
• Non-steroidal anti-inflammatory drugs (see below)

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Please be careful not to take non-steroidal anti-inflammatory drugs (which are commonly found in pain medications (e.g. Advil) and cold remedies).

Please check with your pharmacist before using over-the-counter medications and discuss all changes in medication with your healthcare professional.

Please increase the number of times you check your blood glucose levels. If they run too high or too low, contact your healthcare professional.

If you have any problems, you can call:

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