



Erratum: 16. Diabetes Care in the Hospital: *Standards of Care in Diabetes—2024* Abridged for Primary Care Professionals. Clin Diabetes 2024;42:222 (doi: 10.2337/cd24-a016)

<https://doi.org/10.2337/cd24-er03>

A table on the perioperative care of people with diabetes in the abridged version of section 16 of the American Diabetes Association's *Standards of Care in Diabetes—2024* contained typographical errors. The corrected version is as follows.

Perioperative Care

A1C and glucose goals	<ul style="list-style-type: none"> • Elective surgery A1C goal: <8% (63.9 mmol/L) • Blood glucose goal within 4 hours of surgery: 100–180 mg/dL (5.6–10.0 mmol/L)
Medication adjustments	<ul style="list-style-type: none"> • Hold metformin on the day of surgery. • Discontinue sodium-glucose cotransporter 2 inhibitors 3–4 days before surgery. • Hold other oral glucose-lowering agents the morning of the surgery or procedure. • There are few data on the safe use and/or influence of glucagon-like peptide 1 receptor agonists on glycemia and delayed gastric emptying in the perioperative period. • Individualize plan based on clinical scenario and procedure/surgery.
Insulin therapy adjustments	<ul style="list-style-type: none"> • Give half of NPH dose or 75–80% of long-acting analog insulin or adjust insulin pump basal rates based on diabetes type and clinical judgment.

The online version of this article (<https://doi.org/10.2337/cd24-a016>) has been updated to reflect this change.