



Omnipod® 5 Automated Insulin Delivery System

# User Guide for iPhone®

## INDICATIONS FOR USE

The **Omnipod® 5 ACE Pump (Pod)** is intended for the subcutaneous delivery of insulin, at set and variable rates, for the management of diabetes mellitus in persons requiring insulin. The Omnipod 5 ACE Pump is able to reliably and securely communicate with compatible, digitally connected devices, including automated insulin dosing software, to receive, execute, and confirm commands from these devices. The Omnipod 5 ACE Pump is intended for single patient, home use and requires a prescription.

**SmartAdjust™ technology** is intended for use with compatible integrated continuous glucose monitors (iCGM) and alternate controller enabled (ACE) pumps to automatically increase, decrease, and pause delivery of insulin based on current and predicted glucose values. SmartAdjust™ technology is intended for the management of type 1 diabetes mellitus in persons 2 years of age and older and type 2 diabetes mellitus in persons 18 years of age and older. SmartAdjust™ technology is intended for single patient use and requires a prescription.

The **SmartBolus Calculator** is software intended for the management of diabetes in persons aged 2 and older requiring rapid-acting U-100 insulin. The SmartBolus Calculator calculates a suggested bolus dose based on user-entered carbohydrates, most recent sensor glucose reading (or blood glucose reading if using fingerstick), rate of change of the sensor glucose (if applicable), insulin on board (IOB), and programmable correction factor, insulin to carbohydrate ratio, and target glucose value. The SmartBolus Calculator is intended for single patient, home use and requires a prescription.

## COMPATIBLE INSULINS

The Omnipod 5 Automated Insulin Delivery System is compatible with the following U-100 insulins: NovoLog®, Humalog®, and Admelog®.

## CONTRAINDICATIONS

The Omnipod 5 System is NOT recommended for people who:

- Are unable to monitor glucose as recommended by their healthcare provider
- Are unable to maintain contact with their healthcare provider
- Are unable to use the Omnipod 5 System according to instructions
- Are taking hydroxyurea as it could lead to falsely elevated sensor glucose values and result in the over-delivery of insulin that can lead to severe hypoglycemia
- Do NOT have adequate hearing and/or vision to allow recognition of all functions of the Omnipod 5 System, including alerts, alarms, and reminders

Device components including the Pod, Sensor, and Transmitter must be removed before Magnetic Resonance Imaging (MRI), Computed Tomography (CT) scan, or diathermy treatment. In addition, the Controller and smartphone should be placed outside of the procedure room. Exposure to MRI, CT, or diathermy treatment can damage the components.



# WELCOME TO OMNIPOD® 5

## New Omnipod 5 User

Receiving training and understanding the Instructions for Use are needed BEFORE using your new Omnipod 5 System. Follow these steps to get started:

### 1. Get Started

Visit: [omnipod.com/setup](https://omnipod.com/setup) to create your account, link your data management accounts, and learn about training options.

### 2. Receive Training

Learning how to use your Omnipod 5 System the correct way is important for safe and effective use. Different training methods to learn how to use your system are available based on your and your healthcare provider's preferences.

### 3. Freedom Is Yours!

You'll then be ready to enjoy the benefits and flexibility of your new Omnipod 5 System.

**If you have questions, please contact Customer Care at 1-800-591-3455 for support 24 hours a day, 7 days a week.**



## To access the complete Omnipod 5 System Technical User Guide

At any time while using Omnipod 5, you can access or request the *Omnipod 5 Technical User Guide for iPhone*.

1. Download or print a digital copy:
  - Visit [omnipod.com/guides](https://omnipod.com/guides)
  - Scan this QR code with your smartphone.



2. Request to receive a free printed copy:
  - Online request form at [omnipod.com/guides](https://omnipod.com/guides)
  - Call in to request: 800-591-3455



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# 1

## Omnipod 5 System Overview

### The Omnipod 5 App

- On provided Controller or your compatible iPhone
- Sends commands to the Pod
- Displays glucose and insulin information from the Pod
- Used to issue meal and correction boluses

### The Pod

- Delivers insulin to your body
- Receives commands from the Omnipod 5 App
- Receives sensor glucose values from the Dexcom G6 Sensor
- Sends sensor glucose values to the Omnipod 5 App
- Automatically adjusts insulin delivery in Automated Mode

### The Dexcom G6 Sensor

- Sends sensor glucose values to the Pod and to the Dexcom G6 app
- Does not communicate directly with the Omnipod 5 App
- Cannot communicate with Dexcom G6 receiver while paired with Pod

For Sensor-specific information, refer to your *Dexcom G6 CGM System Instructions for Use*.





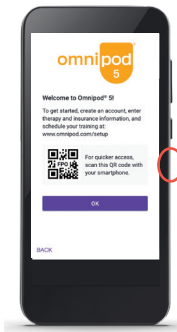
## 2

## Set Up the Omnipod 5 App

### Omnipod 5 App Setup

Before you set up your Omnipod 5 System, choose whether you want to use the Omnipod 5 App on the provided Controller or a compatible personal smartphone. Connectivity to cellular data or Wi-Fi is important when using the Omnipod 5 System. With either device, make sure to connect to your home or work Wi-Fi network. For a list of compatible smartphones and operating systems go to [omnipod.com/compatibility](http://omnipod.com/compatibility).

Initial pump therapy settings, provided by your healthcare provider, are needed to set up your Omnipod 5 App.



If using the provided Controller:

- Hold down the Power button to turn it on.

OR

If using your compatible personal smartphone:

- Download the Omnipod 5 App on the App Store.
- Ensure Bluetooth® is turned ON on your compatible smartphone.
- In order to use Omnipod 5 App on a compatible smartphone, you must first log into the Omnipod 5 App on the provided Controller.





The Omnipod 5 App will guide you through setup. Make sure to read each screen and carefully enter information.

An Omnipod ID is needed for setup. You will be prompted to sign in or be directed to create a new ID.

Setup is complete after entering your personalized initial pump therapy settings (from your healthcare provider).

## Dexcom not included

You can set up & start your Dexcom G6 before or after setting up your Omnipod 5 App. Please consult the *Dexcom G6 Instructions for Use* for more information.

**Note:** A Dexcom receiver cannot be used with Omnipod 5.

### 3

## Set Up a New Pod

### Prepare

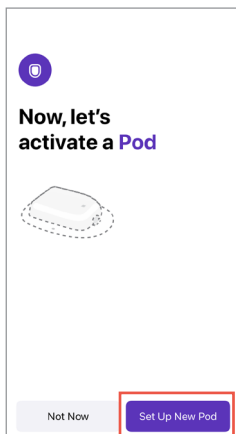
#### Gather the following supplies:

- Omnipod 5 Controller or smartphone
- Unopened Omnipod 5 Pod
- Alcohol prep swabs
- A vial of room temperature rapid-acting U-100 insulin approved for use with Omnipod 5

Wash your hands with soap and water.

Clean the top of the insulin vial with an alcohol prep swab.

On the Omnipod 5 App, locate the Pod activation screen.



After entry of settings in first time setup, tap **Set Up New Pod**.

OR



From Home Screen:

- Tap Pod Icon.
- Tap **Set up New Pod**.
- Follow on screen instructions.



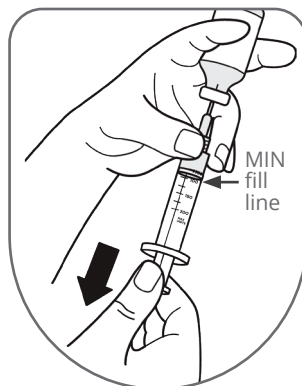
## Fill the Pod

### Prepare the fill syringe

- Remove the fill needle and syringe from the Pod's tray. Keep the Pod in its tray during setup. Twist the needle clockwise onto the top of the syringe for a secure fit. Do not use any other type of needle or filling device besides the syringe provided with each Pod.
- Remove the protective needle cap by carefully pulling it straight off the needle.

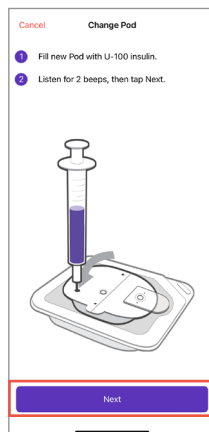
### Fill the syringe

- Gently pull back on the plunger to draw air into the syringe equal to the amount of insulin you will use. You must fill the syringe with at least 85 units of insulin (MIN fill line). Insert the needle into the vial and push the plunger in to inject the air.
- With the syringe still in the vial, turn the vial and syringe upside down. Slowly pull the plunger to withdraw the insulin. Tap or flick the filled syringe to remove any bubbles.



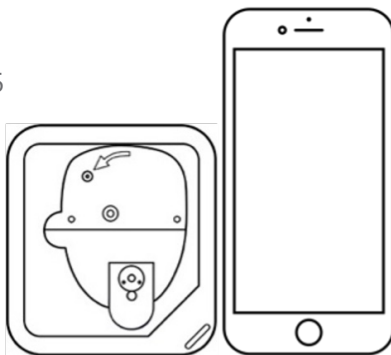
## Fill the Pod

- Remove the needle from the vial and insert it straight down into the fill port. An arrow on the white paper backing points to the fill port. Slowly push the plunger down to completely fill the Pod.
- The Pod will beep twice to indicate the Omnipod 5 Pod is ready to proceed.



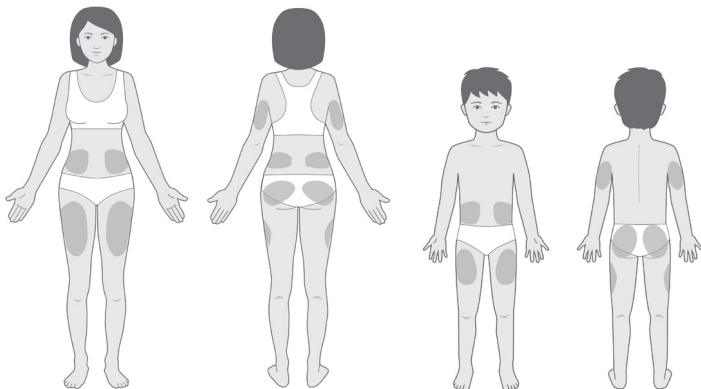
## Activate the Omnipod 5 Pod

- With the Pod still in its tray, place it next to and touching the device with the Omnipod 5 App to ensure proper communication. Tap **Next**. The system will perform a series of safety checks and automatically primes the Pod.



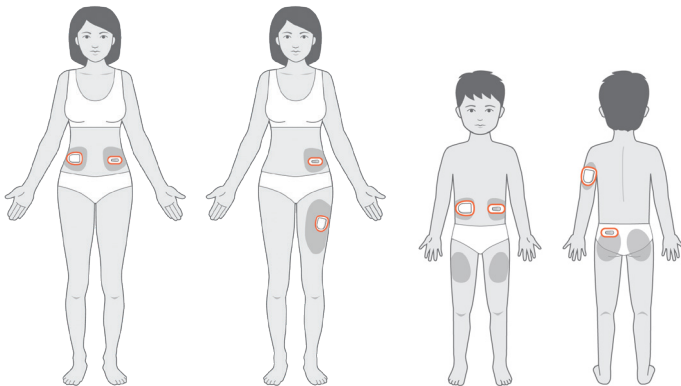
## Pod Placement

Adults and Children



## Sensor Placement

The Pod and Sensor should be worn in line of sight, which means worn on the same side of the body in a way that the two devices can “see” one another without your body blocking their communication.



## Guidelines for Pod Site Selection

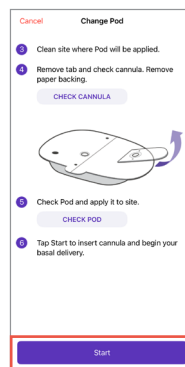
Your Pod is now ready for application and insertion.

- Place at least 3 inches (8 cm) from your Sensor site, as indicated in your *Dexcom G6 System Instructions for Use*.
- Place within line of sight of the Sensor for the best connectivity.  
**Note:** Line of sight means that the Pod and Sensor are worn on the same side of the body in a way that the two devices can “see” one another without your body blocking their communication.
- Ideal sites have a layer of fatty tissue.
- Ideal sites offer easy access and viewing.
- The site should be at least 1 inch (2.5 cm) away from the previous site to avoid skin irritation.
- The site should be at least 2 inches (5 cm) away from your navel.
- Avoid sites where belts, waistbands, or tight clothing may rub against or dislodge the Pod.
- Avoid sites where the Pod will be affected by folds of skin.
- Avoid placing the Pod over a mole, tattoo, or scar, where insulin absorption may be reduced.
- Avoid areas of the skin with an active infection.

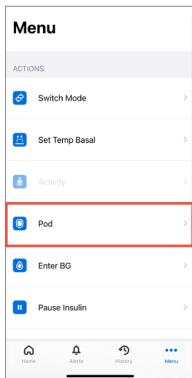
## Apply the Pod

Your Pod is now ready for application and insertion.

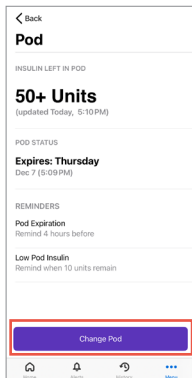
- Carefully follow the on-screen instructions. For more information, please refer to “Activating and Changing Your Pod” in your *Omnipod 5 System Technical User Guide for iPhone*.
- Check the infusion site after insertion to ensure that the cannula was properly inserted.



# How to Change the Pod



- From Menu, tap Pod.



- Tap **Change Pod**.
- Confirm by tapping **Deactivate Pod**.

After the Pod is deactivated, gently lift the edges of the adhesive tab from the skin and remove the entire Pod. **Tip:** Remove Pod slowly to help avoid possible skin irritation.

After you have deactivated and removed the old Pod, follow the instructions on how to Activate a Pod in this guide. **DO NOT** apply a new Pod until you have deactivated and removed the old Pod.

## You may need to change the Pod:

- When the Pod is low on insulin or empty, or the Pod is nearing expiration or expired
- In response to an alarm
- If the Pod/cannula has become dislodged
- If you have glucose of 250 mg/dL or more and ketones are present
- If you experience elevated glucose
- As directed by your healthcare provider.
- If, during activation, the Pod fails to beep

# 4

## Connect the Pod and Sensor: Dexcom G6

You must use the Dexcom G6 app on your smartphone to start and stop your Sensor and Transmitter. If you have been using the Dexcom G6 receiver, turn it off. Your Transmitter will not pair with your Pod if it is still connected to the receiver.

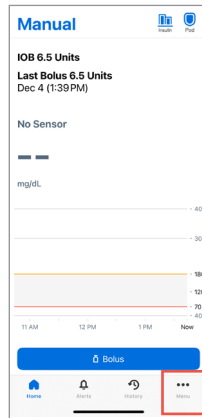
Locate your Dexcom G6 Transmitter Serial Number (SN) from back of Transmitter OR from Transmitter box.

### Step 1: Locate Manage Sensor Screen



From first time setup after Pod activation.

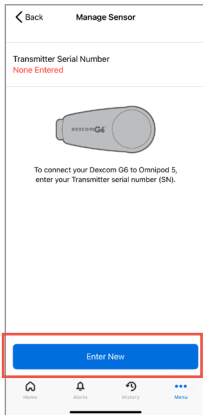
OR



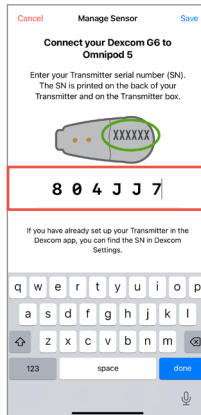
From Home screen:

- Tap Menu Button.
- Tap **Manage Sensor**.

## Step 2: Enter & Save New Transmitter serial number (SN)



Tap Enter New.



Tap first box to enter Transmitter serial number (SN).



Tap Save.

**Note:** Your Pod uses the SN to connect to the correct Transmitter. You will need to enter a new SN any time you replace your Transmitter.

# Omnipod 5 System Modes

## System Modes

The Omnipod 5 System has two operating modes: Automated Mode and Manual Mode



### Automated Mode

- Adjusts every 5 minutes.
- Adapts by updating your total daily insulin with every Pod change.

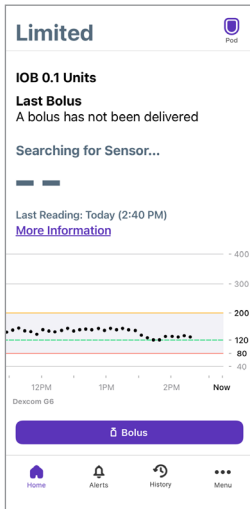


### Manual Mode

- Uses your Basal Program.

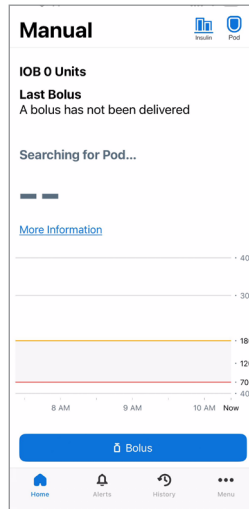


# System States



## Automated Mode: Limited

- Pod is not receiving sensor glucose values.
- System constantly compares Automated Adaptive Basal Rate and Manual Basal Program and uses whichever is lower.



## No Pod Communication

- Pod status is unknown.
- Bring smartphone closer to Pod.

	Manual Mode	Automated Mode
<b>How it works</b>		
Basal Insulin Delivery	Insulin is delivered according to the active Basal Program	Insulin is delivered and adjusted automatically based on sensor glucose values and 60-minute prediction. When sensor glucose values are not available for adjustments, in Automated: Limited, the System constantly compares Automated Adaptive Basal Rate and Manual Basal Program and uses whichever is lower.
Bolus Insulin Delivery	Insulin is delivered using the SmartBolus Calculator or entered manually	Insulin is delivered using the SmartBolus Calculator or entered manually
Connected Sensor	Not required. If connected, sensor glucose values displayed, stored in history, and available for use in SmartBolus Calculator.	Required. Sensor glucose values used for automated insulin delivery, displayed, stored in history, and available for use in SmartBolus Calculator.

	Manual Mode	Automated Mode
<b>What you can do</b>		
Basal Programs	Edit, create new, activate Basal Programs. Does not impact Automated Mode.	Edit Target Glucose to impact automated insulin delivery. Cannot modify Basal Programs in Automated Mode.
Basal Insulin Delivery	Start and cancel Temp Basal rate	Start and cancel the Activity feature
Bolus Calculator Settings	Edit Bolus Settings	Edit Bolus Settings
Bolus Insulin Delivery	Deliver and cancel Immediate and Extended Boluses	Deliver and cancel Immediate Boluses
Pod Changes	Activate and Deactivate Pods	Deactivate Pods When a Pod is deactivated, the System switches to Manual Mode. After you activate a new Pod, you'll be prompted to switch to Automated Mode.
Manage Sensor	View and modify Transmitter serial number (SN)	View Transmitter serial number (SN)

	Manual Mode	Automated Mode
<b>What you can do</b>		
Pause and Start Insulin	Manually pause insulin for a specified duration of up to 2 hours. Manually Start insulin.	System automatically pauses automated insulin delivery based on sensor glucose value/prediction. Switch to Manual Mode to manually pause insulin delivery.
History Details	Review History Details	Review History Details. Auto Events tab shows microbolus deliveries from Automated Mode.
BG Entry	Enter blood glucose readings to save in History Details	Enter blood glucose readings to save in History Details
<b>How you will be notified</b>	Refer to Sections 2 & 5 of the <i>Omnipod 5 System Technical User Guide for iPhone</i> for a detailed list of alarms and notifications	

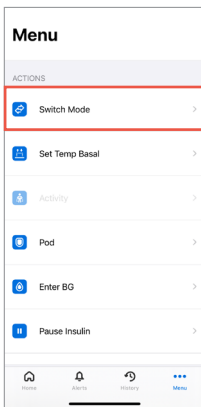
**Note:** In Automated Mode, your Adaptive Basal Rate will be updated with every Pod change. Adaptive Basal Rate is a continuous baseline that the System can adjust up or down every 5 minutes in response to your sensor glucose values.

For your first Pod, since the System doesn't have any history yet, your total daily insulin and initial Adaptive Basal Rate are estimated from the Basal Program you entered during setup.

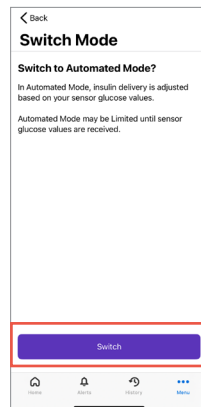
# Switch to Automated Mode



Tap the Menu Button on the Home screen.



Tap Switch Mode.



Tap Switch  
An active Pod and a saved Transmitter serial number (SN) are required.



Confirm that the mode switched. Automated should be indicated in the top left of the screen in purple.

**Note:** Before switching to Automated Mode, an active temp basal, extended bolus, or insulin pause must first be canceled.



## Tips for Success

### Great things take time

- You can begin using Automated Mode with your first Pod.
- Over time, with every Pod change, Omnipod 5 will adapt to better match your insulin needs.
- Optimizing your insulin delivery could take from a few days to a few weeks, depending on your previous therapy, starting settings, and total daily insulin delivered.

### Automated Mode, explained

SmartAdjust™ technology predicts where your glucose will be 60 minutes into the future. You may see the System pause or increase insulin when you are not expecting it if your glucose is predicted to be below or above your Target Glucose setting in the next 60 minutes. To see what the System is doing:

- Check the Sensor Graph: A red bar shows when insulin has been fully paused. An orange bar shows when the System has reached its maximum insulin delivery.
- Check the Auto Events tab in History Detail: This tab shows all automated insulin, both your baseline adaptive basal rate and any adjustment up or down due to your sensor value and trend and/or the 60-minute prediction.

### Help your Pod and Sensor stay connected

- If your Pod and Sensor lose connection, check your Dexcom G6 app to see if sensor glucose values are available. Confirm the Transmitter SN matches the one in your Omnipod 5 App.
- If you find your System in Automated: Limited often, wear your Pod and Transmitter on the same side of the body in a way that the two devices can “see” one another (line of sight) without your body blocking their communication.

## Handling highs and lows

There may still be times when you have high or low glucose.

- Give correction boluses to bring down high glucose. This will help the System understand your total daily insulin needs. Try not to override the System's suggestions.
- Use the SmartBolus Calculator whenever you eat. Enter grams of carbs and tap **Use Sensor** to calculate a dose based on current sensor value, trend, and Insulin on Board.

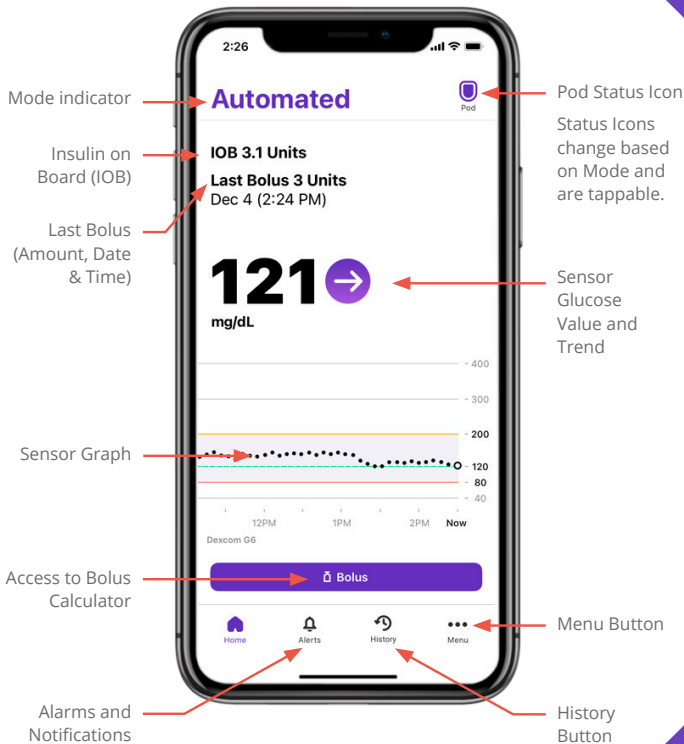
Talk to your healthcare provider about:

Treating Lows	Some people find they need to use fewer carbs to treat lows because the System has been decreasing insulin as their glucose drops.
Timing Meal Boluses	Delivering insulin 15–20 minutes before eating could help if you see high glucose after eating.
Adjusting Target Glucose	Decreasing Target Glucose can help the System deliver more automated insulin. Target Glucose is the only setting that you can change to impact automated insulin delivery. Making changes to your basal settings (like your Basal Program or Max Basal) will impact basal insulin delivery only in Manual Mode.
Adjusting Bolus Settings	If you see high glucose after eating, you may need to strengthen your Insulin to Carb ratio to give more insulin for the food you eat. Other bolus settings include Target Glucose, Correction Factor, Duration of Insulin Action, and Reverse Correction. Boluses impact your Total Daily Insulin. Bolusing for meals and to bring down high glucose will help your System learn your insulin needs as it adapts over time.

# 6

## Get to Know the App

### Omnipod 5 App Home Screen





# Glucose Trends and Indicators

## SENSOR GLUCOSE VALUE COLOR KEY:

**121** →

Trending steady

**121** →

Trending steady

**68** ↓

Rapidly falling

**258** ↗

Slowly rising

The sensor glucose value and trend arrow will change color depending on your Glucose Goal Range.

**Blue** Sensor glucose value within Glucose Goal Range (Manual Mode)

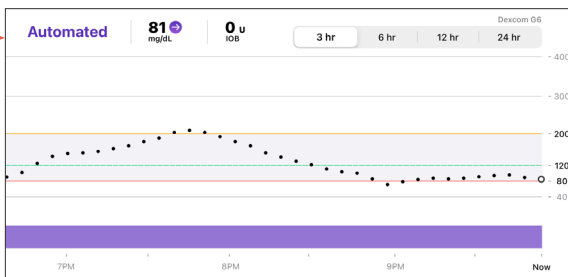
**Purple** Sensor glucose value within Glucose Goal Range (Automated Mode)

**Red** Sensor glucose value below Glucose Goal Range (Automated & Manual Modes)

**Yellow** Sensor glucose value above Glucose Goal Range (Automated & Manual Modes)

**Note:** A sensor glucose value will not be displayed if in Limited or No Pod Communication states

Mode Indicator  
Current Glucose  
Current IOB  
Selection Buttons  
for Time



## Sensor Graph

Tap the Sensor Graph in Portrait view to change the time scale of the graph.

Rotate your phone on its side for this landscape view of your glucose and insulin history. **Note:** If the view does not change, check that your Portrait Orientation Lock is turned off.

Tap the bar at the bottom of the screen for information on insulin delivery. Boluses, temp basal, Mode, the Activity feature, insulin pause periods, and Automated Delivery Restrictions will display here.

## Alarms and Notifications

The Omnipod 5 System generates different types of alarms and notifications. Alarms repeat every 15 minutes until acknowledged. Alarms that sound on the Pod must be acknowledged in the Omnipod 5 App.

See Chapters 13 and 24 in the full Omnipod 5 System Technical User Guide for iPhone for details on these alarms and notifications.



### Hazard Alarms

Hazard Alarms are high-priority alarms that indicate a serious problem has occurred, and you may need to remove your Pod.

#### Hazard alarms related to the App

App Cannot Be Trusted	Your Omnipod 5 App has been modified and is not safe to use. Delete and reinstall the Omnipod 5 App. Remove your Pod.
Omnipod 5 App Error	The System detected an error with the App. The App may restart.
Omnipod 5 Memory Corruption	The System detected an error with the App. Delete and reinstall the Omnipod 5 App. All settings will be deleted. Remove your Pod.
Omnipod 5 Memory Corruption	The System detected an error with the App. Remove your Pod.
System Error (Cloud)	The System detected an error with the App. Delete and reinstall the Omnipod 5 App. All settings will be deleted. Remove your Pod.

## Hazard alarms related to the Pod

Blockage Detected	The System detected a blockage (occlusion) in the Pod's cannula. Insulin delivery has stopped. Remove your Pod.
Pod Error	The System detected an error with the Pod. Insulin delivery has stopped. Remove your Pod.
Pod Expired	The Pod has reached the end of its operating life. Insulin delivery has stopped. Remove your Pod.
Pod Out of Insulin	The Pod is empty. Insulin delivery has stopped. Remove your Pod.
Pod Shut-Off	The Pod has stopped delivering insulin because you have set a Pod Shut-off time and did not respond to the Pod Shut-off Advisory Alarm. Insulin delivery has stopped. Remove your Pod.



## Advisory Alarms

Advisory Alarms are lower-priority alarms that indicate that a situation exists that needs your attention. Advisory Alarms may escalate to a Hazard Alarm.

## Advisory alarms related to the Pod

Low Pod Insulin	The amount of insulin in your Pod is below the value you specified in Settings. Escalates to Pod Out of Insulin Hazard Alarm if ignored. Change your Pod soon.
Pod Expired	The Pod has expired and will stop delivering insulin soon. Will sound once per hour until it escalates to Pod Expired Hazard Alarm. Change your Pod soon.
Pod Shut-Off	The Pod will stop delivering insulin soon because of the Pod Shut-off time you specified in Settings. Tap OK to acknowledge and avoid escalating to Pod Shut-Off Hazard Alarm.
Start Insulin	The time period you specified to pause insulin has ended. Tap <b>Start Insulin</b> to restart insulin and avoid hyperglycemia.

## Advisory alarm related to Glucose

Urgent Low Glucose	Your sensor glucose value is 55 mg/dL or below. Consider eating fast-acting carbs to treat hypoglycemia.
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## Advisory alarms related to Automated Mode

Missing Sensor Values	In Automated Mode, the Pod has not received sensor glucose values for an hour. The System will operate in Automated: Limited until new values are received.
Automated Delivery Restriction	In Automated Mode, the System has been working to bring your glucose into range but has not seen your glucose change the way it expected. This alarm can let you know to step in and check your Sensor, your Pod, and your glucose. Switch to Manual Mode for 5 minutes or longer to acknowledge this alarm.

## Notifications

Action Item Notifications are technical System tasks that need your attention, such as App settings or updates. Reminder notifications are related to diabetes management tasks you may want to perform.







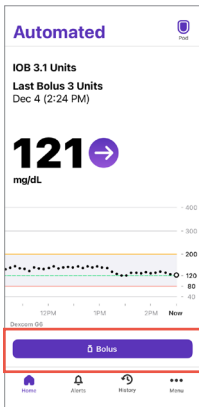
## 7

# Key Insulin Delivery Actions

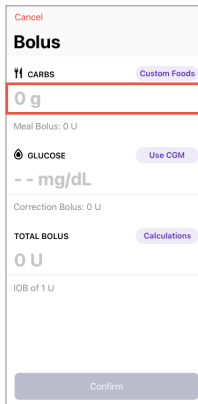
## Deliver a Bolus

Note: Use Sensor button is active only when Omnipod 5 is receiving a sensor glucose value and trend

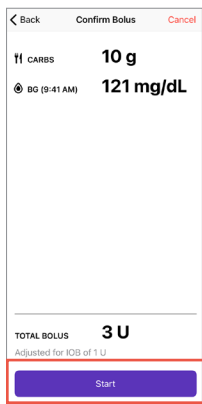
Note: Extended Bolus is available only in Manual Mode



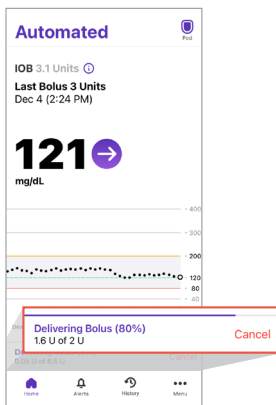
- Tap the Bolus Button on the Home screen.



- Tap on the Carbs field to manually enter carbs, or tap **Custom Foods** to use previously saved carb counts.
- Tap **Use Sensor** to use sensor glucose value and trend, or add a blood glucose reading by tapping the Glucose field.
- Tap **Confirm**.



- Review entries are correct.
- Tap **Start** to begin bolus insulin delivery.



- Home screen will display progress of bolus delivery.
- To cancel the bolus in progress, tap **Cancel**.

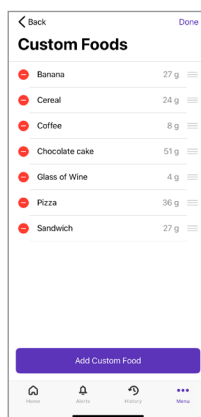
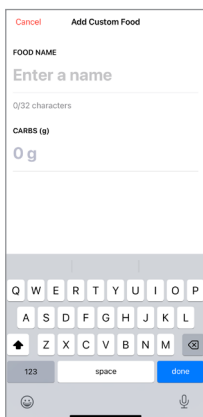
### Note:

Always bolus for meals as directed by your healthcare provider. In Automated Mode, bolus doses still require your programming and delivery. Failure to deliver a bolus for meals could lead to hyperglycemia.

## Creating and Editing Custom Foods

Omnipod 5 allows you to save carb information about certain favorite foods, snacks, or meals (Custom Foods) that you might eat frequently.

To create or edit a Custom Food, tap Custom Foods from the Menu.



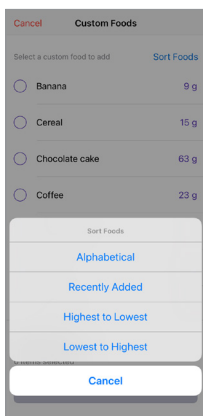
- Tap **Add Custom Food**.
- Enter a name and tap **Done**.
- Enter a carb count and tap **Done**.
- Tap **Save**.
- You will see a green badge that reads **NEW** next to your new entry.
- Tap **Edit** to edit your list. You can drag to reorder, delete items, or tap them to edit.



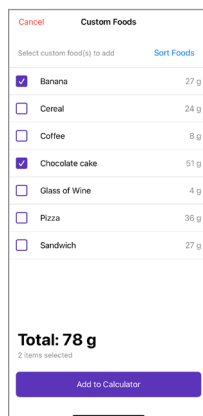
## Using Custom Foods for a Bolus

To use Custom Foods for a bolus, tap Custom Foods on the SmartBolus Calculator screen.

During a bolus, you can sort foods and add them to your bolus.



- Tap **Sort Foods** to see them alphabetically, by recently added, or by carb count.



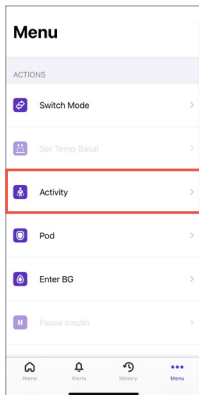
- You can select foods to be added to your calculation. Tap **Add to Calculator**.

# The Activity Feature

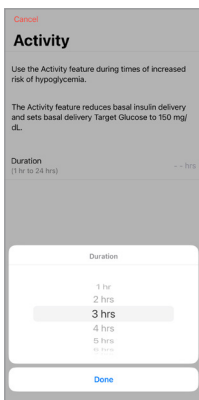
The Activity feature can be enabled for times when there may be a decrease in insulin needs, like exercise. It will set the Automated Mode Target Glucose to 150 mg/dL and reduce insulin delivery. **Note:** The Activity feature does not change the Target Glucose used in your bolus calculations.



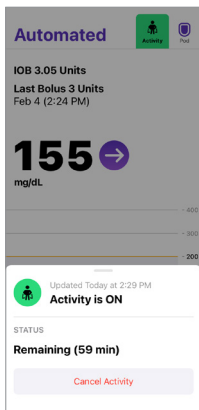
- Tap the Menu Button on the Home screen.



- Tap **Activity**



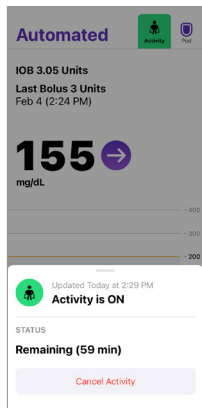
- Set Duration (1-24 hrs).
- Tap **Done**.
- Tap **Confirm**.
- Tap **Start**.



- Confirm the green Activity icon now shows on the Home screen.

## Cancel the Activity Feature

You can cancel the Activity feature at any time. If you cancel the feature, or when the time period ends, the System will return itself to Automated Mode and will use your Target Glucose setting for that time of day.



- Tap **Cancel Activity**.

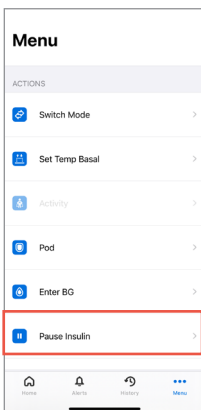


- Tap **Yes**.

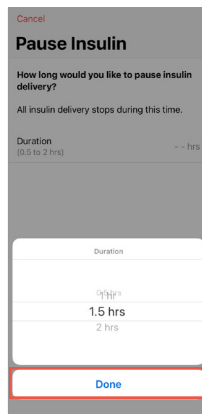
# Pause Insulin Delivery



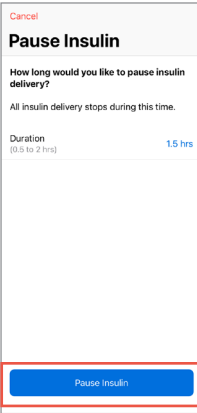
- In Manual Mode, tap the Menu Button on the Home screen.



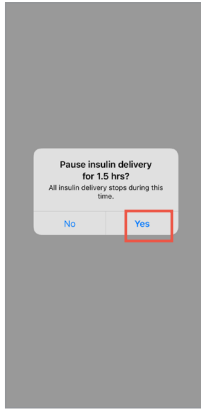
- Tap **Pause Insulin**.



- Use scroll wheel to enter desired duration of insulin pause. Tap **Done**.



- Tap **Pause Insulin**.



- Tap **Yes** to confirm insulin pause.



- To restart insulin delivery, go to the Menu and tap **Start Insulin**.

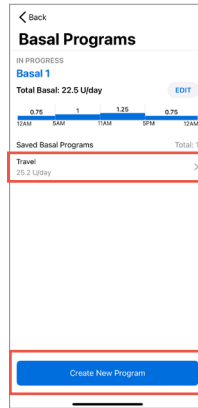
Insulin delivery does not automatically start at the end of the pause period. You must tap **Start Insulin** to start insulin.

# Editing a Basal Program

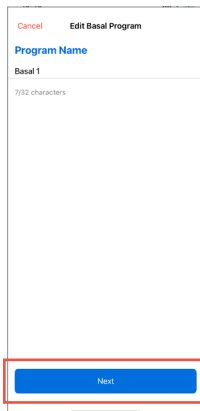
Editing a Basal Program impacts only your Manual Mode insulin delivery.



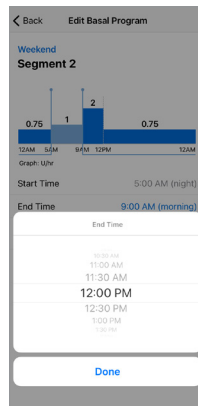
- In Manual Mode, tap the Insulin Status Icon on the Home screen.



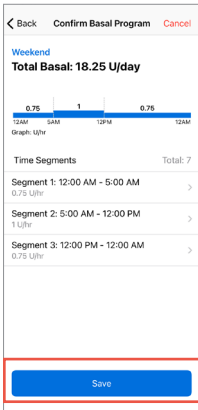
- Tap on the program you would like to edit and tap **EDIT**.
- If you want to create a new Basal Program, tap **Create New Program**.



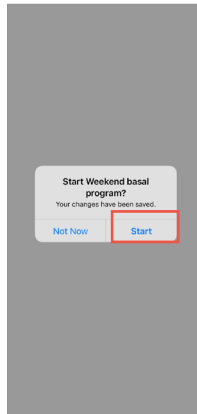
- Tap to edit Program Name, or tap **Next** to edit basal time segments and rates.



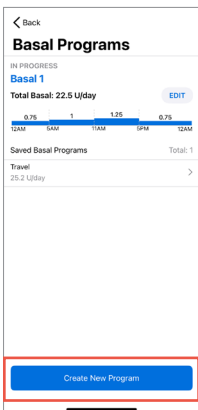
- Tap the time segment to edit.
- Tap **Next** after confirming edits in the Basal Program.



- Tap **Save** after confirming edits in the Basal Program.



- To start the Basal Program now tap **Start**. Otherwise tap **Not Now** to save to use at a later time.

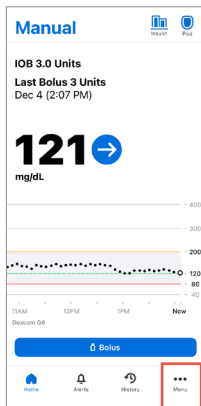


## Additional Basal Programs

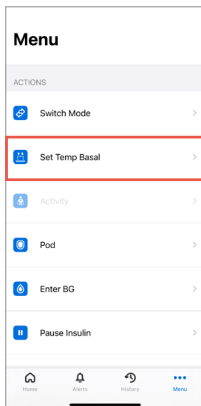
- Additional Basal Programs can be created by navigating to Basal Programs in your Menu and tapping **Create New**.
- Tap the Program Name field to enter a descriptive name for the new Basal Program.
- Tap **Next** and define the basal segments one at a time.

# Set a Temporary Basal Rate

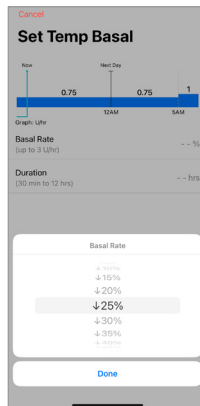
**Note:** Temp Basal is available only in Manual Mode



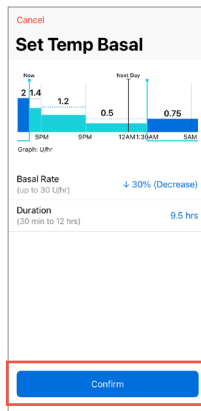
- Tap the Menu Button on the Home screen.



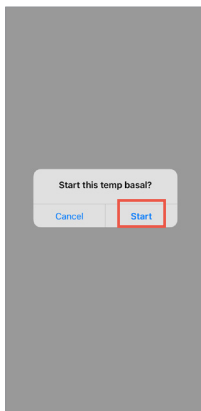
- Tap Set Temp Basal.



- Tap Basal Rate entry box and select % change or units per hour.  
**Note:** The up arrow indicates an increase. The down arrow indicates a decrease.
- Tap Duration entry box and select time duration.



- Tap Confirm.



- Tap Start.

**Note:** To cancel the Temp Basal, tap the Temp Basal icon on the Home screen. Next, tap the **Cancel Temp Basal** button and then tap **Yes**. If you cancel the temp basal, or when the time period ends, the System will return itself to your scheduled Basal Program for that time of day.





## Clinical Evidence for Omnipod 5

### Omnipod 5 Pivotal Study in Children, Adolescents, and Adults (6–70 years)

The goal of the pivotal study of the Omnipod 5 System was to assess the safety and efficacy of the system. This single-arm, multicenter, prospective study enrolled 112 children (6 to 13.9 years) and 128 adolescents and adults (14 to 70 years).

A 2-week standard therapy phase (usual insulin regimen) was followed by 3 months of the Omnipod 5 System use in Automated Mode. The primary analysis consisted of A1C and sensor glucose time in range (70–180 mg/dL) results.

The primary safety endpoints included an assessment of severe hypoglycemia and diabetic ketoacidosis (DKA) events. An analysis of the secondary endpoints and additional metrics was also performed. An analysis of the primary and safety results are presented in the following tables. See the full *Omnipod 5 Technical User Guide* for secondary results.

Of the 240 subjects enrolled, 98% completed the trial (111 children and 124 adolescents and adults). The study population consisted of people with type 1 diabetes for at least 6 months. All subjects were required to have a A1C < 10.0% at screening. Subjects < 18 years had to be living with a parent or legal guardian.

### Glycemic Results

The tables on the following pages include information on the primary glycemic results from the standard therapy phase compared to the 3-month Omnipod 5 System treatment phase.

Adolescents, adults, and children experienced improvements in overall A1C and time in range after 3 months of Omnipod 5 System use. This was achieved with a reduction of time > 180 mg/dL in adolescents, adults, and children as well as a reduction in median time < 70 mg/dL in adolescents and adults.

Some limitations to the study include: 1) single-arm design with no control group which could lead to an over-estimate of glycemic improvement; 2) standard therapy phase was shorter than the Omnipod 5 System phase; 3) minimal use of the 140 and 150 mg/dL Target Glucose settings in adults and adolescents limited the assessment of glycemic results at those settings and, for that reason, results at these Target settings were not included in these results.

<b>Glycemic Results Overall (24 hours)</b>						
<b>Characteristic</b>	<b>Children (6 to 13.9 years) (n = 112)</b>			<b>Adolescents &amp; Adults (14 to 70 years) (n = 128)</b>		
	<b>Standard Therapy</b>	<b>Omnipod 5</b>	<b>Change</b>	<b>Standard Therapy</b>	<b>Omnipod 5</b>	<b>Change</b>
<b>Avg A1C% (std dev)</b>	7.67% (0.95%)	6.99% (0.63%)	-0.71%*	7.16% (0.86%)	6.78% (0.68%)	-0.38%*
Avg % time 70–180 mg/dL (std dev)	52.5% (15.6%)	68.0% (8.1%)	15.6%*	64.7% (16.6%)	73.9% (11.0%)	9.3%*
Avg sensor glucose, mg/dL (std dev)	183 (32)	160 (15)	-23*	161 (28)	154 (17)	-8*
Avg standard deviation of sensor glucose, mg/dL (std dev)	68 (13)	60 (10)	-9*	57 (14)	49 (11)	-8*
Avg coefficient of variation of sensor glucose, % (std dev)	37.5% (5.1%)	37.0% (3.9%)	-0.4%	35.2% (5.7%)	31.7% (4.7%)	-3.5%*

% Time in Glucose Range						
Median % < 54 mg/dL (Q1, Q3)	0.10% (0.00, 0.41)	0.23% (0.08, 0.42)	0.04%	0.22% (0.00, 0.77)	0.17% (0.06, 0.28)	-0.08%*
Median % < 70 mg/dL (Q1, Q3)	1.38% (0.42, 2.67)	1.48% (0.65, 2.23)	0.06%	2.00% (0.63, 4.06)	1.09% (0.46, 1.75)	-0.89%*
Avg % > 180 mg/dL (std dev)	45.3% (16.7%)	30.2% (8.7%)	-15.1%*	32.4% (17.3%)	24.7% (11.2%)	-7.7%*
Avg % ≥ 250 mg/dL (std dev)	19.1% (13.1%)	9.6% (5.4%)	-9.4%*	10.1% (10.5%)	5.8% (5.5%)	-4.3%*
Avg % ≥ 300 mg/dL (std dev)	8.5% (8.9%)	3.5% (2.9%)	-5.1%*	3.7% (5.5%)	1.7% (2.5%)	-2.0%*

*Most of the primary and secondary results are presented as averages (avg) with standard deviation (std dev) values in brackets. Time in range < 70 mg/dL and < 54 mg/dL is reported as medians with interquartile ranges in brackets(Q1,Q3). The median is the middle number in an ascending list of numbers and the interquartile range represents the middle 50% of values.*

*\*Change between standard therapy phase and Omnipod 5 System phase was statistically significant.*

## Glycemic Results Overnight (12:00AM to 6:00AM)

Characteristic	Children (6 to 13.9 years) (n = 112)			Adolescents & Adults (14 to 70 years) (n = 128)		
	Standard Therapy	Omnipod 5	Change	Standard Therapy	Omnipod 5	Change
Avg % time 70–180 mg/dL (std dev)	55.3% (19.0%)	78.1% (10.8%)	22.9%*	64.3% (19.5%)	78.1% (13.9%)	13.8%*
Avg sensor glucose, mg/dL (std dev)	177 (35)	149 (17)	-29*	160 (34)	149 (21)	-11*
Avg standard deviation of sensor glucose, mg/dL (std dev)	61 (15)	48 (12)	-13*	56 (17)	44 (13)	-12*
Avg coefficient of variation of sensor glucose, % (std dev)	34.6% (7.1%)	31.9% (5.6%)	-2.8%	35.0% (7.9%)	28.9% (5.8%)	-6.2%*
<b>% Time in Glucose Range</b>						
Median % < 54 mg/dL (Q1, Q3)	0.00% (0.00, 0.30)	0.09% (0.02, 0.32)	0.02%	0.00% (0.00, 1.06)	0.09% (0.02, 0.30)	0.00%*
Median % < 70 mg/dL (Q1, Q3)	0.78% (0.00, 2.84)	0.78% (0.37, 1.49)	0.01%*	2.07% (0.50, 5.54)	0.82% (0.31, 1.62)	-0.86%*
Avg % > 180 mg/dL (std dev)	42.2% (20.0%)	20.7% (10.8%)	-21.5%*	32.1% (20.2%)	20.7% (14.1%)	-11.3%*
Avg % ≥ 250 mg/dL (std dev)	16.3% (15.0%)	5.4% (5.1%)	-10.9%*	10.6% (12.7%)	4.8% (7.0%)	-5.7%*
Avg % ≥ 300 mg/dL (std dev)	6.7% (9.1%)	1.8 (2.5%)	-4.8%*	4.2% (8.0%)	1.5% (3.1%)	-2.7%*
*Change between standard therapy phase and Omnipod 5 System phase was statistically significant.						

## Change in A1C Analyzed by Baseline A1C

The table below provides information on the average change in A1C% from baseline to the end of the 3-month Omnipod 5 System treatment phase. Adolescents, adults, and children experienced a reduction in A1C after 3 months of Omnipod 5 System use regardless of baseline A1C < 8% or ≥ 8% category.

Subgroup Analysis of Change in Average A1C(%) by Baseline A1C(%)						
	Baseline A1C < 8% (n = 105)			Baseline A1C ≥ 8% (n = 23)		
Adolescents & Adults	Baseline	Omnipod 5	Change	Baseline	Omnipod 5	Change
A1C% (std dev) <sup>‡</sup>	6.86% (0.59%)	6.60% (0.53%)	-0.27%*	8.55% (0.42%)	7.63% (0.67%)	-0.91%*
	Baseline A1C < 8% (n = 73)			Baseline A1C ≥ 8% (n = 39)		
Children	Baseline	Omnipod 5	Change	Baseline	Omnipod 5	Change
A1C% (std dev) <sup>‡</sup>	7.11% (0.50%)	6.69% (0.44%)	-0.45%*	8.73% (0.63%)	7.56% (0.54%)	-1.18%*
*Change between standard therapy phase and Omnipod 5 System phase was statistically significant.						
<sup>‡</sup> Average A1C values are reported with standard deviation values in brackets.						

## Adverse Events

The table below provides a full list of the adverse events that occurred during the 3-month Omnipod 5 System treatment phase.

Adverse Events During the Omnipod 5 System Phase			
Adverse Event Type	Children (6 to 13.9 years) (n = 112)	Adolescents & Adults (14 to 70 years) (n = 128)	Total (6 to 70 years) (n = 240)
Hypoglycemia <sup>‡</sup>	1	0	1
Severe Hypoglycemia <sup>§</sup>	1	2	3
DKA	1	2	1
Hyperglycemia <sup>  </sup>	1	2	3
Prolonged Hyperglycemia <sup>**</sup>	13	5	18
Other	8	8	16

*Results reported as number of events.*

<sup>‡</sup> Hypoglycemia resulting in a serious adverse event, but otherwise not meeting the definition of severe hypoglycemia.

<sup>§</sup> Required the assistance of another person,

<sup>||</sup> Hyperglycemia requiring evaluation, treatment or guidance from intervention site, or hyperglycemia resulting in a serious adverse event.

<sup>\*\*</sup> Meter blood glucose measuring  $\geq 300$  mg/dL and ketones  $> 1.0$  mmol/L

## CGM-informed SmartBolus Calculator Clinical Study in Children, Adolescents, and Adults

A study was conducted on 25 participants with type 1 diabetes aged 6–70 years to assess the Omnipod 5 CGM-informed SmartBolus Calculator.

During Phase 1, participants used the Omnipod 5 system in Manual Mode for the first 7 days without a connected Sensor (standard SmartBolus Calculator). In Phase 2, participants used the Omnipod 5 system in Manual Mode with a connected Sensor (CGM-informed SmartBolus Calculator) for 7 days.

The CGM-informed calculator automatically increased or decreased the suggested bolus amount based on the Sensor trend. The primary analysis of the study was to compare the percent of time spent < 70 mg/dL and > 180 mg/dL for the 4 hours after any bolus as measured by Sensor between the two study phases. The results indicate that the use of the CGM-informed SmartBolus Calculator was associated with less time in hypoglycemia within 4 hours of bolusing.

**Comparison of Glycemic Measures from Phase 1 (Standard SmartBolus Calculator) and Phase 2 (CGM-Informed SmartBolus Calculator) for the 4 hours After any Bolus (n = 25)**

<b>Percent time in glucose range as measured by Sensor</b>	<b>Standard SmartBolus Calculator</b>	<b>CGM-Informed SmartBolus Calculator</b>	<b>Difference</b>
70–180 mg/dL	65.1% (15.4)	63.8% (15.7)	-1.3%
< 70 mg/dL	2.8% (2.7)	2.1% (2.0)	-0.6%*
< 54 mg/dL	0.5% (1.0)	0.3% (0.7)	-0.2%
> 180 mg/dL	32.1% (15.7)	34.0% (16.0)	1.9%
≥ 250 mg/dL	8.2% (6.9)	9.7% (10.3)	1.4%
≥ 300 mg/dL	2.0% (2.6)	2.6% (3.7)	0.6%

*Data is presented as average (standard deviation). Significant differences ( $p < 0.05$ ) are highlighted with an asterisk.*



## Omnipod 5 Clinical Study in Very Young Children

The goal of this study was to assess the safety and effectiveness of the Omnipod 5 System in children with type 1 diabetes aged 2 to 5.9 years. This single-arm, multicenter, prospective study enrolled 80 children.

A 2- week standard therapy phase (usual insulin regimen) was followed by 3 months of the Omnipod 5 System use in Automated Mode. The primary analysis consisted of A1C and sensor glucose time in range (70–180 mg/dL) results.

The primary safety endpoints included the incidence of severe hypoglycemia and diabetic ketoacidosis (DKA). An analysis of the secondary endpoints and additional metrics was also performed. An analysis of the primary and safety results are presented in the following tables. See the full *Omnipod 5 Technical User Guide* for secondary results.

Of the 80 participants enrolled, 100% completed the trial. The study population consisted of children diagnosed with type 1 diabetes based on the investigator's clinical judgement. All participants were required to have an A1C < 10.0% at screening. Participants had to be living with a parent or legal guardian.

## Glycemic Results

The tables on the following pages include information on the primary glycemic results from the standard therapy phase compared to the 3-month Omnipod 5 System treatment phase. The primary results of the study included change in average A1C% and % time in range (70–180 mg/dL). Participants experienced improvements in A1C and overall time in range after 3 months of Omnipod 5 System use. This result was achieved with a reduction of time > 180 mg/dL as well as a reduction in median time < 70 mg/dL.

Some limitations to the study include: 1) single-arm design with no control group which could lead to an over-estimate of glycemic improvement; 2) standard therapy phase was shorter than the Omnipod 5 System phase.

## Glycemic Results Overall (24 hours)

Characteristic	Standard Therapy	Omnipod 5	Change
Avg A1C% (std dev)	7.4% (1.0%)	6.9% (0.7%)	-0.55%*
Avg % time 70–180 mg/dL (std dev)	57.2% (15.3%)	68.1% (9.0%)	10.9%*
Avg sensor glucose, mg/ dL, (std dev)	171.1 (30.5)	157.4 (16.8)	-13.7*
Avg standard deviation of sensor glucose, mg/dL (std dev)	64.9 (13.4)	59.6 (10.3)	-5.3*
Avg coefficient of variation of sensor glucose, % (std dev)	38.1% (5.5%)	37.7% (4.0%)	-0.4%
<b>% Time in Glucose Range</b>			
Median % < 54 mg/dL (Q1, Q3)	0.24% (0.05, 0.84)	0.26% (0.16, 0.60)	0.06%
Median % < 70 mg/dL (Q1, Q3)	2.19 (0.89, 4.68)	1.94 (1.18, 3.43)	-0.27%*
Avg % > 180 mg/dL (std dev)	39.4% (16.7%)	29.5% (9.8%)	-9.9%*
Avg % ≥ 250 mg/dL (std dev)	14.8% (12.1%)	9.2% (5.6%)	-5.6%*
Avg % ≥ 300 mg/dL (std dev)	6.0% (7.3%)	3.2% (2.8%)	-2.7%*

Most of the primary and secondary results are presented as averages (avg) with standard deviation (std dev) values in brackets. Time in range < 70 mg/dL and < 54 mg/dL is reported as medians with interquartile ranges in brackets(Q1, Q3). The median is the middle number in an ascending list of numbers and the interquartile range represents the middle 50% of values.

\*Change between standard therapy phase and Omnipod 5 System phase was statistically significant.

## Glycemic Results Overnight (12:00AM to 6:00AM)

Characteristic	Children (6 to 13.9 years) (n = 112)			Adolescents & Adults (14 to 70 years) (n = 128)		
	Standard Therapy	Omnipod 5	Change	Standard Therapy	Omnipod 5	Change
Avg % time 70-180 mg/dL (std dev)	55.3% (19.0%)	78.1% (10.8%)	22.9%*	64.3% (19.5%)	78.1% (13.9%)	13.8%*
Avg sensor glucose, mg/dL (std dev)	177 (35)	149 (17)	-29*	160 (34)	149 (21)	-11*
Avg standard deviation of sensor glucose, mg/dL (std dev)	61 (15)	48 (12)	-13*	56 (17)	44 (13)	-12*
Avg coefficient of variation of sensor glucose, % (std dev)	34.6% (7.1%)	31.9% (5.6%)	-2.8%	35.0% (7.9%)	28.9% (5.8%)	-6.2%*
<b>% Time in Glucose Range</b>						
Median % < 54 mg/dL (Q1, Q3)	0.00% (0.00, 0.30)	0.09% (0.02, 0.32)	0.02%	0.00% (0.00, 1.06)	0.09% (0.02, 0.30)	0.00%*
Median % < 70 mg/dL (Q1, Q3)	0.78% (0.00, 2.84)	0.78% (0.37, 1.49)	0.01%*	2.07% (0.50, 5.54)	0.82% (0.31, 1.62)	-0.86%*
Avg % > 180 mg/dL (std dev)	42.2% (20.0%)	20.7% (10.8%)	-21.5%*	32.1% (20.2%)	20.7% (14.1%)	-11.3%*
Avg % ≥ 250 mg/dL (std dev)	16.3% (15.0%)	5.4% (5.1%)	-10.9%*	10.6% (12.7%)	4.8% (7.0%)	-5.7%*
Avg % ≥ 300 mg/dL (std dev)	6.7% (9.1%)	1.8 (2.5%)	-4.8%*	4.2% (8.0%)	1.5% (3.1%)	-2.7%*

\*Change between standard therapy phase and Omnipod 5 System phase was statistically significant

## Change in A1C Analyzed by Baseline A1C

The table below provides information on the average change in A1C% from baseline to the end of the 3-month Omnipod 5 System treatment phase analyzed by baseline A1C%. Participants experienced a reduction in A1C after 3 months of Omnipod 5 System use regardless of baseline A1C < 8% or ≥ 8% category.

Subgroup Analysis of Change in Average A1C(%) by Baseline A1C(%)						
	Baseline A1C < 8% (n = 55)			Baseline A1C ≥ 8% (n = 25)		
	Baseline	Omnipod 5	Change	Baseline	Omnipod 5	Change
A1C% (std dev) <sup>‡</sup>	6.9% (0.6%)	6.6% (0.6%)	-0.31%*	8.5% (0.5%)	7.5% (0.4%)	-1.06%*
*Change between standard therapy phase and Omnipod 5 System phase was statistically significant						
<sup>‡</sup> Average A1C values are reported with standard deviation values in brackets.						

## Adverse Events

The table below provides a full list of the adverse events that occurred during the 3-month Omnipod 5 System treatment phase.

Adverse Events During the Omnipod 5 System Phase	
Adverse Event Type	Omnipod 5
Hypoglycemia <sup>‡</sup>	0
Severe Hypoglycemia <sup>§</sup>	0
DKA	0
Hyperglycemia <sup>◊</sup>	4
Prolonged Hyperglycemia <sup>**</sup>	20
Other	5
Results reported as number of events.	
<sup>‡</sup> Hypoglycemia resulting in a serious adverse event, but otherwise not meeting the definition of severe hypoglycemia.	
<sup>§</sup> Required the assistance of another person.	
<sup>◊</sup> Hyperglycemia requiring evaluation, treatment or guidance from intervention site, or hyperglycemia resulting in a serious adverse event.	
<sup>**</sup> Meter blood glucose measuring ≥ 300 mg/dL and ketones > 1.0 mmol/L	

## Omnipod 5 Clinical Study in Very Young Children

The goal of this study was to assess the safety and effectiveness of the Omnipod 5 System in children with type 1 diabetes aged 2 to 5.9 years. This single-arm, multicenter, prospective study enrolled 80 children.

A 2-week standard therapy phase (usual insulin regimen) was followed by 3 months of the Omnipod 5 System use in Automated Mode. The primary analysis consisted of A1C and sensor glucose time in range (70–180 mg/dL) results.

The primary safety endpoints included the incidence of severe hypoglycemia and diabetic ketoacidosis (DKA). An analysis of the secondary endpoints and additional metrics was also performed. An analysis of the primary and safety results are presented in the following tables. See the full *Omnipod 5 Technical User Guide* for secondary results.

Of the 80 participants enrolled, 100% completed the trial. The study population consisted of children diagnosed with type 1 diabetes based on the investigator’s clinical judgement. All participants were required to have an A1C < 10.0% at screening. Participants had to be living with a parent or legal guardian.

## Glycemic Results

The tables on the following pages include information on the primary glycemic results from the standard therapy phase compared to the 3-month Omnipod 5 System treatment phase. The primary results of the study included change in average A1C% and % time in range (70–180 mg/dL). Participants experienced improvements in A1C and overall time in range after 3 months of Omnipod 5 System use. This result was achieved with a reduction of time > 180 mg/dL as well as a reduction in median time < 70 mg/dL.

Some limitations to the study include: 1) single-arm design with no control group which could lead to an over-estimate of glycemic improvement; 2) standard therapy phase was shorter than the Omnipod 5 System phase.

## Glycemic Results Overall (24 hours)

Characteristic	Standard Therapy	Omnipod 5	Change
Avg A1C% (std dev)	7.4% (1.0%)	6.9% (0.7%)	-0.55%*
Avg % time 70-180 mg/dL (std dev)	57.2% (15.3%)	68.1% (9.0%)	10.9%*
Avg sensor glucose, mg/dL, (std dev)	171.1 (30.5)	157.4 (16.8)	-13.7*
Avg standard deviation of sensor glucose, mg/dL (std dev)	64.9 (13.4)	59.6 (10.3)	-5.3*
Avg coefficient of variation of sensor glucose, % (std dev)	38.1% (5.5%)	37.7% (4.0%)	-0.4%
<b>% Time in Glucose Range</b>			
Median % < 54 mg/dL (Q1, Q3)	0.24% (0.05, 0.84)	0.26% (0.16, 0.60)	0.06%
Median % < 70 mg/dL (Q1, Q3)	2.19 (0.89, 4.68)	1.94 (1.18, 3.43)	-0.27%*
Avg % > 180 mg/dL (std dev)	39.4% (16.7%)	29.5% (9.8%)	-9.9%*
Avg % ≥ 250 mg/dL (std dev)	14.8% (12.1%)	9.2% (5.6%)	-5.6%*
Avg % ≥ 300 mg/dL (std dev)	6.0% (7.3%)	3.2% (2.8%)	-2.7%*

*Most of the primary and secondary results are presented as averages (avg) with standard deviation (std dev) values in brackets. Time in range < 70 mg/dL and < 54 mg/dL is reported as medians with interquartile ranges in brackets(Q1, Q3). The median is the middle number in an ascending list of numbers and the interquartile range represents the middle 50% of values.*

*\*Change between standard therapy phase and Omnipod 5 System phase was statistically significant.*





## **Omnipod 5 Pivotal Study in Adults with Type 2 Diabetes (18 – 75 years)**

The goal of this U.S.-based pivotal study was to assess the safety and efficacy of the Omnipod 5 System in adults with type 2 diabetes aged 18 to 75 years. This study enrolled 343 participants.

A 2-week standard therapy phase where participants used their usual insulin delivery method was followed by 3 months of participants using the Omnipod 5 System. The system was used in Automated Mode with a Dexcom G6 continuous glucose monitor (CGM). The primary safety outcome is that Omnipod 5 does not worsen A1C compared to baseline/standard therapy. The primary effectiveness outcome is that Omnipod 5 lowers A1C compared to baseline/standard therapy.

The study also tested other outcomes for safety and benefit. The results for the primary and safety results are presented in the tables below. See the full *Omnipod 5 Technical User Guide* for secondary results and other data.

Of the 343 participants enrolled, 305 started Omnipod 5 and 289 completed the study. The study population consisted of adults diagnosed with type 2 diabetes on insulin (basal-bolus, basal only, or pre-mix insulin). All participants were required to have an A1C < 12.0% at screening. Those on basal insulin only also had to have an A1C  $\geq$  7%.

### **Glycemic Results**

The tables on the following pages include information on the glycemic results from the standard therapy phase compared to the 3-month Omnipod 5 System phase in adults with type 2 diabetes. The primary result of the study is average change in A1C. Participants experienced an improvement in A1C and % time in range (70–180 mg/dL, 3.9–10.0 mmol/L) after 3 months of Omnipod 5 System use. This was achieved with no increase in hypoglycemia (low blood sugar).



Some limitations to the study include: 1) single-arm design with no control group which could lead to an over-estimate of glycemic improvement, and 2) standard therapy phase was shorter than the Omnipod 5 System phase.

Outcome	Standard Therapy <sup>†</sup>	Omnipod 5 <sup>†</sup>	Change
Avg A1C% (std dev)	8.2% (1.3%)	7.4% (0.9%)	-0.8%*
Avg sensor glucose, mg/dL (std dev)	11.2, 202 (2.8, 50)	9.4, 170 (1.3, 24)	-1.8, -32*
Avg coefficient of variation of sensor glucose, % (std dev)	27.8% (6.3%)	27.1% (5.1%)	-0.7%
% Time glucose range			
Avg % 70–180 mg/dL (std dev)	45% (25%)	66% (17%)	20%*
Avg % 70–140 mg/dL (std dev)	21% (18%)	33% (17%)	12%*
Avg. % < 54 mg/dL (std dev)	0.01% (0.02%)	0.04% (0.05%)	0.01%§
Avg % < 70 mg/dL (std dev)	0.2% (0.3%)	0.2% (0.2%)	0.0%§
Avg % > 180 mg/dL (std dev)	54% (25%)	34% (17%)	-20%*
Avg % > 250 mg/dL (std dev)	20% (22%)	7% (8%)	-12%*

Avg % > 300 mg/dL (std dev)	7.7% (10.3%)	1.8% (2.4%)	-5.2%*
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*Averages (avg) with standard deviation (std dev) values in brackets.*

*Number of participants (n) was 299 for all outcomes above except A1C which was 296.*

*\* Change between standard therapy phase and Omnipod 5 System phase was statistically significant.*

*§The difference in the results is non-inferior (not worse) than standard therapy.*

## Change in A1C Analyzed by Baseline A1C

The table below provides information on the average change in A1C from baseline to the end of the 3 months of Omnipod 5 use grouped by what the baseline A1C was prior to starting Omnipod 5. Those with a higher baseline A1C had a greater decrease in A1C.

<b>Subgroup Analysis of Change in Average A1C (%) by Baseline A1C</b>			
<b>Baseline A1C</b>	<b>Avg A1C% Baseline (std dev)</b>	<b>Avg A1C% Omnipod 5 (std dev)</b>	<b>Change*</b>
< 7.0% (n = 42)	6.5% (0.4%)	6.5% (0.6%)	0.0%
7.0 – 7.9% (n = 104)	7.5% (0.3%)	7.1% (0.6%)	-0.4%
8.0 – 8.9% (n = 82)	8.5% (0.3%)	7.6% (0.8%)	-0.8%
≥ 9.0% (n = 68)	10.1% (0.9%)	8.1% (0.9%)	-2.1%

*Averages (avg) with standard deviation (std dev) values in brackets.*

*\* Statistical testing not done to assess significance of change between standard therapy phase and Omnipod 5 System phase.*

## Quality of Life

The table below provides information on the results of surveys assessing diabetes distress, sleep, and hypoglycemia confidence during the standard therapy phase and the 3-month Omnipod 5 System phase in adults with type 2 diabetes. Participants on Omnipod 5 reported experiencing less diabetes distress.

Outcome†	Standard Therapy†	Omnipod 5	Change
Avg Type 2 Diabetes Distress Assessment System (T2-DDAS) survey score	2.5 (1.0)	2.2 (0.9)	-0.3*
% of participants with high diabetes distress (T2-DDAS ≥ 2.0%)	66%	55%*	
Avg Pittsburgh Sleep Quality Index (PSQI) survey score (std dev)	7.3 (4.0)	7.0 (4.1)	-0.4 <sup>§</sup>
% of participants with poor sleep (PSQI > 5.0)	63%	59% <sup>§</sup>	
Avg Hypoglycemia Confidence Scale (HCS) survey score (std dev)	3.2 (0.6)	3.3 (0.6)	0.1
% of participants with low hypoglycemia confidence (HCS < 3.0)	32%	25%	

Averages (avg) with standard deviation (std dev) values in brackets.

<sup>†</sup> Number of participants (n) for T2-DDAS outcomes was 305 for Standard Therapy phase and 301 for Omnipod 5 phase. Number of participants (n) for PSQI outcomes was 304 for Standard Therapy phase and 294 for Omnipod 5 phase. Number of participants (n) for HCS outcomes was 305 for Standard Therapy phase and 300 for Omnipod 5 phase.

\* Change between standard therapy phase and Omnipod 5 System phase was statistically significant and clinically meaningful.

<sup>§</sup> Change in total score between standard therapy phase and Omnipod 5 phase was statistically significant, but the change was not clinically meaningful. As a result, participants on Omnipod 5 did not experience improved sleep.

## Adverse Events

The table below provides a list of the glycemic adverse events per participant that occurred during the 3-month Omnipod 5 System treatment phase. Severe hypoglycemia was the only severe adverse event that occurred that was related to glycemia. Thirteen non-glycemic serious adverse events were reported during the Omnipod 5 phase. All 13 of those events were not related to Omnipod 5 and resulted in a full recovery except one event of stomach pain due to ascites.

<b>Glycemic Adverse Events during the Omnipod 5 System Phase</b>	
<b>Adverse Event Per Participant</b>	<b>Omnipod 5 (n = 305)</b>
Severe hypoglycemia	1
DKA	0
Hyperosmolar hyperglycemic syndrome (HHS)	0

## Settings and Technical Specifications

### Compatible Devices

The Omnipod 5 System is the first wearable, on-body, tubeless, automated insulin delivery system. The Omnipod 5 System consists of a tubeless insulin Pod and the Omnipod 5 App on an Insulet-provided Controller or installed on a compatible smartphone. The Omnipod 5 System works with the Dexcom G6 Continuous Glucose Monitoring System to continuously adapt and automatically deliver insulin according to your personal needs.

#### Compatible Devices for Use with the SmartBolus Calculator

Device Type	Device Manufacturer	Brand Name
Blood Glucose Meter	All FDA-cleared blood glucose meters	
iCGM	Dexcom	Dexcom G6 Continuous Glucose Monitor
Alternate Controller Enabled Insulin Pump (Insulin Pump)	Insulet Corporation	Omnipod 5 ACE Pump (Pod)
Interoperable Automated Glycemic Controller software (Automated Insulin Delivery Software)	Insulet Corporation	SmartAdjust technology

## Quality of Service

The Omnipod 5 System includes two wireless transmission pathways. Insulet defines the quality of service of the Omnipod 5 System for each of the two pathways:

### **Omnipod 5 App to Pod wireless communication definition**

Successful transfer of commands, data, and alarms between the Controller or smartphone running the Omnipod 5 App and Pod when in communication range (within 5 ft during normal operation). The Omnipod 5 App informs the user when transfer of commands, data, and alarms is unsuccessful. For Insulin Delivery commands, the system performance requirements state that communication between the Pod and the Controller or smartphone running the Omnipod 5 App occurs within 8 seconds at a reliability rate of 95%. The Omnipod 5 App will inform the user when there are communication errors between the Pod and the Controller or smartphone. When such an error occurs, the Omnipod 5 App will beep once every 10 seconds and the communication failure will continue to be indicated within the Omnipod 5 App until the communication error is resolved.

### **Pod to Sensor wireless communication definition**

The percentage of sensor glucose values successfully received by the Pod when the Sensor and Pod attempt to communicate every 5 minutes. The System performance requirements state that at least 80% of sensor glucose values will be successfully received by the Pod when the Sensor is worn within line of sight of the Pod. The System informs the user of missing sensor glucose values in real time by the dashes on the Home screen or by missed dots on the Sensor Graph.

For additional information on communication errors in the Omnipod 5 System, see Chapter 21 in the Omnipod 5 Technical User Guide for iPhone. To maintain quality of service when other devices operating in the 2.4 GHz band are around, the Omnipod 5 System uses the coexistence features provided by Bluetooth wireless technology.

## SmartBolus Calculator Inputs & Settings

The following table describes what each SmartBolus Calculator setting does, how you can adjust them and how they are used to calculate a suggested bolus.

Omnipod 5 Setting and Range	How to Enter the Setting	Impacts to Suggested Bolus Calculations
<b>Carbs (grams)</b> 0.1–225 g (0.1 g increments)	Enter in SmartBolus Calculator	Increase in carb amount value increases amount of suggested bolus dose. Decrease in carb amount value decreases amount of suggested bolus dose.
<b>Sensor Glucose Value (mg/dL)</b> 40–400 mg/dL (1 mg/dL increments)	Select USE SENSOR within SmartBolus Calculator (Value comes from your connected Sensor)	Increase in sensor glucose value increases amount of suggested bolus dose. Decrease in sensor glucose value decreases amount of suggested bolus dose.
<b>Blood Glucose Reading (mg/dL)</b> 20–600 mg/dL (1 mg/dL increments)	Enter in SmartBolus Calculator (Value comes from your blood glucose meter)	Increase in BG Reading increases amount of suggested bolus dose. Decrease in BG Reading decreases amount of suggested bolus dose.
<b>Maximum Bolus</b> 0.05–30 U (0.05 U increments)	Enter in Omnipod 5 App Settings or during First Time Setup	Limits amount of single bolus dose.
<b>Extended Bolus</b> (Manual Mode only) ON/OFF	Enter in Omnipod 5 App Settings or during First Time Setup	Allows for bolus delivery over a user-selected period of time .

Omnipod 5 Setting and Range	How to Enter the Setting	Impacts to Suggested Bolus Calculations
<b>Target Glucose &amp; Correct Above</b> Target Glucose: 110-150 mg/dL Correct Above: Target Glucose – 200 mg/dL (10 mg/dL increments, up to 8 segments/day)	Enter in Omnipod 5 App Settings or during First Time Setup	Increase in setting value decreases amount of suggested bolus dose. Decrease in setting value increases amount of suggested bolus dose.
<b>Minimum Glucose for Calculations</b> 50-70 mg/dL (1 mg/dL increments)	Enter in Omnipod 5 App Settings	Disables SmartBolus Calculator when glucose is at or below setting value.
<b>Insulin to Carb Ratio</b> 1-150 g (0.1 g increments, up to 8 segments/day)	Enter in Omnipod 5 App Settings or during First Time Setup	Increase in setting value decreases amount of suggested bolus dose. Decrease in setting value increases amount of suggested bolus dose.
<b>Correction Factor</b> 1-400 mg/dL (1 mg/dL increments, up to 8 segments/day)	Enter in Omnipod 5 App Settings or during First Time Setup	Increase in setting value decreases amount of suggested bolus dose. Decrease in setting value increases amount of suggested bolus dose.
<b>Reverse Correction</b> ON/OFF	Enter in Omnipod 5 App Settings	If “On,” suggested bolus is decreased when glucose is below Target Glucose value.
<b>Duration of Insulin Action</b> 2-6 hours (0.5 hour increments)	Enter in Omnipod 5 App Settings or during First Time Setup	Increase in setting value may decrease amount of suggested bolus dose for longer periods.
<i>Note: The Extended Bolus feature can only be used in Manual Mode. All other therapy settings are used similarly in both Manual and Automated Modes.</i>		



## Considerations about SmartBolus Calculator Recommendations

Keep the following in mind when using the SmartBolus Calculator and reviewing its recommendations:

- The SmartBolus Calculator uses your SmartBolus Calculator settings for the time you are requesting a bolus.
- The SmartBolus Calculator refreshes values every 5 minutes. If you do not start your bolus within 5 minutes of entering the SmartBolus Calculator, the Omnipod 5 System will need to clear the screen so that it has the latest IOB and Sensor information. When changing time zones, always check your IC Ratio and Correction Factor settings for the new time to ensure it still meets your body's true insulin needs.
- The SmartBolus Calculator will suggest doses depending on the carbs you enter and the glucose at that time. Check the nutritional content of your meals to ensure the carbs entered is as accurate as possible. Only enter BG readings that have been obtained with the last 10 minutes or tap **Use Sensor**. These factors will make sure that the SmartBolus Calculator suggests a bolus dose that is suitable for you.

If your sensor glucose value or trend does not match your symptoms or expectations, use a fingerstick blood glucose reading in the SmartBolus Calculator.

When programming and delivering boluses, always confirm that the values you enter and the suggested bolus dose you receive are what you intend and align with what you want at that time.

The Omnipod 5 System has features that help with preventing unintended delivery amounts.

Delivery Limitations	Description
Maximum Bolus Setting	The SmartBolus Calculator will not deliver boluses that exceed the Maximum Bolus Setting you entered (0.05 -30 U). For example, if you rarely deliver more than 5 U boluses, and you set the Maximum Bolus Setting at 5 U, the system will prevent you from delivering anything greater than this amount.
Blood Glucose Reading Time Out	The SmartBolus Calculator will not calculate a suggested bolus dose using a blood glucose reading you entered from the Main Menu that is older than 10 minutes. You will need to enter a more recent blood glucose reading within the SmartBolus Calculator.
SmartBolus Calculator Time Out	The SmartBolus Calculator considers the values you input for a given bolus calculation valid for up to 5 minutes from initial entry of the value into the SmartBolus Calculator. If 5 minutes or more have elapsed, you will be notified that you must refresh the SmartBolus Calculator and input the values again.
Time Zones	The SmartBolus Calculator relies on accurate, updated insulin delivery history and data logging from your Omnipod 5 System. If a time zone change is detected by the Controller or smartphone, the system will notify you. Update time zones on your Omnipod 5 App according to your healthcare provider's guidance.

## Factors Used in the SmartBolus Calculator Calculations

The SmartBolus Calculator accounts for the following when it calculates a bolus:

- Your current glucose (manually entered or from Sensor), Sensor trend—if sensor glucose value is used), Target Glucose, Correct Above threshold, and Correction Factor.
- The carbs you are about to eat or drink and your IC Ratio.
- Your Duration of Insulin Action and insulin on board (IOB).
- Your Minimum Glucose for Calculations.

## Bolus Delivery Performance Specifications

**Bolus size:** 0.05-30 U in 0.05 U increments

### Delivery performance characterization

To assess bolus delivery accuracy, 12 Pods were tested by delivering a minimum, intermediate, and maximum bolus amount (0.05, 5.00, and 30.0 Units).

The following table summarizes the typical bolus performance observed for the requested minimum, intermediate, and maximum size bolus for all pumps tested. For each individual target bolus size, the number of boluses observed is shown along with the average (mean), minimum, and maximum units delivered as measured by a scale.

Individual Bolus Accuracy Performance	Target Bolus Size (Units)	Mean Bolus Size (Units)	Min Bolus Size (Units)	Max Bolus Size (Units)
Min Bolus Delivery Performance (n = 5987 boluses)	0.05 U	0.050 U	0.00 U	0.119 U
Intermediate Bolus Delivery Performance (n = 300 boluses)	5.00 U	5.01 U	4.49 U	5.37 U
Max Bolus Delivery Performance (n = 72 boluses)	30.00 U	30.05 U	29.56 U	30.62 U



The tables that follow show for each requested bolus size, the range of amount of insulin that was observed delivered compared to the requested amount. Each table provides the number and percent of delivered bolus sizes observed within the specified range.

<b>Amount of Insulin Delivery for a Minimum (0.05 U) Bolus Request</b>					
Amount (Units)	<0.0125	0.0125-0.0375	0.0375-0.045	0.045-0.0475	0.0475-0.0525
(% of settings)	(<25%)	(25-75%)	(75-90%)	(90-95%)	(95-105%)
Number and percent of boluses within range	61/5987 (1%)	639/5987 (10.7%)	1284/5987 (21.4%)	504/5987 (8.4%)	1100/5987 (18.4%)
Amount (Units)	0.0525-0.055	0.055-0.0625	0.0625-0.0875	0.0875-0.125	>0.125
(% of settings)	(105-110%)	(110-125%)	(125-175%)	(175-250%)	(>250%)
Number and percent of boluses within range	504/5987 (8.4%)	1192/5987 (19.9%)	582/5987 (9.7%)	121/5987 (2%)	0/5987 (0%)

### Amount of Insulin Delivery for an Intermediate (5.00 U) Bolus Request

Amount (Units)	<1.25	1.25–3.75	3.75–4.50	4.50–4.75	4.75–5.25
(% of settings)	(<25%)	(25–75%)	(75–90%)	(90–95%)	(95–105%)
Number and percent of boluses within range	0/300 (0%)	0/300 (0%)	1/300 (0.3%)	4/300 (1.3%)	287/300 (95.7%)
Amount (Units)	5.25–5.50	5.50–6.25	6.25–8.75	8.75–12.50	> 12.50
(% of settings)	(105–)	(110–125%)	(125–175%)	(175–250%)	(> 250%)
Number and percent of boluses within range	8/300 (2.7%)	0/300 (0%)	0/300 (0%)	0/300 (0%)	0/300 (0%)

### Amount of Insulin Delivery for a Maximum (30.0 U) Bolus Request

Amount (Units)	< 7.5	7.5–22.5	22.5–27.0	27.0–28.5	28.5–31.5
(% of settings)	(< 25%)	(25–75%)	(75–90%)	(90–95%)	(95–105%)
Number and percent of boluses within range	0/72 (0%)	0/72 (0%)	0/72 (0%)	0/72 (0%)	72/72 (100%)
Amount (Units)	31.5–33.0	33.0–37.5	37.5–52.5	52.5–75.0	> 75.0
(% of settings)	(105–110%)	(110–125%)	(125–175%)	(175–250%)	(> 250%)
Number and percent of boluses within range	0/72 (0%)	0/72 (0%)	0/72 (0%)	0/72 (0%)	0/72 (0%)

## Basal Delivery Specifications

**Basal rate:** Units/hr. Range: 0 U/hr to Maximum Basal Rate in 0.05 U/hr increments.

**Maximum Basal Rate:** Select one value between 0.05-30 U/hr in 0.05 U/hr increments. Default is 3.00 U/hr.

### Delivery performance characterization

To assess basal delivery accuracy, 12 Pods were tested by delivering at low, medium, and high basal rates (0.05, 1.00, and 30.0 U/hr).

The following tables report the typical basal performance (median) observed, along with the lowest and highest results observed for the low, medium, and high basal rate settings for all pumps tested with no warm-up period. For each time period, the tables show the volume of insulin requested in the first row and the volume that was delivered as measured by the scale in the second row.

Low Basal Rate Delivery Performance (0.05 U/hr)			
Basal Duration (Number of units requested)	1 hour (0.05 U)	6 hours (0.30 U)	12 hours (0.60 U)
Amount Delivered	0.049 U	0.30 U	0.59 U
[min, max]	[0.00, 0.12]	[0.13, 0.57]	[0.34, 0.99]

Medium Basal Rate Delivery Performance (1.00 U/hr)			
Basal Duration (Number of units requested)	1 hour (1.00 U)	6 hours (6.00 U)	12 hours (12.00 U)
Amount Delivered	0.99 U	5.97 U	11.88 U
[min, max]	[0.65, 1.55]	[5.06, 6.87]	[10.53, 13.26]

High Basal Rate Delivery Performance (30.00 U/hr)		
Basal Duration (Number of units requested)	1 hour (30.00 U)	6 hours (180.00 U)
Amount Delivered	29.82 U	179.33 U
[min, max]	[28.85, 31.39]	[177.49, 181.15]
<i>Note: A measurement at the 12-hour period with a 30.0 U/hr basal rate is not applicable to the Omnipod 5 System as the reservoir will empty at approximately 6 2/3 hours at this rate.</i>		



## Blockage (Occlusion) Detection

**Caution:** ALWAYS check your glucose frequently when you use very low basal rates. Checking your glucose frequently can alert you to the presence of a blockage (occlusion). Blockages can result in hyperglycemia.

A blockage (occlusion) is an interruption in insulin delivery from the Pod. If the Omnipod 5 System detects a blockage, it sounds a hazard alarm and prompts you to deactivate and change your Pod.

A blockage hazard alarm sounds when an average of 3 units to 5 units of missed insulin occurs. The following table depicts blockage detection for three different situations when using U-100 insulin. For example, if the Pod's cannula becomes blocked when delivering a 5 U bolus, 35 minutes may pass before the Pod sounds a hazard alarm.

























	Time between blockage and Pod alarm	
	Typical time	Maximum time
5.00 U bolus	33 minutes	35 minutes
1.00 U/hr basal	3.0 hr	5.5hr
0.05 U/hr basal	51 hr	80 hr (Pod expiration)






If a blockage spontaneously clears up, a volume of insulin could be released. That volume would not exceed the volume of the programmed insulin intended for delivery.





If your Omnipod 5 System detects a potential blockage to your insulin delivery, it will set a blockage alarm to sound. If a blockage alarm is set to alarm while an immediate bolus is in progress, the alarm is delayed until completion of the bolus.

## Omnipod 5 System Label Symbols








The following symbols appear on the Omnipod 5 System or its packaging:

Symbol	Meaning	Symbol	Meaning
	Do not re-use		MR unsafe
	Refer to instruction manual / booklet		Do not use if package is damaged and consult instructions for use
	Sterilized using ethylene oxide		Type BF applied part
	Date of manufacture		Manufacturer
	Country of Manufacture - United States of America		Country of Manufacture - Malaysia
	Country of Manufacture - China		Compatible with
	Batch code		Keep dry
	Use-by date		Temperature limit
	Catalogue number		Humidity limitation
	Serial number		Atmospheric pressure limitation
	UK Conformity Assessed		Australian Regulatory Compliance Mark
	Marking of conformity		Importer

Symbol	Meaning
<b>IP28</b>	Protects persons against access to hazardous parts with fingers and protects against solid foreign object ingress of diameter 12.5 mm or greater; Submersible: Waterproof to 7.6 meters (25 feet) for up to 60 minutes
	Non-pyrogenic fluid path
	Do not dispose with household waste
	Single sterile barrier system
	Compatible with U-100 Insulin Only
<b>FCC ID:</b>	Federal Communication Commission Identifier with number
<b>IC:</b>	Complies with ISED Canada Radio Standards Specifications
	Switzerland Authorized Representative

Symbol	Meaning
<b>IP22</b>	Protects persons against access to hazardous parts with fingers and protects against solid foreign object ingress of diameter 12.5 mm or greater; avoid liquid
	Medical device
<b>RoHS</b>	RoHS compliant
	Single patient multiple use
	Consult instructions for use or consult electronic instructions for use
<b>Rx ONLY</b>	Caution: Federal law restricts this device to sale by or on the order of a physician
<b>HVIN:</b>	Hardware version identification number
	Authorized representative in the European Community/ European Union

Symbol	Meaning
	(France) The Triman indicates that the product must be sorted or returned to a collection point.
	(France) This product must be separated from conventional performing DASTRI for recycling.
	(France) Electronic performing waste must be stored in the secure DASTRI purple box. These purple boxes are distributed free of charge in pharmacies.
	(France) Packaging intended for recycling
	Charging cable
	Fill Syringe and Needle Assembly
	Controller skin

Symbol	Meaning
	Intertek Authorized Product Certification Mark
	(France) This pictogram means that the product contains a piercing object.
	(France) All pharmacies distribute and collect DASTRI needle boxes free of charge from self-treatment patients.
	(France) The puncture waste must be placed in a DASTRI needle box. These needle boxes are distributed by pharmacies.
	Charging adapter
	Pod
	Omnipod 5 Controller



# Staying Safe while Using the Omnipod 5 System

## General Warnings

**Warning:** Read all the instructions provided in the Instructions for Use before using the Omnipod 5 System. Monitor your glucose with the guidance of your healthcare provider. Undetected hyperglycemia or hypoglycemia can result without proper monitoring.

**Warning:** DO NOT start to use your system or change your settings without adequate training and guidance from your healthcare provider. Initiating and adjusting settings incorrectly can result in over-delivery or under-delivery of insulin, which could lead to hypoglycemia or hyperglycemia. Settings that impact insulin delivery mainly include: Pod Shut-Off, basal rate(s), Max Basal Rate, Max Bolus, Correction Factor(s), Insulin to Carb (IC) Ratio(s), Minimum Glucose for Calculations, Target Glucose and Correct Above, and Duration of Insulin Action.

**Warning:** DO NOT rely upon the Instructions for Use in any way in connection with your personal healthcare, related decisions, and treatment. This User Guide is informational only and not intended as medical or healthcare advice or recommendations to be used for diagnosis, treatment, or for any other individual needs. This User Guide is not a substitute for medical or healthcare advice, recommendations, and/or services from a qualified healthcare provider. All such decisions and treatment should be discussed with a qualified healthcare provider who is familiar with your individual needs.

**Warning:** DO NOT use the Omnipod 5 System if you are unable or unwilling to use it as instructed by this User Guide and your healthcare provider. Failure to use this system as intended could result in over-delivery or under-delivery of insulin which can lead to hypoglycemia or hyperglycemia.

**Warning:** ALWAYS keep an emergency kit with you to quickly respond to any diabetes emergency or in the case that your Omnipod 5 System stops working. Always carry supplies to perform a Pod change should you need to replace your Pod at any time.

**Warning:** DO NOT use the Omnipod 5 System if you do not have adequate vision and/or hearing to recognize all functions of the Omnipod 5 System including alerts, alarms, and reminders according to instructions.

**Warning:** DO NOT use the Omnipod 5 System at low atmospheric pressure (below 700hPA). You could encounter such low atmospheric pressures at high elevations, such as when mountain climbing or living at elevations above 10,000 feet (3,000 meters). Change in atmospheric pressure can also occur during take-off with air travel. Unintended insulin delivery can occur if there is expansion of tiny air bubbles that may exist inside the Pod. This can result in hypoglycemia. It is important to check your glucose frequently when flying to avoid prolonged hypoglycemia.

**Warning:** DO NOT use the Omnipod 5 System in oxygen rich environments (greater than 25% oxygen), which include home or surgical areas that use supplementary oxygen and hyperbaric chambers. Hyperbaric, or high pressure, chambers are sometimes used to promote healing of diabetic ulcers, or to treat carbon monoxide poisoning, certain bone and tissue infections, and decompression sickness. Exposure to oxygen rich environments could result in combustion of the Pod or Omnipod 5 Controller, which can cause severe burns to the body.

**Warning:** DO NOT use the Omnipod 5 System in high atmospheric pressure environments (above 1060 hPA), which can be found in a hyperbaric chamber. Hyperbaric, or high pressure, chambers, are sometimes used to promote healing of diabetic ulcers, or to treat carbon monoxide poisoning, certain bone and tissue infections, and decompression sickness. Exposure to high atmospheric pressure environments can damage your Pod and Omnipod 5 Controller which could result in under-delivery of insulin which can lead to hyperglycemia.

**Warning:** Device components including the Pod, Dexcom G6 Sensor, and Dexcom G6 Transmitter may be affected by strong radiation or magnetic fields. Device components must be removed (and the Pod and Sensor should be disposed of) before X-ray, Magnetic Resonance Imaging (MRI), or Computed Tomography (CT) scan (or any similar test or procedure). In addition, the Controller and smartphone should be placed outside of the procedure room. Exposure to X-ray, MRI, or CT, treatment can damage these components. Check with your healthcare provider on Pod removal guidelines.

**Warning:** DO NOT expose any Omnipod 5 System products or supplies to extreme temperatures as this results in them not functioning properly. Store all Omnipod 5 System products and supplies, including unopened Pods, in a cool, dry place.

## Insulin Warnings

**Warning:** ONLY use rapid-acting U-100 NovoLog (insulin aspart), Humalog (insulin lispro), and Admelog (insulin lispro) insulin in the Omnipod 5 System as they have been tested and found to be safe for use with this system. NovoLog, Humalog, and Admelog are compatible with the Omnipod 5 System for use up to 72 hours (3 days). Follow your healthcare provider's directions for how often to replace the Pod.

**Warning:** AVOID administering insulin, such as by injection or inhalation, while wearing an active Pod as this could result in hypoglycemia. The Omnipod 5 System cannot track insulin that is administered outside of the system. Consult your healthcare provider about how long to wait after manually administering insulin before you start Automated Mode.



**Warning:** ALWAYS be prepared to inject insulin with an alternative method if insulin delivery from the Pod is interrupted. You are at increased risk for developing hyperglycemia if insulin delivery is interrupted because the Pod only uses rapid-acting U-100 insulin. Failure to have an alternative method of insulin delivery can lead to very high glucose or diabetic ketoacidosis (DKA). Ask your healthcare provider for instructions for handling interrupted insulin delivery.

**Warning:** NEVER use insulin that is expired or cloudy in the Pod as it may be damaged. Using damaged or expired insulin could cause hyperglycemia and put your health at risk.

## Glucose Warnings

**Warning:** ALWAYS follow your healthcare provider's guidance on appropriate glucose monitoring to avoid hyperglycemia and hypoglycemia.

**Warning:** Glucose below 70 mg/dL may indicate hypoglycemia (low glucose). Glucose above 250 mg/dL may indicate hyperglycemia (high glucose). Follow your healthcare provider's suggestions for treatment.

**Warning:** ALWAYS promptly treat hypoglycemia. Glucose at or below 55 mg/dL indicates significant hypoglycemia (very low glucose). If left untreated, this could lead to seizure, loss of consciousness or death. Follow your healthcare provider's recommendations for treatment.

**Warning:** ALWAYS promptly treat glucose below 70 mg/dL (hypoglycemia) according to your healthcare provider's recommendations. Symptoms of hypoglycemia include weakness, sweating, nervousness, headache, or confusion. If left untreated, hypoglycemia can lead to seizure, loss of consciousness, or death.

**Warning:** DO NOT wait to treat hypoglycemia (low glucose) or symptoms of hypoglycemia. Even if you cannot check your glucose, waiting to treat symptoms could lead to severe hypoglycemia, which can lead to seizure, loss of consciousness, or death.

**Warning:** ALWAYS promptly treat hyperglycemia (high glucose) according to your healthcare provider's recommendations. Symptoms of hyperglycemia include fatigue, thirst, excess urination, or blurry vision. If left untreated, hyperglycemia can lead to diabetic ketoacidosis (DKA), or death.

**Warning:** DO NOT wait to treat DKA. If left untreated, DKA can quickly lead to breathing difficulties, shock, coma, or death. **Warning:** ALWAYS treat "LOW" or "HIGH" sensor glucose values and "LOW" or "HIGH" blood glucose readings according to your healthcare provider's recommendations. These values can indicate potentially serious conditions requiring immediate medical attention. If left untreated, these situations can quickly lead to diabetic ketoacidosis (DKA), shock, coma, or death.

**Warning:** NEVER drive yourself to the emergency room if you need emergency medical care. Ask a friend or family member to take you to the emergency room or call an ambulance.

**Warning:** ALWAYS be aware of your current sensor glucose value, trust how your body feels, and do not ignore symptoms of high and low glucose. Even though insulin delivery adjusts automatically in Automated Mode with the goal of bringing your glucose level to your defined Target Glucose, severe hypoglycemia or hyperglycemia may still occur.

If your sensor glucose values do not match your symptoms, ALWAYS check your blood glucose using a BG meter, consider treatment and/or Sensor calibration if necessary. ALWAYS switch to Manual Mode if you feel you are receiving inaccurate sensor glucose values.

- Erroneously high sensor glucose values can cause excessive insulin delivery, leading to severe hypoglycemia, seizure, loss of consciousness or death.
- Erroneously low sensor glucose values can cause prolonged insulin suspension leading to hyperglycemia, DKA, or death.

If you are having symptoms that are not consistent with your blood glucose readings and you have followed all instructions described in this User Guide, contact your healthcare provider.

## Pod Warnings

**Warning:** ALWAYS dispose of the Pod according to local waste disposal guidelines. The Pod is considered biohazardous after use and can potentially transmit infectious diseases.

**Warning:** DO NOT use a Pod if you are sensitive to or have allergies to acrylic adhesives, or have fragile or easily damaged skin. Applying a Pod under these circumstances could put your health at risk.

**Warning:** DO NOT allow small children access to small parts, such as the Pod and its accessories, including the tab. Small parts could be swallowed and pose a choking hazard. If ingested or swallowed, these small parts could cause internal injury or infection.

**Warning:** NEVER inject large bubbles or pockets of air when filling the Pod with insulin. Air in the system takes up space where insulin should be and can affect insulin delivery. Doing so could result in over-delivery or under-delivery of insulin, which can lead to hypoglycemia or hyperglycemia.

**Warning:** NEVER use a Pod if, while you are filling the Pod, you feel significant resistance while pressing the plunger down on the fill syringe. Do not try to force the insulin into the Pod. Significant resistance may indicate that the Pod has a mechanical defect. Using this Pod could result in under-delivery of insulin that can lead to hyperglycemia.

**Warning:** DO NOT apply a Pod if you see the cannula is extended beyond the adhesive backing after the tab on the Pod is removed. This cannula cannot be inserted resulting in under-delivery of insulin which could lead to hyperglycemia.

**Warning:** ALWAYS check the infusion site often to make sure the cannula is properly inserted and secured to the Pod. Verify that there is no wetness or scent of insulin, which may indicate that the cannula has dislodged. An improperly inserted, loose, or dislodged cannula could result in under-delivery of insulin which can lead to hyperglycemia.

**Warning:** NEVER inject insulin (or anything else) into the fill port while the Pod is on your body. Attempting to do so may result in the over-delivery or under-delivery of insulin, which could lead to hypoglycemia or hyperglycemia.

**Warning:** DO NOT apply a new Pod until you have deactivated and removed the old Pod. A Pod that is not deactivated properly can continue to deliver insulin as programmed, putting you at risk of over-delivery of insulin, which can lead to hyperglycemia.

**Warning:** DO NOT continue using an activated Pod that fails to beep during a diagnostic test. The Pod should be changed immediately. If the Omnipod 5 App fails to beep during a diagnostic test, call Customer Care immediately. Continuing to use the Omnipod 5 System in these situations may put your health and safety at risk.

**Warning:** DO NOT expose a Pod to direct sunlight for long periods of time. Remove your Pod prior to using hot tubs, whirlpools, or saunas. These conditions could expose the Pod to extreme temperatures and may also affect the insulin inside the Pod which could lead to hyperglycemia.

**Warning:** Do NOT expose your Pod to water depths greater than 25 feet (7.6 meters) or for longer than 60 minutes because damage to the Pod can occur. This could result in over-delivery or under-delivery of insulin, which can lead to hypoglycemia or hyperglycemia.

## Controller and Smartphone Warnings

**Warning:** ALWAYS identify the Omnipod 5 App as yours before using it. Using someone else's Omnipod 5 App can result in incorrect insulin delivery for both of you.

**Warning:** ALWAYS keep your Omnipod 5 App secure and within your control to ensure others cannot make changes to your insulin therapy which can lead to hypoglycemia or hyperglycemia. Do not share your Controller PIN or your smartphone screen lock security with anyone.

**Warning:** ALWAYS contact Customer Care if your Omnipod 5 System Controller is damaged and not working properly. If a Controller replacement is needed, ALWAYS consult with your healthcare provider to get instructions on using other backup insulin delivery methods, like insulin injections. Make sure to check your glucose frequently.

**Warning:** You will NOT be able to use the Omnipod 5 App if:

- You have not installed a required update to the Omnipod 5 App.
- An update for the Omnipod 5 App is not yet available to fix a known issue.
- Your smartphone device is no longer compatible with use of the Omnipod 5 App.
- The operating system of your smartphone has not yet been tested for safety by Insulet.

Use the Insulet-provided Controller or a different insulin delivery method. Failure to deactivate your Pod and use another form of insulin delivery could result in the over-delivery or under-delivery of insulin. This can lead to hypoglycemia or hyperglycemia.

## Alarms Warnings

**Warning:** ALWAYS respond to Hazard Alarms as soon as they occur. Pod Hazard Alarms indicate that insulin delivery has stopped. Failure to respond to a Hazard Alarm could result in under-delivery of insulin which can lead to hyperglycemia.

**Warning:** ALWAYS monitor your glucose and follow your healthcare provider's treatment guidelines when you stop receiving insulin due to a blockage (occlusion). Not taking action promptly could result in under-delivery of insulin which can lead to hyperglycemia or diabetic ketoacidosis (DKA)

**Warning:** You must use the Omnipod 5 App within 15 minutes of the onset of the Pod Shut-Off advisory alarm. If you do not respond to this alarm within this time, the Omnipod 5 App and Pod sound a hazard alarm and your Pod stops delivering insulin which can lead to hyperglycemia.

## Sensor Warnings

**Warning:** ALWAYS make sure you are using the Sensor per manufacturer's instructions. Do not extend the sensor wear beyond the recommended duration and do not start a sensor past its Use By date. The Omnipod 5 System relies on accurate, current sensor glucose values to determine your insulin needs. Incorrect use of the Sensor could result in over-delivery or under-delivery of insulin, which could lead to hypoglycemia or hyperglycemia.

**Warning:** Do NOT use Omnipod 5 System if you are taking hydroxyurea, a medication used in the treatment of diseases including cancer and sickle cell anemia. Your Dexcom G6 readings could be falsely elevated and could result in over-delivery of insulin which can lead to severe hypoglycemia.

**Warning:** ALWAYS confirm the Dexcom G6 Transmitter serial number you save in the Omnipod 5 App matches the one you are wearing. In cases where more than one person in the household uses the Dexcom G6, mis-matching Transmitter serial numbers could result in over-delivery or under-delivery of insulin, which can lead to hypoglycemia and hyperglycemia.

## SmartBolus Calculator Warnings

**Warning:** AVOID changing your SmartBolus Calculator settings before consulting with your healthcare provider. Incorrect changes could result in over-delivery or under-delivery of insulin, which can lead to hypoglycemia or hyperglycemia. Settings that impact bolus calculations mainly include: Max Bolus, Minimum Glucose for Calculations, Correct Above, Correction Factor(s), Insulin to Carb (IC) ratio(s), Duration of Insulin Action, and Target Glucose.

**Warning:** ALWAYS check your glucose frequently when you use the extended bolus function to avoid hypoglycemia or hyperglycemia.

**Warning:** AVOID entering a blood glucose reading that is older than 10 minutes. If you use a reading older than 10 minutes, the bolus calculator could calculate and recommend an incorrect dose, which could result in over-delivery or under-delivery of insulin. This can lead to hypoglycemia or hyperglycemia.

## SmartAdjust Technology Warnings

**Warning:** DO NOT use SmartAdjust technology in pregnant women, critically ill patients, and those on dialysis. The safety of SmartAdjust technology has not been evaluated in these populations. Consult with your healthcare provider if any of these conditions apply to you before using SmartAdjust technology.

**Warning:** SmartAdjust technology should NOT be used by anyone under the age of 2 years old. SmartAdjust technology should also NOT be used in people who require less than 5 units of insulin per day as the safety of the technology has not been evaluated in this population.

**Warning:** ALWAYS monitor for symptoms of hypoglycemia while the Activity feature is enabled. Hypoglycemia can still occur when using the Activity feature. Follow your healthcare provider's advice on hypoglycemia avoidance and treatment. If untreated, hypoglycemia can lead to seizure, loss of consciousness or death.

## General Precautions

**Caution:** Federal (US) law restricts this device to sale by or on the order of a physician.

**Caution:** DO NOT use any component of the Omnipod 5 System (smartphone, Controller, Pod) if you suspect damage after an unexpected event such as dropping or hitting on a hard surface. Using damaged components may put your health at risk as the system may not be working properly. If you are unsure if one or more of your components are damaged, stop using the system and call Customer Care for support.

**Caution:** ONLY use the Omnipod 5 System with authorized devices (Omnipod 5 App, Controller and Pod and Dexcom G6). DO NOT attempt to use the Omnipod 5 System with unauthorized devices. Attempting to use the Omnipod 5 System with unauthorized devices could interrupt your insulin delivery and put your health and safety at risk.

**Caution:** ALWAYS be aware of possible changes to your time zone when traveling. If you do not update your time zone, your insulin therapy will be delivered based on your old time zone which may cause disruptions in your insulin delivery schedule and inaccurate history logs. Talk to your healthcare provider about how to manage your insulin delivery while traveling between time zones.

**Caution:** ALWAYS check your glucose frequently during amusement park rides and flying or other situations where sudden changes or extremes of air pressure, altitude, or gravity may be occurring. Though the Omnipod 5 System is safe to use at atmospheric pressures typically found in airplane cabins during flight, the atmosphere pressure in an airplane cabin can change during flight, which may affect the Pod's insulin delivery. Rapid changes in altitude and gravity, such as those typically found on amusement park rides or flight take-off and landing, can affect insulin delivery, leading to possible hypoglycemia or injury. If needed, follow your healthcare provider's treatment instructions.

**Caution:** NEVER use a blow dryer or hot air to dry the Controller or Pod. Extreme heat can damage the electronics.

**Caution:** ALWAYS check your glucose frequently when you use very low basal rates. Checking your glucose frequently can alert you to the presence of a blockage (occlusion). Blockages can result in hyperglycemia.

**Caution:** ALWAYS tap START INSULIN to start insulin delivery after a pause period has ended during Manual Mode use. Insulin delivery does not automatically start after a pause. If you do not start insulin delivery, you could develop hyperglycemia.

**Caution:** AVOID storing Omnipod 5 System components and supplies in a place where children, pets, or pests may access. Unintended access could result in damage to system parts or impact their sterility.

**Caution:** DO NOT use a Pod if the sterile packaging is open or damaged, the Pod has been dropped after removal from the package, or the Pod is expired as the Pod may not work properly and increase your risk of infection.



**Caution:** ALWAYS check your glucose prior to delivering a bolus so you are better informed on how much to take. Delivering a bolus without checking your glucose could result in the over-delivery or under-delivery of insulin, which can lead to hypoglycemia or hyperglycemia.

**Caution:** DO NOT make changes or modifications to any component of the Omnipod 5 System that have not been authorized by Insulet Corporation. Unauthorized tampering with the System can revoke your right to operate it.

**Caution:** When there is no communication between the Pod and the Controller or smartphone, the Pod continues delivering insulin according to settings active on the Pod before losing communication. For example, automated insulin delivery from the Pod will continue in Automated Mode. Restoring communication is needed to see your system status, notifications, and to send new instructions to the Pod. To restore communication try bringing the Controller or smartphone within 5 feet (1.5 m) of the Pod.

**Caution:** DO NOT use portable radio frequency (RF) communications equipment (including peripherals such as antenna cables and external antennas) closer than 12 inches (30 cm) to any part of the Omnipod 5 System, as it may impact the communication between your smartphone or Controller and your Pod.

## Controller and Smartphone Precautions

**Caution:** Connect ONLY to trusted Wi-Fi networks with your Controller or smartphone. AVOID connecting to public Wi-Fi networks, such as those found in airports, coffee shops, etc, as these networks are not secure and could result in exposing your Controller or phone to malware. DO NOT connect to public Wi-Fi networks during first-time setup of your Omnipod 5 System.

**Caution:** DO NOT navigate away from the Omnipod 5 App while you are in the process of making changes to your insulin delivery settings. If you leave the App before you are able to save the setting change and before the App is able to put the setting change into effect, the system will continue to use your last saved settings. As a result, you may continue with therapy settings that you did not intend. If you are unsure about whether your changes were saved, review your settings.

**Caution:** ALWAYS keep your Controller or smartphone safe and within your control to ensure others cannot make changes to your insulin therapy. Do not share your Controller or smartphone screen lock security with anyone.

**Caution:** ALWAYS make sure your battery has adequate charge prior to installing a software update.

**Caution:** If you decide later to switch between the Controller and your smartphone, you will need to start setup again on the new device. New setup requires entry of all your personalized settings. Consult with your healthcare provider if you are unsure about how to set up the new device. If you are wearing a Pod and need to switch devices, you will need to deactivate your Pod and activate a new one, since the Pod cannot communicate with two devices at one time.

**Caution:** DO NOT reset the Omnipod 5 App before checking with your healthcare provider. This will erase all of your settings, Adaptive Basal Rate, and history, and require you to change your active Pod. Before resetting make sure you have a current record of your settings and a new Pod with supplies to use when restarting the app.

## Controller-specific Precautions

**Caution:** AVOID turning Automatic Time Zone OFF on the Controller. If you turn Automatic Time Zone OFF, your Controller will not be able to detect when your device time zone and insulin delivery time zone do not match. Delivering insulin based on a different time zone than your local time may cause errors in insulin delivery and data logging, which can lead to hypoglycemia or hyperglycemia.

**Caution:** ALWAYS plug in and charge your Controller when you see the low battery message. If the battery charge becomes critically low, the Controller turns itself off, and you will not receive a low battery hazard alarm. Without the use of the Controller, you will not be able to make changes to your insulin delivery, which could result in the over-delivery or under-delivery of insulin that can lead to hypoglycemia or hyperglycemia.

**Caution:** DO NOT expose your Controller battery to high heat [ $>86^{\circ}\text{F}$  ( $>30^{\circ}\text{C}$ ) during storage and  $>104^{\circ}\text{F}$  ( $>40^{\circ}\text{C}$ ) during use]. Do not puncture, crush, or apply pressure to your battery. Failure to follow these instructions could result in an explosion, fire, electric shock, damage to the Controller or battery, or battery leakage.

**Caution:** DO NOT expose your Controller to extreme temperatures while in storage or during use. Extreme heat or cold can cause the Controller to malfunction. Extreme heat is defined as >86°F (30°C) during storage and >104°F (40°C) during use. Extreme cold is defined as <32°F (0°C) during storage and <41°F (5°C) during use.

**Caution:** Use ONLY the USB charging cable that you received in the box with your Controller. AVOID using alternative charging cables or other accessories, as they may damage the Controller or affect the way it charges in the future. If you must use a different cable, use only cables less than or equal to 4 feet (1.2 meters) in length.

**Caution:** DO NOT place the Controller in or near water because the Controller is not waterproof. Failure to do so could result in damage to the Controller.

**Caution:** DO NOT use solvents to clean your Controller. DO NOT immerse your Controller in water as it is not waterproof. The use of solvents or immersion in water could result in damage to the Controller.

**Caution:** DO NOT allow debris or liquid to get into the USB port, speaker, sound/vibrate button, or Power button while cleaning the Controller. Failure to do so could result in damage to the Controller.

**Caution:** ONLY press the Power button on the Controller for less than 1 second or you may accidentally turn the power off. If the Controller displays a message asking if you would like to “Power Off”, tap outside the message to cancel the message. If you accidentally power off your Controller, you can miss important notifications and alarms from the Omnipod 5 App. If you do not hear alarms and notifications from your Controller, you might not make the changes you need to make to your insulin therapy in a timely manner. The Pod will alarm regardless of whether the state of the Controller is On or Off.

**Caution:** Do not use the Controller if it appears damaged or is not working as it should. Do not use the Controller if its screen is broken.

## Smartphone-specific Precautions

**Caution:** DO NOT stop the Omnipod 5 App in a way that stops it from running in the background (called force stopping) on your smartphone, and do not power off your smartphone. The Omnipod 5 App must be open or be running in the background in order to display and sound alarms on the smartphone. If the App is not running, you could miss important alarms and notifications on the smartphone. If you do not hear alarms and notifications from your smartphone, you might not make the changes you need to make to your therapy in a timely manner. Your Pod will continue to operate and sound alarms. In addition, if you stop the Omnipod 5 App while sending commands to the Pod, the command can be interrupted and may not be completed.

**Caution:** DO NOT delete the Omnipod 5 App while you have an active Pod, and DO NOT clear the Omnipod 5 App data. If you do, your Pod will remain active, but you will not be able to control your Pod even if you re-install or re-open the App. You must remove the Pod in order to stop receiving insulin.

**Caution:** DO NOT attempt to use the Omnipod 5 App on a smartphone device with unauthorized modifications. If you do, you will not be able to use the Omnipod 5 App.

**Caution:** DO NOT install apps on your smartphone from untrusted sources. These apps may contain malware that may impact use of the Omnipod 5 App. Install apps only from trusted sources (i.e. the App Store). If you do not know what an App is, do not install it, regardless of the source.

It is not advised to install any app from a source other than the App Store on your smartphone that is running the Omnipod 5 App. Doing so may put you at risk of unintentionally installing malware on your device.

Malware, or “malicious software” from unknown third-parties, is designed to damage your device and/or read your private information. Unknown Apps and unknown downloads are the most common method for spreading malware. Malware could prevent the Omnipod 5 System from functioning as intended, causing over-delivery or under-delivery of insulin, which could lead to hypoglycemia or hyperglycemia.

If you believe you may have an App installed from a third-party source, take steps to delete that App. If you believe you may have malware on your device, discontinue use of your Omnipod 5 System and use an alternate means of insulin delivery until you can resolve. Delete any Apps installed from a third-party source, restore your phone to factory default settings, and contact Insulet Customer Care.

**Caution:** DO NOT enable any app development settings on your smartphone. Enabling these settings may cause issues with the Omnipod 5 App and prevent normal app operation.

## Pod Precautions

**Caution:** ALWAYS activate a new Pod in a timely manner. Waiting too long between Pod changes could result in under-delivery of insulin which can lead to hyperglycemia. If another Pod is not available, use a different insulin delivery method.

**Caution:** ALWAYS insert the fill syringe into the fill port and not into any other location on the Pod. Do not insert the fill syringe more than once into the fill port. Use only the fill syringe and needle that came with your Pod. The fill syringe is intended for single use only and should only be used with the Omnipod 5 System. Failure to follow the instructions above may result in damage to your Pod.

**Caution:** NEVER reuse the Pod or fill syringe or try to use a fill syringe that did not come with your Pod. Always dispose of the used Pod and fill syringe according to local disposal guidelines. Only use a new Pod with included fill syringe with each Pod change. Always carry supplies to perform a Pod change should you need to replace your Pod at any time. **Caution:** ALWAYS follow these steps in preparing your site. If your site is not cleaned properly or if your hands are dirty, you increase your risk of infection.

- Wash your hands.
- Clean the top of the insulin vial with an alcohol prep swab.
- Clean your infusion site with soap and water or an alcohol prep swab, and let it dry completely.
- Keep sterile materials away from any possible contamination.

**Caution:** ALWAYS apply the Pod as directed. If you are applying a Pod in a place that does not have a lot of fatty tissue, squeeze the skin around the Pod until after the cannula has inserted. Blockages (occlusions) may result if you do not use this technique for lean areas.

**Caution:** ALWAYS rotate insulin infusion sites to help prevent infusion site complications like scar tissue and infection. Rotating insulin infusion sites reduces the risk of scarring. Using a site with scar tissue can lead to problems with insulin absorption.

**Caution:** ALWAYS check for signs of infection often. If an infusion site shows signs of infection:

- Immediately remove the Pod and apply a new Pod at a different infusion site.
- Contact your healthcare provider. Treat the infection according to instructions from your healthcare provider.

If you see blood in your cannula, check your glucose more frequently to ensure insulin delivery has not been affected. If you experience unexpected high glucose, change your Pod.

**Caution:** Use caution while cleaning the Pod on your body. Hold the Pod securely so the cannula does not kink and the Pod does not detach from your skin.

**Caution:** DO NOT use sprays, strong detergents, or solvents on or near your Pod. The use of spray sunscreen, DEET-containing bug spray, personal care sprays, and other aerosols, detergents, and strong chemicals on the Pod can irritate the infusion site or damage the Pod, increasing the risk that the Pod housing will crack. Pod damage may result in the ingress of external fluids which can impact the ability of the Pod to function properly. This may result in the over-delivery or under-delivery of insulin, which can lead to hypoglycemia or hyperglycemia.

## Alarm Precautions

**Caution:** ALWAYS respond to Pod Expired, Low Pod Insulin, and Pod Shut-Off Advisory Alarms when they occur. These alarms escalate to Hazard Alarms if no action is taken. When Hazard Alarms occur, insulin delivery stops.

**Caution:** AVOID leaving your Controller or smartphone in a place that would prevent you from hearing alarms and notifications from your Omnipod 5 App. Delivery of insulin in Manual Mode or Automated Mode continues as programmed if you move away from your Controller or smartphone.

**Caution:** Permanently silencing a Pod alarm requires the Pod to be removed from your body. Once removed and discarded, promptly activate a new Pod to avoid going too long without insulin, which could lead to hyperglycemia.

**Caution:** ALWAYS check the alarm function when you change the Pod if you suspect any issue with the Pod's sounds to ensure you don't miss important alarms during use.

**Caution:** ALWAYS make sure you can hear alarms and notifications when paired to alternative audio devices (e.g. Bluetooth speaker, headphones).

**Caution:** AVOID setting your Controller or smartphone to Silent, Vibrate, or any other setting that prevent you from hearing alarms and notifications from your Omnipod App. Avoid the use of tools that limit sounds and notifications, including but not limited to:

- Android: Digital Wellbeing, Private Space, Notification cooldown.
- iPhone: Screen Time, Focus Mode, Hide App, Lock App.

If you do not hear alarms and notifications from your Controller or smartphone, you might not make the changes you need to make to your insulin therapy in a timely manner. Your Pod will still sound, and you will be able see the Alarm or Notification displayed on the Omnipod 5 App.

## Sensor Precautions

**Caution:** You cannot use the Dexcom G6 receiver with the Omnipod 5 System because the Omnipod 5 System is compatible only with the G6 app on a smartphone.





# Troubleshooting Hypoglycemia (Low Glucose)

## Blood Glucose (BG) < 70 mg/dL with Symptoms

SmartAdjust technology automatically decreases or pauses insulin delivery every 5 minutes when glucose is below the Target Glucose to protect against hypoglycemia. It will always pause in Automated Mode when your glucose is below 60mg/dL.

### Hypoglycemia Symptoms

- Shakiness
- Weakness
- Tingling
- Fatigue
- Blurred vision
- Anxiety
- Hunger
- Headache
- Drowsiness
- Sweating
- Rapid heartbeat
- Dizziness
- Cold, clammy skin
- Confusion
- Personality change

**If you have symptoms of low glucose, check your blood glucose.**

**If your glucose is less than 70 mg/dL:**

1. Treat with 5–15 grams of fast-acting carbohydrate. (Fast acting carbs: glucose tablets or gel, juice, regular soda (not diet), sugary candy (not chocolate), honey)
2. Recheck BG in 15 minutes.

**If glucose is less than 70 mg/dL or symptoms persist, repeat above steps.**

If your glucose remains low after repeated treatments, notify your healthcare provider immediately and/or go to the nearest emergency room.

Important Notes:

- Make sure your blood glucose is at least 100mg/dL before driving or working with dangerous machinery or equipment.
- Even if you cannot check your blood glucose, do not wait to treat symptoms of hypoglycemia.
- If you have hypoglycemia unawareness, check your blood glucose more frequently.
- If glucose was dropping while in Automated Mode, SmartAdjust technology may have decreased or paused insulin for some time already. In these cases, sometimes a smaller amount of carbohydrate can be used to prevent or treat mild hypoglycemia.

## 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:

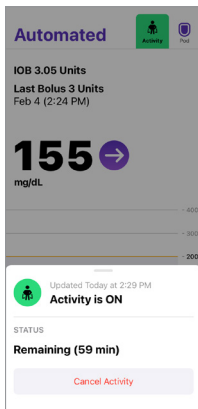
- Give glucagon as instructed by healthcare provider.
- Call 911.
- Notify healthcare provider.
- Suspend insulin delivery.

## Troubleshooting Frequent Hypoglycemia

### Check Settings

- Are you in Automated Mode?
- Are you in Manual Mode?
- If in Manual Mode, is the correct basal program in progress?
- If in Manual Mode, is the temp basal (if active) correct?
- Is Target Glucose correct?

Consult your healthcare provider for guidance about adjusting settings and their suggestions for treating hypoglycemia.



### 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 the Activity feature?
- 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?

# Troubleshooting Hyperglycemia (High Glucose)

## Blood Glucose (BG) Reading $\geq$ 250 mg/dL

### Hyperglycemia Symptoms

- Fatigue
- Blurred vision
- Unusual thirst or hunger.
- Unexplained weight loss.
- Frequent urination (i.e. at night)
- Slow healing of cuts or sores.

If you're experiencing symptoms of high glucose:

1. Verify and check your BG reading.
2. If your BG reading is over 250 mg/dL, check your urine or blood ketone level and refer to the table below for next steps.

If your ketone level is:	Trace or Negative	Small (urine) 0.6–0.9 mmol/L (blood)	Moderate to Large (urine) 1.0 or higher mmol/L (blood)
Insulin	Take a correction bolus with the Controller.	Take a correction bolus with a syringe or pen. Change your Pod.	Take a correction bolus with a syringe or pen. Change your Pod.
BG	Recheck in 2 hours. If BG has lowered, return to normal dosing schedule, and monitor BG.	Recheck in 2 hours. If BG has lowered, return to normal dosing schedule, and monitor BG.	Recheck in 2 hours. If BG has lowered, return to normal dosing schedule, and monitor BG.
Ketones	Recheck ketones if your BG at the 2-hour BG check is unchanged or higher.	Recheck blood ketones in 1 hour or urine ketones in 2 hours.	Recheck blood ketones in 1 hour or urine ketones in 2 hours.
Food and Drink	Usual meal plan with extra water or sugar-free fluids.	Usual meal plan with extra water or sugar-free fluids.	Usual meal plan with extra water or sugar-free fluids.
Additional Steps		If BG and ketones remain high after 2 or more treatments with syringe or pen, contact your healthcare provider.	Contact your healthcare provider.

## Troubleshooting Frequent Hyperglycemia

### Check Settings

- Are you in Automated Mode?
- Do you have the Activity feature enabled?
- Is your Target Glucose correct?
- In Manual Mode, is the correct basal program in progress?
- Temp basal: Do you have a temp basal running that you should have turned off?

### Check History Detail

- Alarm history: Did you ignore or not hear alarms that should have been addressed?
- Last bolus:
  - Was the bolus too small?
  - Was the bolus timing correct?
  - Did you account for high-protein or high-fat meal?

### Action Plan

There are several factors that can cause hyperglycemia. Common causes include illness, stress, infection, and missed insulin doses. 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. Do not ignore the signs and symptoms of hyperglycemia.

## 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.

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

**Warning:** ALWAYS promptly treat hyperglycemia (high glucose) according to your healthcare provider's recommendations. Symptoms of hyperglycemia include fatigue, thirst, excess urination, or blurry vision. If left untreated, hyperglycemia can lead to diabetic ketoacidosis (DKA), or death.

## 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.

# Sick Day Management

## Action Plan

Discuss Sick Day Management with your healthcare provider. The below guidelines are recommendations and may differ from your own healthcare provider's guidelines.

### Emergency situations

- For BG of 250 mg/dL or more see: Hyperglycemia Action Plan.
- For BG of 70 mg/dL 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 250 mg/dL 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).

### Call your healthcare provider immediately if you have:

- Persistent nausea and/or if you are vomiting or have diarrhea over two hours
- Difficulty breathing.
- 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  $\geq 1.0$  mmol/L blood ketones.

## Reminder

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.



## Emergency Kit Should Include:

- Several new, sealed Omnipod 5 Pods
- A vial of rapid-acting U-100 insulin
- Syringes or pens for injecting insulin
- Glucose tablets or another fast-acting source of carbohydrate
- Sensor and supplies
- Blood glucose meter and test strips
- Ketone test strips
- Lancing device and lancets
- Alcohol prep swabs
- Instructions from your healthcare provider about how much insulin to inject if delivery from the Pod is interrupted.
- A signed letter from your healthcare provider explaining that you need to carry insulin supplies and the Omnipod 5 System.
- Phone numbers for your healthcare provider and/or physician in case of an emergency.
- Glucagon kit and written instructions for administering glucagon dosage if you are unconscious.

Always follow Omnipod 5 System instructions. Failure to do so could result in under-delivery or over-delivery of insulin which can lead to hypoglycemia and hyperglycemia.

Please refer to the Omnipod 5 System Technical User Guide for all instructions for use.



## For More Information

Please refer to your Omnipod® 5 Automated Insulin Delivery System Technical User Guide for iPhone



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Pod FCC ID: RBV-029C

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PT-000942-AW Rev 06/09/24



PT-000942