

**PRE-PRINTED ORDERS**  
 Adult Hypoglycemia Management

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(addressograph)

**ALLERGIES**

MEDICATIONS/FOOD	REACTION	
<input type="checkbox"/> NO KNOWN ALLERGY		Weight (kg): _____
<input type="checkbox"/> MEDICATIONS		Height (cm): _____
<input type="checkbox"/> FOOD		
<input type="checkbox"/> ENVIRONMENTAL		
<input type="checkbox"/> LATEX		
Transcribe all checked boxes as orders		SIGNATURE, DESIGNATION, DATE AND TIME

**Consults**

<input type="checkbox"/> Certified Diabetes Educator	
<input type="checkbox"/> Registered Dietitian	
<input type="checkbox"/> Other: _____	

**Assessments and Observations**

Point of Care Testing (POCT) <input type="checkbox"/> every _____ hours and PRN <input type="checkbox"/> before meals and PRN <input type="checkbox"/> Other: _____	
For POCT blood glucose (BG) of less than or equal to 4 mmol/L <input type="checkbox"/> Notify Most Responsible Provider (MRP) <input type="checkbox"/> STAT random glucose lab draw <input type="checkbox"/> Hold insulin therapy/oral hypoglycemic, if present, and reassess by MRP	

**Hypoglycemia Protocol**

☒ Treatment of adult patients with diabetes with a BG less than 4 mmol/L by venous/arterial specimen or POCT. Initiate the orders below immediately

If the patient is conscious with no swallowing difficulties and able to follow treatment directions

Mild to moderate hypoglycemia (BG 3-3.9 mmol/L):

- ☒ Treat immediately post POCT
- ☒ Give 15 grams (60 mL or 1 bottle) of carbohydrate (CHO) glucose drink (i.e. Dex4 Liquiblast®)
- ☒ Repeat POCT in 15 minutes to ensure BG is greater than or equal to 4 mmol/L.
- ☒ After 15 minutes, if BG is still less than 4 mmol/L, repeat above orders x 1 (maximum of 2 doses).
- ☒ If BG level remains less than 4 mmol/L after second dose (30 minutes), notify MRP STAT for further orders

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Practitioner's Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ Transcriber's Signature: \_\_\_\_\_

**Faxed to Pharmacy:** \_\_\_\_\_



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**Severe hypoglycemia (BG 2.9 mmol/L or less):**

- ☒ Treat immediately post POCT; do not wait for BG from lab
- ☒ Give 20 grams (total 75 mL or 1 x 60 mL bottle plus 15 mL from second bottle) of carbohydrate (CHO) glucose drink (i.e. Dex4 Liquiblast®)
- ☒ Notify MRP STAT
- ☒ Repeat POCT in 15 minutes to ensure BG is greater than or equal to 4 mmol/L.
- ☒ After 15 minutes, if BG is still less than 4 mmol/L, repeat above orders x 1 (maximum of 2 doses)
- ☒ If BG level remains less than 4 mmol/L after second dose (30 minutes), notify MRP STAT for further orders

If the patient is NOT able to take oral liquids/solids due to swallowing difficulties or a decreased level of consciousness or identified as nil by mouth (NPO)

**Mild to moderate hypoglycemia (BG 3-3.9 mmol/L):**

- ☒ Treat immediately post POCT
- ☒ Initiate intravenous (IV) access (if not already present)
- ☒ If IV in situ: 50% Dextrose (D50W) 12.5 grams (25 mL) IV push over 1 to 3 minutes X 1
- ☒ Substitute Dextrose 10% in water (D10W) 12.5 grams (125 mL) IV over 1 to 3 minutes X1 if D50W is not available
- ☒ If no IV in situ: Glucagon 1 mg IM/subcut X 1 (do not repeat Glucagon dose without a further order from the MRP)
- ☒ Repeat POCT BG in 15 minutes to ensure BG is greater than or equal to 4 mmol/L.
- ☒ Notify MRP STAT if BG level remains less than 4 mmol/L after treatment (15 minutes)

**Severe hypoglycemia (BG 2.9 mmol/L or less):**

- ☒ Treat immediately post POCT; do not wait for BG from lab
- ☒ If IV in situ: 50% Dextrose (D50W) 25 grams (50 mL) IV push over 1 to 3 minutes X 1
- ☒ Substitute Dextrose 10% in water (D10W) 25 grams (250 mL) IV over 1 to 3 minutes X1 if D50W is not available
- ☒ If no IV in situ: Glucagon 1 mg IM/subcut X 1 (do not repeat Glucagon dose without a further order from the MRP)
- ☒ Repeat POCT BG in 15 minutes to ensure BG is greater than or equal to 4 mmol/L.
- ☒ Notify MRP STAT if BG level remains less than 4 mmol/L after treatment (15 minutes)

☒ Notify MRP for further treatment orders

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Practitioner's Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_ Transcriber's Signature: \_\_\_\_\_

**Faxed to  
Pharmacy:** \_\_\_\_\_

PPO-0298 Oct 18/17

Review Due Date:

Minor Revisions:



R.PPOAHM



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- ☒ Once BG is greater than or equal to 4 mmol/L, ensure patient follows treatment with a scheduled meal or snack consisting of a serving of protein and carbohydrates (i.e. 237 mLs (1 bottle) of Glucerna which supports 23 g of carbohydrates and 11 g of protein).

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Practitioner's Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_ Transcriber's Signature: \_\_\_\_\_

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