

Observation Unit Protocol - Hyperglycemia

Admission Criteria

- Blood sugar > 300mg%, < 600mg%
- Normal to near normal pH and electrolytes
- Readily treatable cause (i.e. medication non-compliance, UTI, abscess)

Exclusion Criteria

- DKA (pH < 7.20, total CO₂ < 18, elevated serum acetone)
- Hyperosmotic non-ketotic coma
- Blood glucose > 600mg%
- Precipitating cause unknown or not readily treatable

Observation Unit Interventions

- IV hydration, 0.9NS at 150-250 cc/hr
- Change IV to D/5-0.45NS when glucose < 250mg%
- Green top serum glucose q-1-2-h, green room panel (Na, K, Glc, Hgb) q-4-h
- Regular Insulin 0.1units/kg/hr by infusion or IVP, titrate to blood glucose
- Treat precipitating cause (antibiotics, I&D abscess, etc.)
- Diabetic counseling

Discharge Criteria

- Blood glucose < 200-250mg%
- Resolution of symptoms
- Stable vital signs
- Successful treatment of precipitating cause
- Tolerating PO fluids

Admission Criteria

- Worsening symptoms
- Unstable vital signs
- Blood glucose uncontrolled, labile, remains > 250mg%
- Development of DKA
- Unable to tolerate PO fluids