

# DIABETIC EMERGENCIES



## INFORMATION

Symptoms of DKA include: nausea/vomiting, abdominal pain, general weakness, Kussmaul Respirations, AMS, hypotension, or tachycardia with an acetone smell on the patient's breath.



## ADULT

### IF BLOOD GLUCOSE IS LESS THAN 60 mg/dL

- ORAL GLUCOSE:** (15g) May be given if patient is able to swallow and follow commands. May repeat 1x prn.
- D10:** 100 mL IV, retest glucose. If patient remains less than 60 mg/dL, administer another 100 mL of D10.

### IF UNABLE TO OBTAIN IV ACCESS

- Perform Proximal Humerus IO and administer **D10:** 100mL, retest glucose. If patient remains less than 60 mg/dL, administer another 100 mL of D10.

### IF BLOOD GLUCOSE LEVEL IS GREATER THAN 300 mg/dL WITH S/S OF DKA

- NORMAL SALINE:** 1-2L. Assess lung sounds and blood pressure every 500mL.
- ZOFRAN:** 4mg IM or slow IV/IO/PO over 2 minutes for nausea/vomiting.

Patients taking oral hypoglycemic mediations should be transported to the ED regardless of post treatment glucose levels. (i.e. Glyburide, Glimepiride, and Glipizide)

### IF UNABLE TO PROVIDE ABOVE TREATMENT

- GLUCAGON:** 1mg IN or IM if available.
  - **Glucagon may cause nausea/vomiting.**
- ZOFRAN:** 4mg IM/PO for nausea/vomiting.



## PEDIATRIC

### IF BLOOD GLUCOSE LEVELS ARE LESS THAN 60 mg/dL

- ORAL GLUCOSE: (15g) may be given to conscious patients with an intact gag reflex.
  - *Not recommended for patients less than 2 years old.*
- D10: 5ml/kg IV/IO (max of 100 mL), retest glucose. May repeat 1x prn.

### IF BLOOD GLUCOSE LEVELS ARE GREATER THAN 300 mg/dL with S/S of DKA

- NORMAL SALINE: 20mL/kg IV/IO. Assess lung sounds and blood pressure often.
- ZOFRAN: 0.1mg/kg IM or slow IV/IO/PO for nausea/vomiting. Max dose 4mg.

### IF UNABLE TO PROVIDE ABOVE TREATMENT

- GLUCAGON: Less than 20kg (0.5mg IM or IN), greater than 20kg (1mg IM or IN) if available.
  - *Glucagon may cause nausea/vomiting.*
- ZOFRAN: 0.1mg/kg IM or slow IV/IO/PO for nausea/vomiting. Max dose 4mg.