



VA: VGH / UBCH / GFS
VC: BP / Purdy / GPC

ORDERS

ADDRESSOGRAPH

COMPLETE OR REVIEW ALLERGY STATUS PRIOR TO WRITING ORDERS

ICU PROTOCOL TO CONTROL BLOOD GLUCOSE 8 to 10 mmol/L

(items with check boxes must be selected to be ordered)

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Date: _____ Time: _____

Mix insulin regular 100 units in sodium chloride 0.9% 100 mL (concentration 1 unit/mL).
Start insulin as per protocol below for blood glucose greater than 10 mmol/L.
Confirm enteral feeding pump has pink cautionary reminder label attached.
Do not deviate from protocol unless there is a Prescriber's Order.

GLUCOSE SAMPLING:

All blood for glucometers to be drawn from arterial line. If no arterial line, obtain capillary sample (finger poke).

PROTOCOL FOR PATIENT WITH INSULIN INFUSION CURRENTLY OFF			
Glucometer Reading	Instruction		Check Glucometer in
Less than 3.5 mmol/L	Administer dextrose 50% 25 mL IV. Inform MD		30 minutes
3.5 to 10 mmol/L	No insulin required		4 hours
Glucometer Reading	Give insulin bolus	Start insulin infusion at	Check Glucometer in
10.1 to 12 mmol/L	0 units	1 unit/h	2 hours
12.1 to 14 mmol/L	1 unit	1 unit/h	
14.1 to 17 mmol/L	3 units	2 units/h	
17.1 to 20 mmol/L	5 units	3 units/h	
Greater than 20 mmol/L inform MD and →	7 units	4 units/h	

PROTOCOL FOR PATIENT WITH INSULIN INFUSION CURRENTLY ON				
Glucometer Reading	Current insulin infusion rate units/hour			Check Glucometer in
	0.5 to 6.5 units/h	7 to 12.5 units/h	13 units/h or greater	
Less than 3.5 mmol/L	Discontinue infusion and administer dextrose 50% 25 mL IV. Inform MD			30 minutes
3.5 to 5.9 mmol/L	Discontinue infusion			2 hours
6 to 6.9 mmol/L	Decrease infusion by 50% ("round" to nearest 0.5 units/h).			4 hours
7 to 7.9 mmol/L	Decrease infusion by 25% ("round" to nearest 0.5 units/h).			4 hours
8 to 10 mmol/L	Make no changes			4 hours
10.1 to 12 mmol/L	Increase infusion by 1 unit/h	2 units IV bolus and increase infusion by 1 unit/h	3 units IV bolus and increase infusion by 3 units/h	4 hours
12.1 to 14 mmol/L	1 unit IV bolus and increase infusion by 1 unit/h	3 units IV bolus and increase infusion by 1 unit/h	4 units IV bolus and increase infusion by 3 units/h	2 hours
14.1 to 17 mmol/L	3 units IV bolus and increase infusion by 2 units/h	5 units IV bolus and increase infusion by 2 units/h	5 units IV bolus and increase infusion by 3 units/h	2 hours
17.1 to 20 mmol/L	5 units IV bolus and increase infusion by 3 units/h	7 units IV bolus and increase infusion by 3 units/h	7 units IV bolus and increase infusion by 4 units/h	2 hours
20.1 to 24 mmol/L	7 units IV bolus and increase infusion by 4 units/h	10 units IV bolus and increase infusion by 4 units/h	10 units IV bolus and increase infusion by 5 units/h	2 hours
Greater than 24 mmol/L	Call MD for new order			

Stop insulin if enteral feeds or TPN are stopped (e.g. extubation, going to OR, leaving unit for tests, NPO). **Check glucose in 1 hour or as soon as patient returns to ICU and restart insulin if needed based on the above protocol.**

Discontinue insulin infusion if rate is less than 0.5 units/h.

Discontinue insulin protocol when patient is transferred out of ICU. Ensure appropriate glucose management orders are written.

Prescriber's Signature
ICUBG

Printed Name
Rev. Oct-09

College ID