



Rancho Los Amigos National Rehabilitation Center
DEPARTMENT OF NURSING
CLINICAL
POLICY AND PROCEDURE

SUBJECT: EMERGENCY TREATMENT OF
HYPOGLYCEMIA

Policy No.: C119.11
Effective Date: 11/06
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Purpose: To delineate the guidelines for the treatment of hypoglycemia in both an unresponsive and alert patient.

Physician's Order Required: Yes

Performed By: RN, LVN

Definition:

Hypoglycemia is defined as a blood glucose (BG) level of less than 70 mg/dL, or when signs/symptoms of hypoglycemia are present. Signs and symptoms of hypoglycemia include:

- cool clammy skin, diaphoresis
- hunger
- irritability, sudden changes in personality
- headache, lightheadedness
- blurred vision, diplopia
- weakness, fatigue
- dizziness
- numbness, especially in lips and tongue
- slurred speech
- lack of coordination
- confusion, amnesia, dementia
- nervousness
- shakiness
- sleepiness
- anxiety

Policy Statements:

- A. Patients with a diagnosis of diabetes must have orders that include treatment of hypoglycemia.
- B. Some patients can have BG levels less than 50 mg/dL without symptoms due to autonomic neuropathy. Asymptomatic patients with BG levels less than 70 mg/dL should be treated for hypoglycemia.

Procedural Steps:

HYPOGLYCEMIA PREVENTION GUIDELINES (70-100 mg/dL)

- A. If BG is between 70-100 mg/dL and patient is NPO or refusing snack, notify provider to initiate or increase rate of D5 solution and recheck BG in 2 hours. If after 2 hours the BG is greater than 100mg/dL, notify provider to decrease the rate of D5 solution.
- B. If bedtime BG is between 70-100 mg/dL and patient is tolerating POs, give snack (such as half sandwich, 3 graham crackers, or 120 mL of regular or low fat milk) and recheck BG at 0300.

HYPOGLYCEMIA MANAGEMENT GUIDELINES**BG less than 50 mg/dL**

- A. Notify provider and give Dextrose 50% (50mL) slowly by IV Push

BG less than 70 mg/dL

- B. Notify provider and perform the following as ordered:
1. If BG less than 70 and patient is alert and able to tolerate PO fluids, give 120ml juice (apple, cranberry, or grape preferred)
 2. If BG less than 70 and patient is unresponsive, NPO, or unable to tolerate PO, give Dextrose 50% (25mL) slowly by IV Push
 3. If BG less than 70 and IV access is unavailable, and unable to tolerate PO fluids, give Glucagon 1mg IM
- C. Recheck finger stick in 15 minutes and every 15 minutes until BG is greater than 70 mg/dL

FOOD SOURCE EQUIVALENTS

FOOD SOURCE EQUIVALENT TO 15 GMS CARBOHYDRATE (CHO)			
FOOD SOURCE	AMOUNT	CHO GMS	KCALs
Gelatin, regular prepared	½ C	17	71
Hard candy	5	15	50
Honey	1 T	17.3	64
Juice, apple	1/2C	14.5	5868
Juice, cranberry	1/2C	17.1	65
Juice, grape	½ C	15.5	120
Bread, white	1 slice	15	86
Milk, non-fat	1 C	12	50
Soft drink, regular	½ C	12.8	61
Sugar, granulated	4 tsp or 4 pks	15.5	100
Banana, medium	½	15	

PATIENT EDUCATION

- A. Review with patient the signs and symptoms of hypoglycemia and the patient's own signs/symptoms at the beginning of the episode.
- B. Review with patient appropriate actions to take when signs/symptoms first occur.

DOCUMENTATION

- A. Ensure that all finger stick BG results are uploaded in the electronic health record (EHR).
- B. Place a narrative note to include:
1. Patient signs and symptoms of hypoglycemia
 2. Nursing actions, interventions and patient response
 3. Time of patient's last meal and amount consumed
 4. Last dose of insulin given
 5. Blood sent to laboratory

6. Report of events to the physician/Licensed Independent Practitioner
 7. All patient education
- C. If BG was lower than 40, follow policy #C109.2 – *Waived Testing* for further documentation requirements.
- D. Document on the MAR and note any medications that were held.
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REFERENCES:

American Diabetes Association Professional Practice Committee. 16. Diabetes care in the hospital: *Standards of Medical Care in Diabetes—2022*. *Diabetes Care* 2022;45(Suppl. 1):S244–S253

M. Villani, B. de Courten, S. Zougas. (2017) Emergency treatment of hypoglycemia: a guideline and evidence review. *Diabetic Medicine*. <https://doi.org/10.1111/fme.qqqq>

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