

Location: \_\_\_\_\_

## General

 **Pre-Op Glucose Control Optimization:**

Proceed after initial blood glucose results.

If results are 70 - 180 mg/dL, No further testing is needed. Proceed to procedure/surgery.

Glucose results - Past 2 hours (If available):

@BRIEFLAB2H(LABGLUC:\*,POCGLU:\*)@

 **Results GREATER than 180 mg/dL and LESS than 300 mg/dL (Required)** **Medium Dose Correction Scale** **insulin lispro (ADMELOG) injection** 0 - 12 Units, subcutaneous, Pre-op

Corrective Scale:

Admelog is an equivalent product to Humalog, and will be utilized as the preferred insulin lispro product on HM formulary.

Physicians/APPs only: Use the Modify button on the Orders tab to change the corrective scale.

 **Bedside glucose** Every 2 hours, Pre-op, Routine, Blood, Check in OR every 2 hours **Notify Anesthesia** Until discontinued, PACU, Routine, PACU: If glucose is GREATER THAN 200 mg/dL **Bedside glucose** Every 2 hours, PACU, Routine, Blood, In PACU. Notify Anesthesiologist for glucose GREATER than 200 mg/dL **High Dose Correction Scale** **insulin lispro (ADMELOG) injection** 0 - 12 Units, subcutaneous, every 1 hour, 2, Occurrences, Pre-op

Corrective Scale: HIGH dose correction scale

Corrective Scale:

Admelog is an equivalent product to Humalog, and will be utilized as the preferred insulin lispro product on HM formulary.

Physicians/APPs only: Use the Modify button on the Orders tab to change the corrective scale.

 **Bedside glucose** Every 2 hours, Pre-op, Routine, Blood, Check in OR every 2 hours **Notify Anesthesia** Until discontinued, PACU, Routine, PACU: If glucose is GREATER THAN 200 mg/dL **Bedside glucose** Every 2 hours, PACU, Routine, Blood, In PACU. Notify Anesthesiologist for glucose GREATER than 200 mg/dL **Results GREATER than or EQUAL to 300 mg/dL**

HOLD Surgery and Call Physician for further orders if Diabetic Ketoacidosis/Hyperosmolar Hyperglycemic State, DKA/HHS is present. If DKA/HSS is NOT present, continue with these orders.

 **Medium Dose Correction Scale** **insulin lispro (ADMELOG) injection** 0 - 12 Units, subcutaneous, Pre-op

Corrective Scale:

Admelog is an equivalent product to Humalog, and will be utilized as the preferred insulin lispro product on HM formulary.

Physicians/APPs only: Use the Modify button on the Orders tab to change the corrective scale.

 **Bedside glucose** Every 2 hours, Pre-op, Routine, Blood, Check in OR every 2 hours **Notify Anesthesia** Until discontinued, PACU, Routine, PACU: If glucose is GREATER THAN 200 mg/dL **Bedside glucose** Every 2 hours, PACU, Routine, Blood, In PACU. Notify Anesthesiologist for glucose GREATER than 200 mg/dL **High Dose Correction Scale** **insulin lispro (ADMELOG) injection** 0 - 12 Units, subcutaneous, every 1 hour, 2, Occurrences, Pre-op

Corrective Scale: HIGH dose correction scale

Corrective Scale:

Admelog is an equivalent product to Humalog, and will be utilized as the preferred insulin lispro product on HM formulary.

Physicians/APPs only: Use the Modify button on the Orders tab to change the corrective scale.

 **Bedside glucose** Every 2 hours, Pre-op, Routine, Blood, Check in OR every 2 hours

Sign: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date/Time: \_\_\_\_\_

- Notify Anesthesia** Until discontinued, PACU, Routine, PACU: If glucose is GREATER THAN 200 mg/dL
- Bedside glucose** Every 2 hours, PACU, Routine, Blood, In PACU. Notify Anesthesiologist for glucose GREATER than 200 mg/dL

Patient is on an insulin pump (Required)

To allow for continuation of insulin pump use, **ALL** of the following statements must be **TRUE**:

- 1) Patient has mental capacity and supplies to self-manage insulin pump Pre and Post-Op
- 2) Procedure or surgery is **LESS** than 2 hours
- 3) Pump insertion site is not within the surgical field
- 4) There will **NOT** be any exposure to X-Ray or MRI during the procedure or surgery

ALL of the above statements are **TRUE**

### COMPLETE 'INSULIN PUMP-PATIENT SUPPLIED' ORDER

- Perioperative glycemic control optimization** Per unit protocol, -1, Occurrences, Routine, Patient is on an insulin pump
- Insulin Pump - patient supplied** 100 , continuous  
Patient assessed and meets indications for continued insulin pump usage and is knowledgeable and competent to self-manage. Patient is alert, oriented to person, place and time.:  
CALL ADMITTING/ORDERING PROVIDER FOR ANY QUESTIONS REGARDING PATIENT-SUPPLIED INSULIN PUMP
- Patient supplied insulin pump forms** Until discontinued, Routine, 1) Using link below, print RX193 Patient-Supplied Insulin Pump Patient Agreement Form. Review with patient and obtain patient signature. Submit the signed form for scanning into the electronic record. 2) Using link below, print the Patient Record of Bedside Insulin Pump and Blood Glucose. Provide the patient with a new form daily at 0700.
- Provide insulin pump instructions** Once, Routine, Decrease basal rate to 50%
- Bedside glucose** Every hour, Routine, Blood, Pre-op, Intra-op and PACU: Monitor glucose by serum or POC fingerstick every hour
- Notify Anesthesia** Until discontinued, Routine, Pre-op, Intra-op, and PACU: If blood glucose is LESS THAN 70 mg/dL or GREATER THAN 180 mg/dL

ANY of the above statements are **FALSE**

- Perioperative glycemic control optimization** Per unit protocol, -1, Occurrences, Routine, Patient is on an insulin pump
- insulin GLARGINE (LANTUS) injection** 0.2 Units/kg, subcutaneous, once, 1, Occurrences, Pre-op  
Administer 1 to 2 hours BEFORE removing insulin pump.
- Remove insulin pump** Once, 1, Occurrences, Pre-op, Routine, Have patient remove insulin pump and store in a safe place. Patient may remove the insulin pump 1 to 2 hours AFTER administration of insulin glargine.
- Bedside glucose** Every 2 hours, Pre-op, Routine, Blood
- Notify Anesthesia** Until discontinued, Pre-op, Routine, If blood glucose is LESS THAN 70 mg/dL or GREATER THAN 180 mg/dL

**Pre-Op HYPOglycemia Management**

- dextrose 50% solution - 12.5g** 12.5 g, intravenous, every 20 min PRN, Pre-op, If blood glucose is between 41-69 mg/dL, low blood glucose
- dextrose 50% solution - 25 g** 25 g, intravenous, every 20 min PRN, Pre-op, If blood glucose is 40 mg/dL or LESS, low blood glucose

**Post-Op HYPOglycemia Management**

- dextrose 50% solution - 12.5g** 12.5 g, intravenous, every 20 min PRN, PACU & Post-op, If blood glucose is between 41-69 mg/dL, low blood glucose
- dextrose 50% solution - 25 g** 25 g, intravenous, every 20 min PRN, PACU & Post-op, If blood glucose is 40 mg/dL or LESS, low blood glucose