

Kittitas County Prehospital Care Protocols

Subject: DIABETES MELLITUS

Suspected Hyperglycemia/Ketoacidosis

- A. Establish and maintain airway.
- B. Administer O₂ @ 12-15 lpm per non-rebreather mask.
- C. Establish cardiac monitor.
- D. Establish peripheral IV access with 0.9% Normal Saline @ rate dependent on clinical findings.
- E. Draw blood tubes for lab and hospital, and determine blood sugar using chemical strip.

Suspected Hypoglycemia

- A. If good airway and patient conscious, administer some type of sugar solution, PO.
- B. Establish Peripheral IV access with Normal Saline @ TKO.
- C. Draw blood tubes for lab and the hospital prior to administration of Normal Saline.
- D. Determine blood sugar using chemical strip.
- E. Administer **D50, 25 gms**, IV bolus (administer **thiamine** if suspected alcohol abuse). IV should be wide open during administration of **D50**.
- F. If pediatric patient, administer **D25, 0.5 gms/kg.**
- G. If unable to establish peripheral IV, administer **glucagon, 1.0 unit, IM.**
- H. *Patient may have option of not being transported if;*
 - *patient has history of diabetes with ongoing medical management*
 - *patient is alert and oriented x 3*
 - *patient is observed eating a sandwich*
 - *adult is present*
 - *glucose reading appropriate/normal for patient*
 - *clinical situation indicates further care is not needed*

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Medical Program Director: Jackson S. Horsley, MD