Diabetic Ketoacidosis (DKA) Two Bag System [3361]

Diabetic Ketoacidosis (DKA) may be present with blood glucose GREATER THAN 250 mg/dL, arterial or venous pH less than 7.3, serum bicarbonate (CO2) less than 18 mEq/L anion gap greater than 14 and ketonuria or ketonemia.

Euglycemic DKA may be present with normal to elevated blood glucose (typically LESS THAN 250mg/dL), arterial or venous pH less than 18 mEq/L, anion gap greater than 14, and ketonuria or ketonemia.

Discontinue all previous insulin orders and oral diabetes medications upon entering DKA protocol.

Nursing

Finger Stick Blood Glucose (FSBG) Monitoring (Single Response)

(X) Bedside glucose monitoring	Routine, Every hour For 999 Occurrences Unless otherwise specified

Notify

[X] Notify Provider	Routine, Until discontinued, Starting S, • HOLD Initiation of insulin doses if Potassium is LESS THAN 3.3 mEq/L. Treat potassium per DKA potassium replacement protocol and contact prescriber for instruction on insulin initiation. • Notify prescriber if blood glucose is LESS THAN 200 mg/dL and anion gap is LESS THAN OR EQUAL to 12 (RESOLUTION OF DKA)* to consider transition to basal-bolus insulin and advance diet OR if unable to advance diet, change DKA insulin drip to ICU insulin Drip Order Set for Target Blood Glucose 140 - 180. • Notify prescriber if glucose is LESS THAN 100 mg/dL for two consecutive times and anion gap is GREATER THAN 12 for further insulin AND/OR Dextrose containing IV fluid rate adjustment. • Notify prescriber if glucose is LESS THAN 70 mg/dL. • Notify prescriber if potassium is GREATER THAN 5.2 mEq for possible adjustments on potassium content in IVF

Diet

[X] NPO-Except meds	Diet effective now, Starting S NPO: Except meds Pre-Operative fasting options:

DKA Potassium Replacement Protocol

DKA Potassium Replacement Protocol

[X] DKA orderset to be acted on by trained nurse only	Routine, Until discontinued, Starting S If the patient is no longer on the DKA 2 Bag Sytem, this order must be discontinued to stop the nursing BPA alert.
[X] DKA Potassium Replacement Protocol - RN will enter orders "Per Protocol"	Routine, Until discontinued, Starting S

IV Fluids

Initial IV Fluids

[X] Initial IV Fluids	**"Followed by" Linked Panel**
[X] sodium chloride 0.9 % infusion	1,000 mL, intravenous, for 60 Minutes, once, For 1 Doses

Subsequent IV Fluids - NOT HMTW (Single Response) (Selection Required)

(X) Subsequent IV Fluids (Single Response) (Selection Required)	
(X) Choice # 1 with Dextrose 10 %: D10 + 1/2NS + 20 mEq/L potassium chloride and 1/2NS + 20 mEq/L potassium chloride	**"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[X] sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL:100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 30% hourly fluid rate Glucose 100 - 149 mg/dL: 10% hourly fluid rate Glucose 70 - 99 mg/dL: 0% hourly fluid rate Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:
[X] dextrose 10 % and sodium chloride 0.45 % + potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated Titrate both fluids per protocol for a combined rate of:

( ) Choice # 2 with Dextrose 5 %: D5 + 1/2NS + 20 mEq/L potassium chloride and 1/2NS + 20 mEq/L potassium chloride **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 0% hourly fluid rate Glucose 100 - 149 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose 70 - 99 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation.
[ ] dextrose 5 % and sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion	0-250 mL/hr, intravenous, titrated D5 + 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 100% hourly fluid rate Glucose 100 - 149 mg/dL: 100% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:

( ) Subsequent IV Fluids for DKA without Potassium (Single Response)

( ) Dextrose 10 + 1/2NS and 1/2NS **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % infusion for DKA	0-250 mL/hr, intravenous, titrated 1/2 NS Titration: For: Glucose greater than 299 mg/dL:100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 30% hourly fluid rate Glucose 100 - 149 mg/dL: 10% hourly fluid rate Glucose 70 - 99 mg/dL: 0% hourly fluid rate Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:

[ ] dextrose 10 %-0.45 % sodium chloride infusion (for DKA)	0-250 mL/hr, intravenous, titrated D10 + 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 70% hourly fluid rate Glucose 100 - 149 mg/dL: 90% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation Titrate both fluids per protocol for a combined rate of:

( ) Dextrose 5 + 1/2NS and 1/2NS **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % infusion for DKA	0-250 mL/hr, intravenous, titrated 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 0% hourly fluid rate Glucose 100 - 149 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose 70 - 99 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:
[ ] dextrose 5 % and sodium chloride 0.45 % infusion (for DKA)	0-250 mL/hr, intravenous, continuous D5 + 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 100% hourly fluid rate Glucose 100 - 149 mg/dL: 100% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation.

( ) Kirby, Pearland, and Voss EDs only **"And" Linked Panel**

[ ] sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 0% hourly fluid rate Glucose 100 - 149 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose 70 - 99 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation.
[ ] dextrose 5 % and sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion	0-250 mL/hr, intravenous, titrated D5 + 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 100% hourly fluid rate Glucose 100 - 149 mg/dL: 100% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:

Subsequent IV Fluids - HMTW Only (Single Response) (Selection Required)

(X) Subsequent IV Fluids (Single Response) (Selection Required)

(X) Choice # 1 with Dextrose 10 %: D10 + 1/2NS + 20 mEq/L potassium chloride and 1/2NS + 20 mEq/L potassium chloride **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[X] sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL:100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 30% hourly fluid rate Glucose 100 - 149 mg/dL: 10% hourly fluid rate Glucose 70 - 99 mg/dL: 0% hourly fluid rate Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:
[X] dextrose 10 % and sodium chloride 0.45 % + potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated Titrate both fluids per protocol for a combined rate of:

( ) Choice # 2 with Dextrose 5 %: D5 + 1/2NS + 20 mEq/L potassium chloride and 1/2NS + 20 mEq/L potassium chloride **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion (for DKA)	0-250 mL/hr, intravenous, titrated 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 0% hourly fluid rate Glucose 100 - 149 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose 70 - 99 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation.
[ ] dextrose 5 % and sodium chloride 0.45 % with potassium chloride 20 mEq/L infusion	0-250 mL/hr, intravenous, titrated D5 + 1/2 NS + KCl 20 mEq/L Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 100% hourly fluid rate Glucose 100 - 149 mg/dL: 100% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:

( ) Subsequent IV Fluids for DKA without Potassium (Single Response)

( ) Dextrose 10 + 1/2NS and 1/2NS **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % infusion for DKA	0-250 mL/hr, intravenous, titrated 1/2 NS Titration: For: Glucose greater than 299 mg/dL:100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 30% hourly fluid rate Glucose 100 - 149 mg/dL: 10% hourly fluid rate Glucose 70 - 99 mg/dL: 0% hourly fluid rate Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:
[ ] dextrose 10 %-0.45 % sodium chloride infusion (for DKA)	0-250 mL/hr, intravenous, titrated D10 + 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 70% hourly fluid rate Glucose 100 - 149 mg/dL: 90% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation Titrate both fluids per protocol for a combined rate of:

( ) Dextrose 5 + 1/2NS and 1/2NS **"And" Linked Panel**

D10 is the preferred dextrose containing fluid (use D5W only if D10 is on backorder/unavailable)

[ ] sodium chloride 0.45 % infusion for DKA	0-250 mL/hr, intravenous, titrated 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 100% hourly fluid rate Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 0% hourly fluid rate Glucose 100 - 149 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose 70 - 99 mg/dL: 0% hourly fluid rate and follow insulin titration Glucose less than 70 mg/dL: 0% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation. Titrate both fluids per protocol for a combined rate of:
[ ] dextrose 5 % and sodium chloride 0.45 % infusion (for DKA)	0-250 mL/hr, intravenous, continuous D5 + 1/2 NS Titration: For: Glucose greater than 299 mg/dL: 0% hourly fluid rate. Glucose 200 - 299 mg/dL: 50% hourly fluid rate Glucose 150 - 199 mg/dL: 100% hourly fluid rate Glucose 100 - 149 mg/dL: 100% hourly fluid rate Glucose 70 - 99 mg/dL: 100% hourly fluid rate Glucose less than 70 mg/dL: 100% hourly fluid rate - HOLD Insulin and send blood glucose to lab confirmation.

Initial Electrolytes Replacement

Initial Electrolytes Replacement - For Patients with Potassium level LESS than 4 mEq/L (Selection Required)

[ ] Potassium Replacement (Single Response)

( ) Potassium LESS than or EQUAL to 3.3 (Single Response)

( ) Oral replacement - Potassium **"Or" Linked Panel**

[ ] potassium chloride (K-DUR) CR tablet	60 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	60 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 60 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 6 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Central IV - potassium 60 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 3 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 3.4 - 4.0 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	40 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	40 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 40 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 4 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 40 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 4.1 - 5.2 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	20 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	20 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 20 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 20 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 1 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

[ ] End Stage Renal Disease (ESRD) Potassium Replacement (Single Response)

( ) Potassium LESS than or EQUAL to 3.3 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	60 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	60 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 60 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 6 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 60 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 3 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 3.4 - 4.0 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	20 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	20 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 20 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 20 mEq	20 mEq, intravenous, for 60 Minutes, once, For 1 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

[ ] IV Replacement - Phosphorus level LESS than 2.5 mg/dL	20 mmol, intravenous, for 3 Hours, once, For 1 Doses

Initial Electrolytes Replacement

[ ] Potassium Replacement (Single Response)

( ) Potassium LESS than or EQUAL to 3.3 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	60 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	60 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 60 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 6 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Central IV - potassium 60 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 3 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 3.4 - 4.0 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	40 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	40 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 40 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 4 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 40 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 4.1 - 5.2 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	20 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	20 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 20 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 20 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 1 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

[ ] End Stage Renal Disease (ESRD) Potassium Replacement (Single Response)

( ) Potassium LESS than or EQUAL to 3.3 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	60 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	60 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 60 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 6 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 60 mEq	20 mEq, intravenous, for 60 Minutes, every 1 hour, For 3 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

( ) Potassium 3.4 - 4.0 (Single Response)

( ) Oral replacement - Potassium	**"Or" Linked Panel**
[ ] potassium chloride (K-DUR) CR tablet	20 mEq, oral, once, For 1 Doses
[ ] potassium chloride (KLOR-CON) packet	20 mEq, oral, once, For 1 Doses
( ) Peripheral IV - potassium 20 mEq	10 mEq, intravenous, for 60 Minutes, every 1 hour, For 2 Doses Recheck level 1 hour after the end of IV administration and reapply orders if needed.
( ) Central IV - potassium 20 mEq	20 mEq, intravenous, for 60 Minutes, once, For 1 Doses For Central Line Only; Recheck level 1 hour after the end of IV administration and reapply orders if needed.

[ ] IV Replacement - Phosphorus level LESS than 2.5 mg/dL	20 mmol, intravenous, for 3 Hours, once, For 1 Doses

Insulin Management

Insulin Infusion Management (Single Response) (Selection Required)

( ) No, patient is NOT ESRD

[ ] insulin bolus from bag	0.1 Units/kg, intravenous, once, For 1 Doses
[ ] insulin bolus from bag	0.1 Units/kg, intravenous, once PRN, may repeat bolus one time after the first hour

[ ] insulin regular 1 unit/mL infusion for DKA	0.1 Units/kg/hr, intravenous, continuous Start Regular Human Insulin 100 units in Normal Saline 100 mL (1 unit/mL) via an intravenous pump and dedicated line at the rate indicated. If: GLUCOSE level does not decrease by at least 50 mg/dL from the initial value after the first hour: - Administer bolus 0.1 unit/kg OR 0.05 units/kg (for ESRD). - Continue same infusion rate and follow IV fluids titration. - If blood glucose GREATER THAN 400 mg/dL by POC testing, send serum glucose to the lab for confirmation. GLUCOSE GREATER THAN OR EQUAL TO 300 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 200 - 299 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 150 - 199 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 100 - 149: - DECREASE insulin infusion rate by 50% ONLY ONCE and follow IV fluids titration. - Notify prescriber if continues to be LESS than 100 with the next POC for further adjustments GLUCOSE 70 - 99 mg/dL: - DECREASE insulin rate by 50 % ONLY ONCE if not already done, follow IV fluids titration. - Notify prescriber if continues to be LESS than 100 with the next POC for further adjustments. GLUCOSE LESS than 70 mg/dL: - HOLD insulin and send blood glucose to lab for confirmation - Give dextrose 50% 25 mL and notify prescriber. - Recheck blood glucose in 20 minutes; if GREATER than 70 mg/dL and anion gap greater than 12, restart insulin at 50% of prior infusion rate. - Discontinue insulin drip 2 hours after initiation of long acting insulin. GLUCOSE LESS than 200 mg/dL and anion gap is LESS THAN OR EQUAL to 12 (RESOLUTION OF DKA) - Notify prescriber to consider transition to basal-bolus insulin
[ ] dextrose 50% intravenous syringe	25 g, intravenous, every 20 min PRN, low blood sugar, as directed for glucose less than 70 mg/dL

( ) Yes, Patient is ESRD

[ ] insulin bolus from bag	0.05 Units/kg, intravenous, once, For 1 Doses
[ ] insulin bolus from bag	0.05 Units/kg, intravenous, once PRN, may repeat bolus one time after the first hour

[ ] insulin regular 1 unit/mL infusion for DKA	0.05 Units/kg/hr, intravenous, continuous Start Regular Human Insulin 100 units in Normal Saline 100 mL (1 unit/mL) via an intravenous pump and dedicated line at the rate indicated. If: GLUCOSE level does not decrease by at least 50 mg/dL from the initial value after the first hour: - Administer bolus 0.1 unit/kg OR 0.05 units/kg (for ESRD). - Continue same infusion rate and follow IV fluids titration. - If blood glucose GREATER THAN 400 mg/dL by POC testing, send serum glucose to the lab for confirmation. GLUCOSE GREATER THAN OR EQUAL TO 300 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 200 - 299 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 150 - 199 mg/dL: - Continue same infusion rate and follow IV fluids titration. GLUCOSE 100 - 149: - DECREASE insulin infusion rate by 50% ONLY ONCE and follow IV fluids titration. - Notify prescriber if continues to be LESS than 100 with the next POC for further adjustments GLUCOSE 70 - 99 mg/dL: - DECREASE insulin rate by 50 % ONLY ONCE if not already done, follow IV fluids titration. - Notify prescriber if continues to be LESS than 100 with the next POC for further adjustments. GLUCOSE LESS than 70 mg/dL: - HOLD insulin and send blood glucose to lab for confirmation - Give dextrose 50% 25 mL and notify prescriber. - Recheck blood glucose in 20 minutes; if GREATER than 70 mg/dL and anion gap greater than 12, restart insulin at 50% of prior infusion rate. - Discontinue insulin drip 2 hours after initiation of long acting insulin. GLUCOSE LESS than 200 mg/dL and anion gap is LESS THAN OR EQUAL to 12 (RESOLUTION OF DKA) - Notify prescriber to consider transition to basal-bolus insulin
[ ] dextrose 50% intravenous syringe	25 g, intravenous, every 20 min PRN, low blood sugar, as directed for glucose less than 70 mg/dL

Labs

Laboratory STAT (if not previously done)

[X] Blood gas, venous	STAT For 1 Occurrences
[X] Serum ketones (Beta hydroxybutyrate)	STAT For 1 Occurrences
[X] Lactic acid level	STAT For 1 Occurrences
[X] Comprehensive metabolic panel	STAT For 1 Occurrences
[X] Basic metabolic panel	Every 4 hours, Starting H+4 Hours For 3 Occurrences
[X] Magnesium	STAT For 1 Occurrences
[X] Phosphorus	STAT For 1 Occurrences
[X] Potassium Level	
[X] Potassium level	Every hour For 7 Occurrences Obtain Potassium Level every 1 hour while titrating insulin and dextrose infusions. Check every 4 hours when insulin and dextrose infusions have remained at the same rate of GREATER THAN OR EQUAL to 1 hour and blood glucose is stable at 150-250 mg/dL. After HIET therapy is discontinued, obtain every 4 hours for 6 occurrences.

[X] Schedule potassium level for HIET	Routine, As needed Obtain Potassium Level every 1 hour while titrating insulin and dextrose infusions. Check every 4 hours when insulin and dextrose infusions have remained at the same rate of GREATER THAN OR EQUAL to 1 hour and blood glucose is stable at 150-250 mg/dL. After HIET therapy is discontinued, obtain every 4 hours for 6 occurrences.
[ ] Amylase	STAT For 1 Occurrences
[ ] Lipase	STAT For 1 Occurrences
[X] CBC with differential	STAT For 1 Occurrences
[X] Urinalysis screen and microscopy, with reflex to culture	STAT For 1 Occurrences Specimen Source: Urine Specimen Site:
[ ] Sputum culture	STAT For 1 Occurrences, Sputum
[X] Blood culture x 2	**"And" Linked Panel**
[X] Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Blood Culture (Aerobic & Anaerobic)	Once, Blood Collect before antibiotics given. Blood cultures should be ordered x2, with each set drawn from a different peripheral site. If unable to draw both sets from a peripheral site, please call the lab for assistance; an IV line should NEVER be used.
[X] Hemoglobin A1c	STAT For 1 Occurrences
[ ] Creatine kinase, total (CPK)	STAT For 1 Occurrences
[ ] Troponin T	STAT For 1 Occurrences

Other Diagnostic Tests

ECG

[X] ECG 12 lead	STAT, Once Clinical Indications: Other: Other: DKA Interpreting Physician:

Imaging

[ ] Chest 1 Vw Portable	Routine, 1 time imaging, Starting S at 1:00 AM For 1

Consults

Pharmacy Consults

[X] Consult to Pharmacy - Notification of DKA Patient	Routine, Until discontinued, Starting S Specify reason: Notification of DKA patient