

Continuous Intravenous Insulin Infusion Orders
Adult (>45 kg)

PATIENT IDENTIFICATION

NOTE: This protocol NOT to be used for Diabetic Ketoacidosis (DKA).
 Start protocol only if glucose > 110 mg/dL x 2.

GOAL: Maintain glucose level between 80 -110 mg/dL.
 Discontinue when glycemic control achieved and transitioning to SQ Insulin, or Insulin therapy no longer required.

GENERAL

- Pharmacy Consult: Discontinue all currently active insulin orders outside of this order set (#651305).
- Notify MD: For specific instructions regarding Insulin infusion IF patient is on TPN or tube feeding which is held or cycled AND start IV D10W at same rate as TPN / tube feeding.
- D10W - IV If on IV Insulin Infusion AND parenteral or enteral nutrition (TPN/TF): Infuse IV D10W at TPN/TF rate whenever nutrition is held or cycled off.

GLUCOSE MONITORING

- Glucose Monitoring - Nursing (whole blood glucose) Q1H until BG is stable within 80-110 mg/dL x 4, then Q2H until insulin infusion is discontinued. If subsequent BG values are outside the 80-110 mg/dL range, measure BG Q1H.
- Glucose Level – STAT plasma glucose for changes in mental status, diaphoresis, or unexplained tachycardia.

INITIATION OF CONTINUOUS INSULIN INFUSION PROTOCOL

NOTE: Insulin infusions will be provided as 1 unit Regular Insulin / mL 0.9% Sodium Chloride unless otherwise requested.

STEP ONE

- Insulin Regular Human _____ units (0.1 units/kg; MAX dose 10 units) IV bolus

STEP TWO

- Insulin Regular Human (1 unit/mL) Drip - Initiate drip with Algorithm 1

Move to HIGHER number algorithm:

If BG > 200 mg/dL AND BG has not fallen by at least 60 mg/dL within the previous hour.
 Notify MD if already at Algorithm 4.

Move to LOWER number algorithm:

If BG < 80 mg/dL x 2 consecutive readings. Unless already at Algorithm 1.

Algorithm 1		Algorithm 2		Algorithm 3		Algorithm 4	
BG	Units/hr	BG	Units/hr	BG	Units/hr	BG	Units/hr
< 60 = Hypoglycemia (follow hypoglycemia orders)							
< 70	Off	< 70	Off	< 70	Off	< 70	Off
70-109	0.2	70-109	0.5	70-109	1	70-109	1.5
110-119	0.5	110-119	1	110-119	2	110-119	3
120-149	1	120-149	1.5	120-149	3	120-149	5
150-179	1.5	150-179	2	150-179	4	150-179	7
180-209	2	180-209	3	180-209	5	180-209	9
210-239	2	210-239	4	210-239	6	210-239	12
240-269	3	240-269	5	240-269	8	240-269	16
270-299	3	270-299	6	270-299	10	270-299	20
300-329	4	300-329	7	300-329	12	300-329	24
330-359	4	330-359	8	330-359	14	≥ 330	28
≥ 360	6	≥ 360	12	≥ 360	16		

TRANSITION FROM IV INSULIN INFUSION TO SQ INSULIN

NOTE: When blood glucose has stabilized and patient is tolerating PO intake, transition to SQ insulin.
 See FV SQ Insulin Management Orders, # 510111, for transition orders.

HYPOGLYCEMIA MANAGEMENT

- FV Hypoglycemia Orders, Adult (>45 kg)

MD/PROVIDER SIGNATURE: _____ DATE: _____ TIME: _____

MD/PROVIDER NAME (print): _____ PAGER #: _____

THIS ORDER SET AVAILABLE IN FCIS