

ADULT DIABETIC EMERGENCIES

HPI	Signs & Symptoms	
<ul style="list-style-type: none"> PMH diabetes Onset of symptoms Last meal 	<p><u>Hypoglycemia</u></p> <ul style="list-style-type: none"> Altered mental status Cool, clammy skin Diaphoresis Seizure Decreased visual acuity, blindness 	<p><u>Hyperglycemia</u></p> <ul style="list-style-type: none"> Altered mental status Dry, red, warm skin Acetone (fruity) smell on breath Kussmaul respirations Dry mouth, intensive thirst Nausea/vomiting and abdominal pain

	EMR	EMT	PM
1. Provide Adult Routine Medical Care - treat life threatening problems with airway, breathing circulation and disability.	•	•	•
2. Obtain ECG and/or 12 lead, monitor Capnography		•	•
3. Obtain blood glucose level	•	•	•

HYPOGLYCEMIA: Altered Mental Status, BG < 60 or cool/clammy skin

4. ORAL GLUCOSE GEL : 15 gm (If patient is able to tolerate oral preparation, has gag reflex and able to protect own airway)	•	•	•
5. DEXTROSE 10% : 25 gm/250 mL IV, may repeat, max. 50 gm			•
6. or if no IV, GLUCAGON 1 mg IM/IN		•	•

HYPERGLYCEMIA with DEHYDRATION:

BG >250 with dehydration, vomiting, abdominal pain, AMS
or unable to obtain BG with warm, flushed skin and deep, rapid respirations

4. NORMAL SALINE in 500 mL increments, titrate to desired patient response			•
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PEARLS:

- Asymptomatic hyperglycemia poses no risk to the patient while inappropriately aggressive interventions to manage blood sugar can harm patients.
- Glucagon causes a breakdown of stored glycogen to glucose. Glucagon may not work if glycogen stores are previously depleted due to liver dysfunction, alcoholism, or malnutrition. Effects of Glucagon may take up to 30 minutes.