

(place patient label here)

Patient Name: _____



PROVIDER ORDERS

Order Set Directions:

- > (✓) - Check orders to activate: Orders with pre-checked box will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
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Diagnosis: _____

Allergies with reaction type: _____

ED DKA/HHS Initial Treatment

Version 3 8/18/15

General

- Diabetic Ketoacidosis (DKA) criteria: arterial pH less than 7.3, serum glucose greater than 250 mg/dL serum bicarbonate less than 18 mEq/l
- Hyperglycemic Hyperosmolar State (HHS) criteria: serum blood glucose greater than 600 mg/dL, arterial pH greater than or equal to 7.3, serum bicarbonate greater than 15 mEq/l, serum osmolality greater than 320 mOsm/kg and minimal ketonuria or ketonemia

Nursing Orders

- Vital signs per unit standard
- Vital signs non unit standard _____
- Cardiac monitor
- Pulse oximetry continuous
- Assess neurologic status : every hour
- Point of Care Capillary Blood Glucose: Following fluid bolus and every hour while on insulin drip
- IF patient is admitted with an insulin infusion pump physically remove the pump, tubing and subcutaneous catheter at start of insulin infusion

Diet

- NPO

IV/ Line Placement

- Peripheral IV insert/maintain
- Saline lock with saline flush every BID; Place 2nd IV

Initial Treatment

IV Fluids - Bolus For patients with severe hypovolemia, without cardiac compromise

- If cardiogenic shock present consider hemodynamic monitoring and pressors
- 20 mL/kg bolus (Edit volume and Rate)
Sodium Chloride 0.9% IV
 - _____ milliliter BOLUS 999 milliliter/hour intravenously Infuse as fast as possible (20 mL/kg bolus)
- 15 mL/kg bolus (Edit volume and Rate)
Sodium Chloride 0.9% IV
 - _____ milliliter BOLUS 999 milliliter/hour intravenously Infuse as fast as possible (15 mL/kg bolus)

Bicarbonate Therapy

- Consider IV bicarbonate therapy for pH less than or equal to 7.0
sodium bicarbonate
 - 100 milliequivalent intravenous push once ; Recheck blood gas and BMP post infusion and notify provider of results.

Electrolyte Replacement

For serum potassium less than or equal to 3.3 mEq/L SELECT:

- potassium chloride
 - 30 milliequivalent in 300 milliliter of NS intravenously infuse over 1.5 hour FOR PERIPHERAL IV

Initials _____

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Insulins

insulin regular

- 0.1 unit/kilogram intravenous push once

Laboratory

- For patients with suspected DKA or HHS, consider obtaining serum electrolytes, glucose, calcium, magnesium, phosphorus, and blood gases at least every 2 to 4 hours in more severe cases. Monitor BUN, creatinine, and hematocrit every 6 to 8 hours until normal.

Admission labs or labs to be obtained now:

- CBC/AUTO DIFF
- COMPREHENSIVE METABOLIC PANEL
- MAGNESIUM LEVEL, PLASMA
- PHOSPHORUS LEVEL, PLASMA
- BETA-HYDROXYBUTYRATE, BLOOD
- Blood gas study, arterial
- OSMOLALITY, SERUM
- GLYC-HEMOGLOBIN (HGB A1C)
- TROPONIN I
- BLOOD CULTURE , from two different sites five minutes apart
- UA W/MICROSCOPY, CULT IF INDIC

Consults

- Provider to provider notification preferred.
- Consult to intensivist:
 - Consult other provider _____ regarding _____ Does nursing need to contact consulted provider? [] Yes [] No

Provider Signature: _____ Date: _____ Time: _____