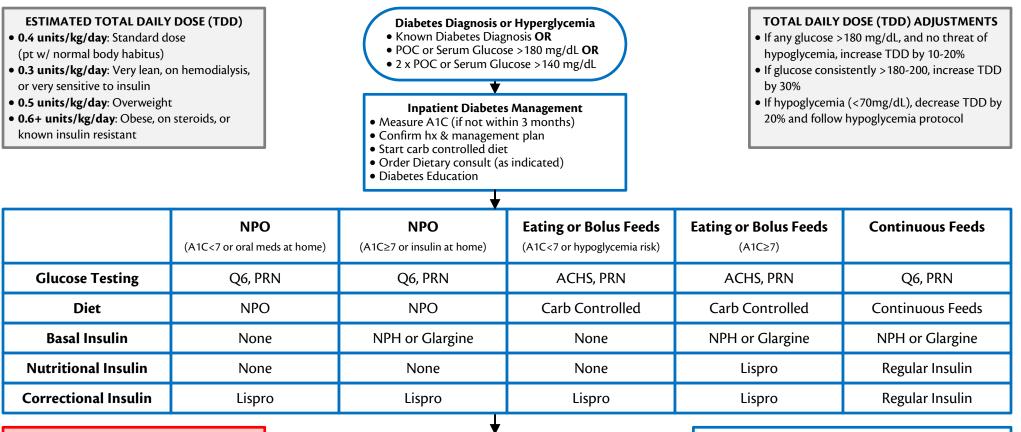
UW Medicine | VALLEY MEDICAL CENTER Diabetes: Inpatient Management



METFORMIN

OFTEN held for concerns about interaction with CT scan dye or acute illness

DIABETES EDUCATION

Role Physician Nursing Dietary Pharmacy

Topic Changes, Uncontrolled Glucose Monitoring Diet Management Medications

*Diabetes Survival Kit

For questions please contact: <u>CarePathways@ValleyMed.org</u>

Discharge Planning

- Reconcile Medications
- Prescribe medications (affordable)
- Ensure Follow-up Care (Case Manager)
- Patient Education
- Referral to Nutrition Clinic
- Communication for Transition

Discharge & Referral

Poorly Controlled - Insulin Management

Basal Insulin

- Advance from home dose or start 0.2-0.3 units/kg/day
- NPH Q12hr OR Glargine Q24hr
- Adjust by 10-20% every 2-3 days to achieve target

Correctional Insulin

- For BG \geq 150mg/dL, graded scale of 1-4 units for each increment of 50 mg/dL, based on insulin sensitivity
- Same type (and added to) prandial insulin
- Adjust by 1-2 units/dose every 1-2 days if inadequate

Prandial (Nutritional) Insulin

- Advance from home dose or start 0.05-0.1 units/kg/meal
- Insulin Lispro or regular insulin
- Adjust by 1-2 units/dose every 1-2 days if response inadequate