

Medical: Diabetic Emergencies

EMR

- ABC and vital signs
- Airway management with **oxygen** therapy maintaining a SaO₂ of 94-98% through titration
- *Determine blood sugar
 - If <60 and patient is able to swallow, give **oral glucose** 1 unit dose (24 gm)
 - Or
 - Orange juice or an equivalent high source of sugar solution PO.
 - If not equipped or able to check blood glucose level and blood glucose is suspected to be low and patient is able to self-administer and swallow on command, give **oral glucose** one unit dose (24 grams)
 - *Recheck blood sugar after sugar is administered.

EMR STOP

EMT

- If unable to give **oral glucose** administer ***Glucagon** 1 mg IM.

EMT STOP

EMT IV

- Vascular access
- If glucose level is below 60 and patient cannot swallow on command, administer *D10 250 ml IV bolus, bolus may be repeated if patient remains hypoglycemic.
- If unable to obtain vascular access when glucose level is below 60, administer ***Glucagon** 1 mg IM.
- If glucose level is above 400, administer **Normal Saline** 250 ml IV bolus, bolus may be repeated if patient remains hyperglycemic.

ADVANCED EMT

- If glucose level is below 60 and patient cannot swallow on command, administer **Dextrose 50%** 25 grams IV; may re-dose if hypoglycemia recurs during transport
- If glucose level is above 400, administer **Normal Saline** 250 ml IV bolus, bolus may be repeated if patient remains hyperglycemic.
- If unable to obtain vascular access when glucose level is below 60, administer **Glucagon** 1 mg IM.

ADVANCED EMT STOP

Key Points/Considerations

After Provider evaluation and/or treatment, when, in the Provider's clinical judgment the patient is stable, the patient may be left at the scene after contacting medical control.