

SECTION: M-7-b

PROTOCOL TITLE: ADULT HYPERGLYCEMIA

REVISED: 15 April 2006

GENERAL COMMENTS: Symptomatic hyperglycemia is defined as BG >250mg/dl with signs of severe dehydration, altered LOC, or shock.

BLS SPECIFIC CARE: *See adult General Medical Care Protocol M-1*

- Protect the patient from harm and keep the patient calm.
- Aggressively monitor and protect the airway. Administer supplemental oxygen as tolerated by the patient.

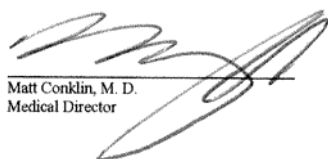
ILS SPECIFIC CARE: *See adult General Medical Care Protocol M-1*

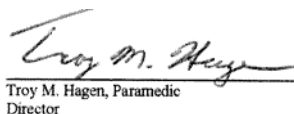
- Treat symptomatic patients aggressively with IV crystalloid up to 1000 cc. Hold for s/s of CHF/pulmonary edema or CHF Hx.

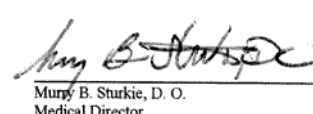
ALS SPECIFIC CARE: *See adult General Medical Care Protocol M-1*

No specific ALS care.

ADULT HYPERGLYCEMIA


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Protocol
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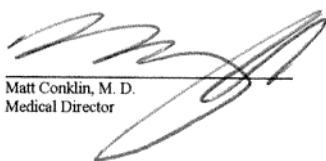
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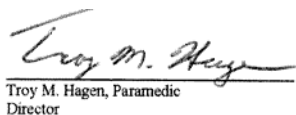
PHYSICIAN PEARLS:

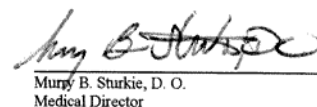
Hyperglycemic emergencies in patients with diabetes can generally be broken into two categories: Diabetic Ketoacidosis (DKA) and Hyperosmolar Hyperglycemic State (HHS), also known as Hyperosmolar Hyperglycemic Non-ketotic Coma (HHNC). It is estimated that 2-8% of all hospital admissions are for the treatment of DKA.

Mortality for DKA is between 2-10%. Published mortality rates for HHS vary, but the trend is that the older the patient and the higher the osmolality, the greater the risk for death.

Regardless, most pre-hospital care is focused around the treatment of severe dehydration, and support of vital functions.


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