

POLICY: 554.42
TITLE: Glycemic Emergencies

EFFECTIVE: 07/01/2024
REVIEW: 07/2027
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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GLYCEMIC EMERGENCIES

- I. AUTHORITY
Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE
To serve as a patient treatment standard for EMRs, EMTs, and Paramedics within their scope of practice.
- III. PROTOCOL
Blood sugar testing is the only accurate method to determine if a patient is hypoglycemic or hyperglycemic.

Hypoglycemia: Blood glucose < 70 mg/dL. Characterized by: ALOC, seizures, combativeness, psychosis, disorientation, diaphoresis, shaking.

Provider Key: F = First Responder/EMR E = EMT O = EMT Local Optional SOP
P = Paramedic D = Base Hospital Physician Order Required

| | F | E | O | P | D |
|--|---|---|---|---|---|
| ASSESSMENT | X | X | X | X | |
| PULSE OXIMETRY: apply and monitor | | X | X | X | |
| CAPNOGRAPHY: apply and monitor | | | | X | |
| OXYGEN: if pulse oximetry <94% or signs of respiratory distress or hypoperfusion. | X | X | X | X | |
| ECG MONITOR: lead placement may be delegated. Treat as indicated. | | | | X | |
| TEST FOR GLUCOSE | | X | X | X | |
| HYPOGLYCEMIA Blood glucose < 70 mg/dL | F | E | O | P | D |
| ORAL GLUCOSE: consider administering oral glucose to patients who are awake and have an intact gag reflex | X | X | X | X | |
| VASCULAR ACCESS: IV/IO, rate as indicated | | | | X | |
| D10: infuse 100 mL IV/IO if blood glucose < 70 mg/dL. Recheck blood glucose 10 minutes post infusion. If blood glucose < 70 mg/dL infuse remaining 150 mL. | | | | X | |
| GLUCAGON: If no IV/IO access and unable to tolerate oral glucose, give 1 mg IM if blood glucose < 70 mg/dL. Recheck blood glucose 10 minutes post injection. If blood glucose remains < 70 mg/dL, repeat 1 mg IM. | | | | X | |

| HYPERGLYCEMIA Blood glucose > 300 mg/dL | F | E | O | P | D |
|--|---|---|---|---|---|
| VASCULAR ACCESS: IV | | | | X | |
| FLUID BOLUS: administer 250 mL fluid bolus of NS, up to a total of 2 liters. Reassess after each bolus. HYDRATE WITH CAUTION in patients with chronic renal failure, CHF, and hypertension. | | | | X | |