

SECTION: M-6

PROTOCOL TITLE: ADULT HYPOGLYCEMIA

REVISED: October 15, 2014

GENERAL COMMENTS: Symptomatic hypoglycemia is defined as BG < 80 mg/dl with an altered LOC.

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

- If hypoglycemia is confirmed by glucometry: (BG < 80 mg/dl **with** symptoms)
- If the patient can hold a cup or plate without assistance, and can swallow on command, encourage the patient to consume simple and complex carbohydrates or oral glucose. Attempt to document volume of food/liquid ingested. If grams of sugar are known, document this as well
- Oral Glucose dosing and follow-up:
 - If simple and complex carbohydrates are not readily available or not feasible
 - Only if patient retains an intact, self-maintained airway, and can swallow on command
 - 15-45 g of glucose paste administered orally. The EMT may mix this in a liquid to make it more palatable for the patient
 - One (1) tube (24 g) PO self-administered by patient
 - Repeat if BG remains < 80 mg/dl with symptoms after 5 minutes
 - Re-assess BG every 5 minutes until BG \geq 80 with a normal mental status
- Treat and released only after ALS (Paramedic) evaluation

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

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

- Dextrose 50% (D50W)
 - 25 g administered slowly through the distal port of a free flowing IV line. 25 g if patient is unconscious. May start with 12.5 g if patient is conscious and responsive or suspected CVA
- Glucagon IM: (If unable to obtain IV access)
 - IM: 1 mg administered if IV access is not available
 - Vomiting may occur following administration

Protocol

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ADULT HYPOGLYCEMIA

Treat and Release:

1. Complete Diabetic Treat and Release checklist. Contact Medical Control if indicated.
2. Complete Refusal of Treatment and/or Transport form.
3. Attach all forms to patient care report.