

**Endocrinology Diabetic Ketoacidosis (DKA)  
Inpatient and Outpatient  
(Page 1 of 2)**

DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ TIME \_\_\_\_\_  
DD MM YYYY

BSA: \_\_\_\_\_ m<sup>2</sup>

WEIGHT: \_\_\_\_\_ kg HEIGHT: \_\_\_\_\_ cm

ALLERGY CAUTION sheet reviewed

**Status/Admit/Transfer/Discharge**

- ▶ Refer to BCCH Diabetic Ketoacidosis Protocol for Children up to Age 19 years on ePOPS
- ▶ Refer to BCCH Diabetic Ketoacidosis Nursing Protocol on ePOPS
- ▶ Refer to BCCH Diabetic Ketoacidosis Recipes for Making Solutions on ePOPS

**Patient Care**

**On admission:**

- Measure weight STAT
- Strictly monitor intake and output
- Insert large-bore intravenous cannula STAT
- Blood glucose, point-of-care measurement STAT, then q \_\_\_\_\_ h (suggest 30 to 60 minutes)
- Ketones, urine dipstick STAT

**If patient develops severe headache or alteration in vital signs or Glasgow Coma Scale (GCS):**

- Notify physician STAT
- Raise head of bed 30°
- Decrease all IV fluid bags to 5 mL/h pending MD reassessment

**Vital Signs**

- Vital signs STAT on admission, then q1h
- Neurovital signs STAT on admission, then q1h
- Continuous cardiorespiratory monitoring

**IV Infusions**

**Fluid Resuscitation Boluses (Initial 30 to 60 minutes)**

- First:** Sodium Chloride 0.9% \_\_\_\_\_ mL IV bolus over 30 minutes (10 mL/kg)
- Second:** Sodium Chloride 0.9% \_\_\_\_\_ mL IV bolus over 30 minutes (10 mL/kg)

**Fluid Repair**

**After initial 30 to 60 minutes**

- Begin at \_\_\_\_\_ (time)
- Bag A:** Sodium Chloride 0.9% with Potassium Chloride 40 mmol/L IV at \_\_\_\_\_ mL/h (rate determined from DKA protocol, line 5)

**After initial 1 to 2 hours:**

- Begin at \_\_\_\_\_ (time)
- ▶ Sum of Bag A rate plus Bag B rate determined from DKA protocol, line 8, to keep glucose at 8 to 12 mmol/L
- ▶ Insulin infusion rate determined from DKA protocol, line 7, where 1 mL/kg/h = 0.1 units/kg/hour
- ▶ Saturate insulin binding sites by priming and flushing with 50 mL of prepared insulin infusion to run through tubing and discard
- Continue **Bag A** at \_\_\_\_\_ mL/h
- Bag B:** Dextrose 12.5% and Sodium Chloride 0.9% with Potassium Chloride 40 mmol/L IV at \_\_\_\_\_ mL/h
- Bag C:** insulin regular (HumuLIN® R or Novolin® Toronto) 50 units in 500 mL of Sodium Chloride 0.9% IV at \_\_\_\_\_ mL/h

**Medications**

**If patient develops severe headache or alteration in vital signs or GCS:**

- mannitol 20% \_\_\_\_\_ g IV STAT over 15 minutes (0.5 to 1 g/kg, 2.5 to 5 mL/kg)
- Sodium Chloride 3% \_\_\_\_\_ mL IV STAT over 15 minutes (2.5 to 5 mL/kg)

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

College ID: \_\_\_\_\_ Pager: \_\_\_\_\_



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ALLERGY CAUTION sheet reviewed

Nutrition

NPO

Laboratory

Blood work

- List of laboratory tests including Sodium, Potassium, Chloride, Bicarbonate, Anion Gap, Blood Gas, venous, Glucose, Beta-hydroxybutyrate, Urea, Creatinine, Magnesium, Calcium, ionized, Phosphorus, CBC with differential, and Hemoglobin A1C, each with checkboxes for STAT and frequency.

Other labs:

Signature: Print Name:

College ID: Pager: