

UCSF Children's Hospital

at UCSF Medical Center

UNIT NUMBER

PT. NAME

BIRTHDATE

OB SUBCUTANEOUS INSULIN PUMP ORDER SET

(Check "✓" in box activates order)

DATE:	TIME:	LOCATION	DATE
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1. Patient may use own insulin pump but must change pump reservoir to insulin supplied by the hospital pharmacy.
2. Contact Endocrine Service to consult: 443-9125.
3. Blood Glucose monitoring Patient eating – Fasting - Before Meals, 1 hr post prandials, bedtime, 2 am and PRN for symptoms of hypo- or hyperglycemia or Other: _____
4. Dietitian to provide menu listing the carbohydrate amount per food.
Diet: Regular Carbohydrate controlled Other: _____
5. Insulin Pump Instructions:
 - a. Insulin type Aspart (Novolog) Lispro (Humalog) _____
 - b. **Basal Rate**

Note: If patient is receiving Extraneal, Gamimune N 5%, Octagam, D-xylose, WinrhoD SDF Liquid, Hepagam B, Orencia, or Adept adhesion reduction solution, do not use glucose meter for BG checks. All BGs must be sent to the laboratory.

Start Time	Infusion Rate (units/hr)	Start Time	Infusion Rate (units/hr)

c. Carbohydrate Ratio

Breakfast OR Start time _____ units per _____ grams of carbohydrates
 Lunch OR Start time _____ units per _____ grams of carbohydrates
 Dinner OR Start time _____ units per _____ grams of carbohydrates
 Snack OR Start time _____ units per _____ grams of carbohydrates

d. High Glucose Correction

Start time _____ 1 unit per _____ mg/dL > _____ mg/dL
 Start time _____ 1 unit per _____ mg/dL > _____ mg/dL

6. Patient to provide own infusion sets, reservoirs and batteries.
7. Patient to change infusion set at least every 24-48 hours or sooner as needed.
8. Check infusion site for infection or dislodgement every shift.
9. Verify with patient the insulin pump's basal rate(s), carbohydrate ratio(s), high glucose correction(s), and insulin reservoir amount every shift. If the patient cannot demonstrate his/her pump settings and boluses, notify MD.
10. **Call MD for BG <70mg/dL and >200mg/dL.**
11. Preventing Diabetic Ketoacidosis on the Insulin Pump.
 - a. If the blood glucose level remains greater than 250mg/dL x2, ask patient to change infusion set.
12. Managing hypoglycemia on the Insulin Pump if BG < 70mg/dL: Check BG Q 15 minutes and repeat treatment until BG is ≥70mg/dL.
 - a. If Patient is alert and can take PO:
 - Give 20 grams of oral fast acting carbohydrate per patient preference:
 - Give one dose of 20 grams glucose** or 6 ounces of fruit juice or milk PO. Repeat Q 15 minutes and repeat treatment until BG ≥ 70mg/dL.
 - b. If patient is not able to take PO but is alert :
 - Give 25mL of D50W IV push.** Repeat Q 15 minutes until BG ≥ 70mg/dL.
 - c. If patient is incoherent/unconscious
 - Give 25mL of D50W IV push.** Repeat Q 15 minutes until BG ≥ 70mg/dL.
 - Temporarily disconnect pump tubing from the infusion set or turn off pump.
13. Disconnect the insulin pump from the infusion set for xrays, CT scan, MRI, bone density, and radiation treatment. The infusion set can remain in place provided it is not metal.

Signature _____ Provider No. _____ Date _____ Time _____ Pager _____

ORDERS MUST INCLUDE LEGIBLE PROVIDER NUMBER, DATE, AND TIME

Orders checked by (name) _____ Date _____ Time _____

(Specify title, i.e., RN, LVN, etc.)

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