Hillsborough County Fire Rescue STANDING ORDERS AND PROTOCOL

Section: Adult Medical Page 1 of 1

Subject: HYPOGLYCEMIA

Section #: 340.24

Issue Date: March 21, 2011
Revision Date: Appril 16, 2013
Approved By:

Michael Lozano, Jr., M.D., HCFR Medical Director

1. Basic ALS Treatment.

2. ALS Treatment:

- a. $D_{50}W$ (for known hypoglycemia \leq 60 mg/dl)
 - . 12.5 grams IV (over 1 to 2 mins)
 - ii. May be repeated one (1) time
- b. Oral dextrose (only if the patient has an adequate gag reflex)
 - i. 25 to 30 grams PO
 - ii. May be repeated as necessary every five minutes to raise blood glucose level to ≥ 90 mg/dl
- c. Glucagon (when unable to establish an IV)
 - i. 1.0 mg IM only once.

ALTERNATIVE PROTOCOL To Be Used In The Absence of D₅₀W

- 1. Basic ALS Treatment.
- 2. **Oral Glucose** (only if the patient has an adequate gag reflex)
 - a. 25 to 30 grams PO
 - b. May be repeated as necessary every five minutes to raise blood sugar glucose level to >90 mg/dl
- 3. Glucagon
 - a. 1.0 mg IM
- 4. Dextrose D₁₀W in 250 ml (25g) IV over 15-20 minutes
 - a. Contraindicated if the patient is in pulmonary edema
 - b. It is an acceptable approach to administer both glucagon and dextrose 10% if you are not initially able to establish an IV of adequate flow. Having given glucagon does not prevent you from giving dextrose 10% later in the call.
 - c. Monitor lung sounds and pulse oximetry during administration and discontinue flow if pulmonary edema is suspected.
- 5. **NOTE**: It is likely under this protocol alternative we will transport more patients with hypoglycemia, as glucagon at times does not suffice, and administration of Dextrose $D_{10}W$ may take a long amount of time.