## **Notes to Prescriber:**

## Continue insulin infusion until ketosis resolves as defined by:

Beta-hydroxybutyrate normalized AND either one of the following two criteria:

• pH 7.3 or more or **CALCULATED Anion gap** (not automated) **13 or less** (calculated anion gap = Na – (Cl + HCO<sub>3</sub>))

## \*OR\*

serum bicarbonate greater than 15 mmol/L or glucose less than 11 mmol/L

## **SUCUTANEOUS INSULIN**

 Consider conversion to SUBCUTANEOUS insulin when patient is eating and drinking and ketosis is resolved. Discontinue insulin IV infusion 2 hours after first dose of subcutaneous insulin

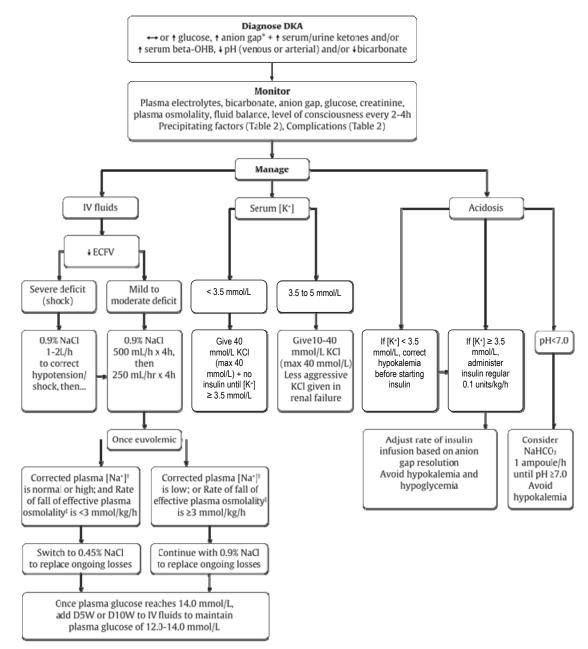


Figure 1, Management of diabetic lengaridosis in adults,

Pete-OHS, beta hydrosylostyric acid; UKA, diabetic betoacidown; EXPV, ustracelluar fluid volume; FV, intracensus.

Throna glacese may be lower than expected in some settings.

"Anion gap - plastra [Na+] - plasma [Cl.] - plasma [CO), [.

'Corrected plasma (Na-) = measured [Na-] + 1(10 × ([plasma glucase (mmol/L)] - 5).

'effective plasma osmolality - [Na-] = 2 > [plasma glucose (mmol/C)], reported as mmol/kg.