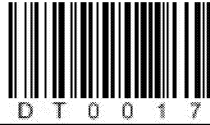




**THE UNIVERSITY OF KANSAS HOSPITAL**

3901 Rainbow Boulevard  
Kansas City, Kansas 66160

Do not write in this box



PATIENT LABEL

**PHYSICIAN'S ORDER FORM**

**DATE & TIME # ORDERS**  
**MODIFIED ADULT YALE INSULIN INFUSION PROTOCOL**

**Legend:** • Bullets indicate orders will be done. Draw one line through any orders that are not needed.  
□ Boxes are optional and must be checked to be considered an order.

**References:** Goldberg PA et.al (2004). Implementation of a Safe and Effective Insulin Infusion Protocol in a Medical Intensive Care Unit. Diabetes care,27(2),461-467.

1. **Attending Physician:** \_\_\_\_\_ **Pager:** \_\_\_\_\_  
**Resident Physician:** \_\_\_\_\_ **Pager:** \_\_\_\_\_

2. **Allergies:** \_\_\_\_\_ **Weight in kg:** \_\_\_\_\_

3. **Nursing Communication: for insulin infusion**

- **INITIAL BOLUS DOSE:** Divide initial POC Glucose level by 100, and then round to nearest 0.5 units. (Do not bolus if POC Glucose < 200mg/dL )
- **INITIAL INSULIN INFUSION RATE:** Divide initial POC Glucose level by 100, and then round to nearest 0.5 units.
- Notify physician if POC Glucose within target range prior to administering bolus dose and initiating infusion.

**TARGET POC GLUCOSE: 100-139 mg/dL: Requires 3 consecutive (hourly) POC glucose levels within target range to change frequency to every 2 hours.**

**If last POC Glucose is ≥ 2 hrs from present, divide POC Glucose change by 2 (for average hourly rate of change)**

If any of the following occur, resume hourly monitoring until 3 consecutive checks are within target:

- POC Glucose out of target range
- Initiation or cessation of renal replacement therapy
- Initiation or cessation of vasopressors or steroid therapy
- Discontinuation of insulin infusion for unanticipated reason
- Initiation, cessation or rate change of nutritional support (TPN, tube feeding, etc)
- Significant changes in clinical condition

4. **CHANGING THE INSULIN INFUSION RATE: (Based on hourly insulin rate of change)**  
POC Glucose <70 mg/dL with or without hypoglycemia symptoms; or POC Glucose < 80 mg/dL with hypoglycemia symptoms:

- Stop insulin infusion
- Manage hypoglycemia per Hypoglycemia Standard of Practice.
- When ≥ 100 mg/dL, wait 1 hour, then restart insulin infusion at 75% of most recent rate (round to nearest 0.5 units)

POC Glucose ≥ 70 mg/dL:

- Determine CURRENT POC Glucose: identify a titration column on table below
- Determine RATE OF CHANGE: difference between current and previous POC Glucose identifies cell in table below.

POC Glucose 70-99 mg/dL	POC Glucose 100 -139 mg/dL	POC Glucose 140-199 mg/dL	POC Glucose ≥ 200 mg/dL	INSTRUCTIONS
<del>POC Glucose</del>	<del>POC Glucose</del>	POC Glucose ↑ by > 50 mg/dL/hr	POC Glucose ↑	↑ INFUSION by "2 Δ"
<del>POC Glucose</del>	POC Glucose ↑ by > 25 mg/dL/hr	POC Glucose ↑ by 1-50 mg/dL/hr or UNCHANGED	POC Glucose UNCHANGED or ↓ by 1-25 mg/dL/hr	↑ INFUSION by "Δ"
POC Glucose ↑	POC Glucose ↑ by 1-25mg/dL/hr, UNCHANGED, or ↓ by 1-25 mg/dL/hr	POC Glucose ↓ by 1-50 mg/dL/hr	POC Glucose ↓ by 26-75 mg/dL/hr	NO INFUSION CHANGE
POC Glucose UNCHANGED or ↓ by 1-25 mg/dL/hr	POC Glucose ↓ by 26-50 mg/dL/hr	POC Glucose ↓ by 51-75 mg/dL/hr	POC Glucose ↓ by 76-100 mg/dL/hr	↓ INFUSION by "Δ"
<del>POC Glucose</del>	POC Glucose ↓ by > 50 mg/dL/hr	POC Glucose ↓ by > 75 mg/dL/hr	POC Glucose ↓ by > 100 mg/dL/hr	<b>HOLD x 30 minutes</b> Then ↓ by "2 Δ", then recheck POC Glucose in 30 minutes

POC Glucose ↓ by >25 mg/dL/hr* *Stop Insulin drip, check POC Glucose q 30 minutes. When ≥100mg/dL, restart insulin drip @ 75% of most recent rate (round to nearest 0.5 units).	Current Rate (units/hour)	Δ = Rate Change (units/hour)	2Δ = 2x Rate Change (units/hour)
	≤ 2.5	0.5	1
	3 – 6	1	2
	6.5 – 9.5	1.5	3
	10 – 14.5	2	4
	15 – 19.5	3	6
	20 – 24.5	4	8
	≥ 25	≥ 5	10 (consult physician)

**MODIFIED ADULT YALE INSULIN INFUSION PROTOCOL**

