

**TREATMENT PROTOCOL****DIABETES****A. Maintenance of Diabetes**

1. The Facility Nurse and Facility Provider will establish the routine and frequency of glucose checks (fingersticks).
  - Take the inmate to the Medical Unit.
  - The inmate may perform his/her own fingerstick under the supervision of the Facility Nurse or observation of a Corrections Deputy.
2. Insulin is stored in the refrigerator in the Medical unit.
3. Do not administer if blood glucose < 70. Call Facility Nurse or Facility Provider for instructions.
  - Remove insulin from the refrigerator.
  - Verify the name, time and amount of insulin in the syringe and the dosage indicated on medical record.
  - The inmate will inject his/her own insulin. A nurse or deputy will verify the amount in the syringe.
  - Have inmate dispose of the syringe, used test strip and used lancet in the Sharps container. Inmate should wipe down the table area with sani-wipe before leaving area.
2. Proper documentation:
  - Record the administration of the insulin and the glucose results in the EMAR.

**B. Insulin Shock – Extremely Low Blood Sugar**

1. Symptoms/Presentation
  - Inmate states he/she is a diabetic and feels he/she is weak and shaky.
2. Obtain medial history from inmate/ conscious inmate.

- When was the last time inmate had taken an insulin injection?
  - How much insulin is inmate taking?
  - When did the inmate eat last?
  - What did the inmate have to eat?
  - What are the inmate's symptoms?
  - Who is the inmate's treating physician?
  - Have inmate do a glucose check (Normal rating 80-120)
    - If blood sugar is below 70, have them drink orange juice with a packet of sugar or give insta-glucose (inside lower lip) immediately.
    - Then call the Facility Nurse or provider for further instructions. Move inmate to The Medical Unit or Booking for observation.
    - Document treatment for Facility Nurse.
3. If semi-conscious, give insta-glucose gel (inside lower lip) immediately and call EMTs.
  4. If unconscious or no response to insta-glucose, call EMTs. Perform CPR if necessary.
  5. Report of information
    - a) Contact Facility Nurse if fingerstick is less than 70. If no nurse on duty, re-check blood sugar in 20-30 minutes. If still less than 70, call Nurse Practitioner or Facility Physician if blood glucose does not stabilize.
    - b) Re-check blood glucose.

### **C. Diabetic Coma – Extremely High Blood Sugar**

1. If blood sugar glucose check (fingerstick) is 400 or above:
  - Do not give anything by mouth. If Facility Nurse or Facility Provider is unavailable, call EMT's. If instructed by EMT's, transport to hospital.