



PHYSICIANS' ORDERS

INPATIENT OUTPATIENT BOTH

ALLERGIES:

WEIGHT		kilograms	HEIGHT	centimeters
DATE	TIME	DIABETIC KETOACIDOSIS (DKA) ORDERS		NOTED BY
		kg (kilogram); mEq (milliequivalent); mL (milliliter); IV (intravenously)		
		<p>On Admission STAT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> vital signs and neurovital signs on admission and then hourly <input type="checkbox"/> weigh patient <input type="checkbox"/> strictly monitor input and output <input type="checkbox"/> nothing by mouth <input type="checkbox"/> pulse oximetry and cardiac monitor <input type="checkbox"/> insert large-bore intravenous cannula <input type="checkbox"/> capillary blood glucose by fingerpoke <input type="checkbox"/> urine for ketones <input type="checkbox"/> capillary blood gas; whole blood sodium, potassium, chloride, anion gap, ionized calcium, glucose, beta-hydroxybutyrate <input type="checkbox"/> urea, creatinine, phosphorus, complete blood-cell count/differential, HbA1C <input type="checkbox"/> other labs: _____ <p>Fluid Resuscitation Bolus (ONLY AS NECESSARY FOR CARDIOVASCULAR INSTABILITY)</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0.9% sodium chloride _____ mL IV over _____ minutes (suggested 5–10 mL/kg over 30–60 minutes; repeat if necessary, maximum <30 mL/kg) <p>Fluid Repair (initial 1–2 hours):</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0.9% sodium chloride, run at _____ mL/hour IV (rate determined from DKA protocol, line 8) until _____ o'clock <p>Fluid Repair (after first 1–2 hours): begin at _____ o'clock</p> <ul style="list-style-type: none"> <input type="checkbox"/> discontinue above 0.9% sodium chloride order <input type="checkbox"/> Bag A: 0.9% sodium chloride + 40 mEq/L potassium chloride at _____ mL/hour IV <input type="checkbox"/> Bag B: 12.5 % dextrose / 0.9% sodium chloride + 40 mEq/L potassium chloride at _____ mL/hour IV (sum of Bag A rate + Bag B rate determined from DKA protocol, line 11, to keep glucose 10–15 mmol/L) <p>Insulin Infusion (after first 1–2 hours): begin at _____ o'clock</p> <ul style="list-style-type: none"> <input type="checkbox"/> Bag C: 50 units Regular insulin in 500 mL 0.9% sodium chloride, flush first 50 mL, then run at _____ mL/hour IV (rate determined from DKA protocol, line 10, where 1 mL/kg/hour = 0.1 units/kg/hour) <p>Ongoing Monitoring:</p> <ul style="list-style-type: none"> <input type="checkbox"/> capillary glucose every _____ minutes (suggested 30–60 minutes) <input type="checkbox"/> capillary blood gas; whole blood sodium, potassium, chloride, anion gap, ionized calcium, glucose, beta-hydroxybutyrate; plasma urea, creatinine, phosphorus every _____ hours (suggested 2–4 hours) <input type="checkbox"/> if patient develops severe headache or alteration in vital signs or Glasgow Coma Scale Score: notify physician STAT, raise head of bed 30°, decrease all IV fluids to 5 mL/hour, and have mannitol ready at bedside for infusion 		
		Signature: _____ Pager # _____		
		Print Name: _____ College ID# _____		

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