



DATE: _____

Phone: _____

Fax: _____

Endocrinologist: _____

Nurse: _____

HYPOGLYCEMIA IN THE ENDOCRINE PATIENT

Hypoglycemia (low blood sugar) can occur when the blood glucose (sugar) drops below the normal range, i.e. below 3.0 mmol/L. The onset can be sudden.

Causes: Hypoglycemia can result from late or missed meals, increased exercise without food, a missed dose of medication, or unknown causes.

How will you recognize hypoglycemia?

Every child is different in how they behave when they become hypoglycemic. Some children become pale and sweaty, and others may feel hungry, complain of a headache, or become uncoordinated. Their mood may become irritable, tearful, anxious, or confused. Severe hypoglycemia can cause seizures or loss of consciousness.

What should you do if you suspect hypoglycemia?

If possible test the blood sugar with a monitor to confirm hypoglycemia. If the blood sugar is below _____ mmol/L, proceed with the treatment described below.

Treatment for hypoglycemia:

1. **Infants** should be given 5 grams of fast-acting glucose, e.g. 3 mL of Insta-Glucose® gel or 10 mL of Dex4® gel.
Older children should take 10-15 grams of fast-acting glucose (e.g. 4 oz apple or orange juice; 1 tablespoon of corn syrup or honey; or 2½-4 Dex®4 glucose tablets).
2. Check the blood sugar again 15 minutes after giving the fast-acting sugar, and re-treat if less than 4.0 mmol/L.
3. If it is more than 30 minutes to the next meal, take some carbohydrate and protein (e.g. ½ peanut butter sandwich, or 3 crackers and some cheese, or 8 oz milk).
For infants follow with breast milk or formula.

Specific instructions for your child:

1. Test your child's blood sugar _____
2. Follow the treatment above when blood sugars are less than _____
3. Recheck blood sugar 15 minutes after treatment.
4. Fax in the blood sugars _____