

NEWLY DIAGNOSED HYPERGLYCEMIA IN ADULTS

CDU INCLUSION CRITERIA

- >18 years of age
- Symptomatic hyperglycemia >200mg/dL (for asymptomatic patients with glucose <250mg/dL see “Newly diagnosed adult hyperglycemia ED discharge protocol”)
- Stable vital signs
- Need for observation, treatment, and/or consultation for a condition that cannot be managed as an outpatient
- Anticipated readiness for discharge in 24-48 hours

CDU EXCLUSION CRITERIA

- Unstable vital signs
- DKA or HHS
- Concomitant illness that requires admission
- Reversible/short term cause of hyperglycemia (ie steroid use)
- Pregnant, lactating, or postpartum
- Inability to independently ambulate

CDU INTERVENTIONS

- Serial vital signs and re-evaluation
- IVF
- Serial glucose monitoring q 4-6 hours
- Insulin administration per ED correctional protocol
- Initiation of oral diabetes medications or basal insulin per HbA1c
- Patient education
- Consultation with DM educator if needed
- Consultation with specialist if needed
- Care management consultation if needed
- Arrangement of follow-up care

CDU DISPOSITION

Home

- Stable vital signs
- Tolerating adequate PO
- Downward trend of glucose
- Symptoms resolved or significantly improved
- Brief DM education completed and information given
- PCP follow up arranged within 7 days
- Prescriptions arranged for new oral medications or basal insulin

Admit

- Symptoms not improved or worsening
- New findings that require hospitalization
- Inability to complete CDU interventions or ensure outpatient follow-up
- EM provider or consultant discretion