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Treatment of Unexplained Hyperglycemia

If glucose >250 unexpectedly, (you didn't omit insulin or find a pump problem) then check for ketones.

First: check ketones, if **POSITIVE**:

- Check your pump for problems, call pump company with pump problems
- Change your site
- Give your correction bolus by syringe subcutaneously
- Drink fluids every hour (fluids should be non-sugar containing)

Recheck glucose after 2 hours and if still >250:

- Give second correction bolus via pump
- Check for ketones
- Continue drinking lots of fluids (recommend encouraging 1 cup of water each hour for a few hours)

Recheck glucose after 2 hours and if still > 250, without a decrease in ketones:

- Contact Academic Endocrinology on the EMERGENCY PHONE at 630-901-1911

If ketones are decreasing and glucose is coming back into control:

- Continue monitoring every two hours
- Continue using correction bolus every two hours until glucose is <250

If ketones are **NEGATIVE** but glucose is >250:

- Check your site
- Give your correction bolus via pump

Recheck your glucose after two hours and if still >250

- Change your site
- Give correction bolus by syringe subcutaneously
- Check for ketones
- Recheck your glucose after 3 hours and if still >250 give a second correction bolus