

Management of Hypoglycemia (< 75mg/dL / 4.2 mmol/L),

Hypoglycemia is not a clinical feature of diabetes;

- it is a complication of treatment with oral hypoglycemic drugs or insulin.
- It usually presents with:
 - Autonomic symptoms: weakness, dizziness, shaking, palpitations, sweating, anxiety, hunger, nausea
 - Neuroglycopenic symptoms: poor concentration, headache, confusion, lethargy, blurry vision, difficulty speaking, impaired consciousness, convulsions, or coma.

If the client is conscious: lucid and able to eat and drink

- Give 15 g of simple sugar - 200 mls of fruit juice, non-diet cola, or fizzy sweet drink OR 25 mL of 50% dextrose by mouth
- Recheck in 10 minutes
 - If still < 75 mg/dL (4.2 mmol/L), repeat step 1 and recheck in 10 minutes, repeating as needed;
 - If $\geq$ 75mg/dL (4.2 mmol/L), give the next meal or snack that is due or a source of slow-release carbohydrate (2 biscuits, bread, or fruit). Recheck in 1 hour.
- Look for a cause: too much insulin (incorrect insulin dose or type) or recent weight loss, missed or delayed meal, alcohol, extra or unplanned exercise, or other medications

If the client is unconscious: unable to drink safely

- IV access and give 75ml of 20% Dextrose (children < 15 years, give 2 ml/kg of 10% Dextrose IV)
- Recheck in 10 minutes
 - If still < 75 mg/dL (4.2 mmol/L) and unconscious or unable to drink, repeat step.
 - If still < 75 mg/dL (4.2 mmol/L) but lucid and able to drink, give 200 ml of sugar drink or 25 ml of 50% by mouth. Recheck in 10 minutes.
 - If $\geq$ 75 mg/dL (4.2 mmol/L), conscious and able to eat, give the next meal or snack due or some slow-release carbohydrate. Recheck in 1 hour.
 - If $\geq$ 75 mg/dL (4.2 mmol/L) and consciousness is still impaired,

- start an IV infusion of 10% Dextrose 1L over 2 hours

Children < 15 years	
Weight	IV 10% Dextrose
4-9 kg	6 ml/kg/hr
10-19 kg	5ml/kg/ hr
20-39 kg	4 ml/kg/ hr
40-59 kg	3.5 ml/kg/ hr
60-80 kg	3 ml/kg/ hr

- recheck in hour. Stop when conscious and able to drink safely.