



The following insulin infusion protocol is intended for use in hyperglycemic adult patients in an ICU setting, but is not specifically tailored for those individuals with diabetic emergencies, such as diabetic ketoacidosis (DKA) or hyperglycemic hyperosmolar states (HHS). When these diagnoses are being considered, or if BG is ≥ 500 mg/dL, an MD should be consulted for specific orders. Also, please notify an MD if the response to the insulin infusion is unusual or unexpected, or if any situation arises that is not adequately addressed by these guidelines.

Initiating an Insulin Infusion

- 1.) **INSULIN INFUSION:** Mix 1 U Regular Human Insulin per 1 cc 0.9 % NaCl. Administer via infusion pump (in increments of 0.5 U/hr).
- 2.) **PRIMING:** Flush 50 cc of infusion through all IV tubing before infusion begins (to saturate the insulin binding sites in the tubing).
- 3.) **TARGET BLOOD GLUCOSE (BG) LEVELS:** 100-139 mg/dL.
- 4.) **BOLUS & INITIAL INSULIN INFUSION RATE:** Divide initial BG level by 100, then round to nearest 0.5 U for bolus AND initial infusion rate.
Examples: 1.) Initial BG = 325 mg/dL: $325 \div 100 = 3.25$, round $\uparrow$ to 3.5: IV bolus 3.5 U + start infusion @ 3.5 U/hr.
 2.) Initial BG = 174 mg/dL: $174 \div 100 = 1.74$, round $\downarrow$ to 1.5: IV bolus 1.5 U + start infusion @ 1.5 U/hr.

Blood Glucose (BG) Monitoring

- 1.) Check BG hourly until stable (3 consecutive values within target range). In hypotensive patients, capillary blood glucose (i.e., fingersticks) may be inaccurate and obtaining the blood sample from an indwelling vascular catheter is acceptable.
- 2.) Then check BG q 2 hours; once stable x 12-24 hours. BG checks can then be spaced to q 4 hours IF:
 - a.) no significant change in clinical condition AND b.) no significant change in nutritional intake.
- 3.) If any of the following occur, consider the temporary resumption of hourly BG monitoring, until BG is again stable (2-3 consecutive BG values within target range):
 - a.) any change in insulin infusion rate (i.e., BG out of target range)
 - b.) significant changes in clinical condition
 - c.) initiation or cessation of pressor or steroid therapy
 - d.) initiation or cessation of renal replacement therapy (hemodialysis, CVVH, etc.)
 - e.) initiation, cessation, or rate change of nutritional support (TPN, PPN, tube feedings, etc.)

Changing the Insulin Infusion Rate

If BG < 50 mg/dL:

D/C INSULIN INFUSION

Give 1 amp (25 g) D50 IV; recheck BG q 15 minutes.
 → When BG is 100 mg/dL, wait 1 hour, then restart insulin infusion at 50% of original rate.

If BG 50-74 mg/dL:

D/C INSULIN INFUSION

If symptomatic (or unable to assess), give 1 amp (25 g) D50 IV; recheck BG q 15 minutes.
 If asymptomatic, give 1/2 Amp (12.5 g) D50 IV or 8 ounces juice; recheck BG q 15-30 minutes.
 → When BG is 100 mg/dL, wait 1 hour, then restart infusion at 75% of original rate.

If BG is 75 mg/dL:

STEP 1: Determine the **CURRENT BG LEVEL** - identifies a **COLUMN** in the table:

BG 75-99 mg/dL	BG 100-139 mg/dL	BG 140-199 mg/dL	BG $\geq$ 200 mg/dL
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STEP 2: Determine the **RATE OF CHANGE** from the prior BG level - identifies a **CELL** in the table - Then move right for **INSTRUCTIONS**:

*(Note: If the last BG was measured 2-4 hrs before the current BG, calculate the **hourly** rate of change. Example: If the BG at 2PM was 150 mg/dL, and the BG at 4PM is now 120 mg/dL, the total change over 2 hours is -30 mg/dL; however, the hourly change is -30 mg/dL $\div$ 2 hours = -15 mg/dL/hr.)*

BG 75-99 mg/dL	BG 100-139 mg/dL	BG 140-199 mg/dL	BG $\geq$ 200 mg/dL	INSTRUCTIONS*
		BG $\uparrow$ by $>$ 50 mg/dL/hr	BG $\uparrow$	$\uparrow$ INFUSION by "2Δ"
	BG $\uparrow$ by $>$ 25 mg/dL/hr	BG $\uparrow$ by 1-50 mg/dL/hr OR BG UNCHANGED	BG UNCHANGED OR BG $\downarrow$ by 1-25 mg/dL/hr	$\uparrow$ INFUSION by "Δ"
BG $\uparrow$	BG $\uparrow$ by 1-25 mg/dL/hr, BG UNCHANGED, OR BG $\downarrow$ by 1-25 mg/dL/hr	BG $\downarrow$ by 1-50 mg/dL/hr	BG $\downarrow$ by 26-75 mg/dL/hr	NO INFUSION CHANGE
BG UNCHANGED OR BG $\downarrow$ by 1-25 mg/dL/hr	BG $\downarrow$ by 26-50 mg/dL/hr	BG $\downarrow$ by 51-75 mg/dL/hr	BG $\downarrow$ by 76-100 mg/dL/hr	$\downarrow$ INFUSION by "Δ"
BG $\downarrow$ by $>$ 25 mg/dL/hr see below	BG $\downarrow$ by $>$ 50 mg/dL/hr	BG $\downarrow$ by $>$ 75 mg/dL/hr	BG $\downarrow$ by $>$ 100 mg/dL/hr	HOLD x 30 min, then $\downarrow$ INFUSION by "2Δ"

*D/C INSULIN INFUSION;
 rBG q 30 min; when BG is 100
 mg/dL, restart infusion @75% of
 most recent rate.

*CHANGES IN INFUSION RATE ("Δ") are determined by the current rate:

Current Rate (U/hr)	Δ = Rate Change (U/hr)	2Δ = 2X Rate Change (U/hr)
< 3.0	0.5	1
3.0 - 6.0	1	2
6.5 - 9.5	1.5	3
10 - 14.5	2	4
15 - 19.5	3	6
20 - 24.5	4	8
$\geq$ 25	$\geq$ 5	10 (consult MD)

Yale Insulin Protocol

**Peter F. Lawrence, Jessica Beth
O'Connell, Matthew R. Smeds**

Yale Insulin Protocol:

Insulin in Clinical Practice Mr. Rohit Manglik, 2024-05-24 Offers a clinical guide to insulin therapy in diabetes care Covers initiation titration and special population considerations *Management of Diabetes Mellitus* Diana Guthrie, Richard Guthrie, 2008-10-22 I strongly recommend this text Whether the reader is a relative novice or a seasoned veteran in diabetes care the information will prove useful and concise and will likely stimulate further reading and study House staff planning to rotate on my endocrine service should be forewarned *Management of Diabetes Mellitus A Guide to Pattern Management* is now required reading JAMA Praise for the previous edition I recommend this book to nurses or physicians confronting patients afflicted with diabetes mellitus as it presents a patterned approach to the understanding and management of this malady Any patient with diabetes mellitus or health care professional using the information presented by these experts would be well prepared to manage this disease process Gloria K Twilley Lieutenant Colonel United States Air Force Nurse Corps The sixth edition of *Management of Diabetes Mellitus* fully reorganizes and expands upon the previous editions While the new edition continues to set forth practical and easy to use guidelines for management the newly expanded chapters contain detailed information on managing patients with different types of diabetes type 1 and type 2 and further differentiates treatment and management strategies for various age groups This edition also offers clear and concise explanations of the disease process newly revised guidelines for the use of complementary and alternative therapies and a guide for developing an educational program Guthrie and Guthrie also stress the importance of self management of diabetes as much of this edition is dedicated to educating the diabetic patient on how to provide self care and control both acute and chronic complications of the disease For the convenience of practitioners and diabetic patients themselves this book contains reproducible forms protocols and guides that can be used for managing diabetes including Nutrition questionnaires Meal patterns comparing exchanges Carb Counting and Calorie Points Sample Calorie Point Distributions Exercise Log Intake Assessment Guide Clinical Practice Recommendations A guide to the pattern approach **Textbook of Critical Care Nutrition** Subhal Bhalchandra Dixit, Kapil Gangadhar Zirpe, Atul Prabhakar Kulkarni, 2023-11-17 Cardiothoracic Critical Care Brigid Flynn, Natalia S. Ivascu, Vivek K. Moitra, Alan Gaffney, 2020-11-06 This text focuses on cardiothoracic critical care and covers guidelines for evidence based practice respiratory and metabolic physiology common hemodynamic perturbations ventricular failure and mechanical circulatory support devices All clinicians who care for cardiothoracic patients who are critically ill can find pearls of practice wisdom complemented by literature citations within this text **Diabetes, An Issue of Critical Care Nursing Clinics** Celia Levesque, 2013-03-28 This issue of *Critical Care Nursing Clinics* Guest Edited by Celia Levesque RN MSN NP C CNS BC CDE BC ADM from MD Anderson will focus on Diabetes Article topics will include Management of Diabetes in the Clinical Setting Hyperglycemia management after solid organ transplantation Insulin therapy in the hospitalized patient Limb salvage for Veterans with diabetes and Management of steroid induced hyperglycemia in the

ICU *Essentials of General Surgery and Surgical Specialties* Peter F. Lawrence, Jessica Beth O'Connell, Matthew R. Smeds, 2025-04-28 Combining general surgery and the specialties in one volume *Essentials of General Surgery and Surgical Specialties* 7th Edition focuses on the information all medical students need to know to pass the NBME surgery shelf or other surgery rotation examinations Lawrence's popular text offers concise high yield content and a smaller format ideal for study on the go Updated to reflect the latest advances in the field and enhanced practice questions this new edition provides the authoritative up to date content today's busy medical students need for exam success *Therapy for Diabetes Mellitus and Related Disorders* Guillermo E. Umpierrez, 2014-06-02 Nearly 100 of the world's leading medical researchers and clinicians share their expertise on the diagnosis treatment and care of people with diabetes mellitus This newly revised sixth edition is a comprehensive guide to type 1 type 2 and gestational diabetes New diabetes treatment strategies include medical nutrition therapy with diabetes diet and exercise programs This guide covers the latest research on diabetes medication and technology with insulin pump therapy insulin secretagogues incretin mimetics and medications for obesity as well as advances in diabetes prevention Family care topics include diabetes in pregnancy diabetic ketoacidosis childhood obesity and type 2 diabetes in children Other topics include glycemic control diabetes complications and comorbidities diabetes mellitus therapy in different patient groups and much more This is an excellent resource for physicians seeking to provide the most current treatment for their patients *Therapy for Diabetes Mellitus and Related Disorders* is the most comprehensive clinical reference work available on the disease *Comprehensive Hospital Medicine* Mark Williams, 2007 This new title is the first clinical reference to address hospital based medicine in a comprehensive practical manner Nationally recognized experts equip readers with actionable guidance on key areas such as evidence based practice clinical care delivery peri operative care and managing hospital and program systems issues making it easier than ever for providers to offer optimal care to every hospitalized patient *Computer Methods Part B*, 2009-11-05 The combination of faster more advanced computers and more quantitatively oriented biomedical researchers has recently yielded new and more precise methods for the analysis of biomedical data These better analyses have enhanced the conclusions that can be drawn from biomedical data and they have changed the way that experiments are designed and performed This volume along with previous and forthcoming *Computer Methods* volumes for the *Methods in Enzymology* series aims to inform biomedical researchers about recent applications of modern data analysis and simulation methods as applied to biomedical research Presents step by step computer methods and discusses the techniques in detail to enable their implementation in solving a wide range of problems Informs biomedical researchers of the modern data analysis methods that have developed alongside computer hardware Presents methods at the nuts and bolts level to identify and resolve a problem and analyze what the results mean

Diabetes Management in Hospitalized Patients Rifka C. Schulman-Rosenbaum, 2024-01-18 As the diabetes epidemic continues to burden the healthcare system and with the literature supporting enhanced patient outcomes with improved

glycemic control the need for expertise in the clinical management of inpatient diabetes is an increasingly important and timely matter While some books have been published on inpatient diabetes this guide serves as a comprehensive but clinically relevant review of the available literature and recommended management for the key areas surrounding hospital diabetes management This book is designed to provide practical guidance on diabetes management for hospitalized patients The number of topics covered is meant to be comprehensive and include discussion on many potential scenarios encountered on the inpatient service but in a concise and user friendly manner This book is intended to be a valuable resource for fellows residents students and existing providers looking to improve their knowledge and skills in evidence based inpatient diabetes management The enclosed chapters were written by many globally renowned physicians researchers and clinicians Diabetes Management in Hospitalized Patients A Comprehensive Clinical Guide is a valuable resource for endocrinologists hospitalists pharmacists PAs and NPs and all staff responsible for clinical care of these patients

The Pharmacist's Expanded Role in Critical Care Medicine Yasir Alzaidi, Mohamed Abdelzaher Gebily, 2025-05-02 There are few textbooks aimed specifically at critical care pharmacists particularly in terms of their potential role in diagnosis Recognizing this important gap the editors of this comprehensive book have gathered together 55 chapters that provide an overview of core aspects of critical care patient management from the pharmacist's perspective The chapters written by an international team of more than 100 experts provide an important update on the physiological and pathological mechanisms of key areas of critical illness and the diagnostic and therapeutic approaches to these conditions for the pharmacist There are chapters focusing on specific diseases or conditions including shock acute liver failure acute kidney injury delirium and acute pulmonary embolism chapters on interpretation of diagnostic tests such as radiology and electrocardiography chapters on therapeutic interventions including mechanical ventilation intravenous fluids renal replacement therapy ECMO nutrition and blood transfusion and chapters on specific groups of ICU patients including obstetric oncology transplant and burn patients Two of the chapters on the approach to clinical reasoning in critical care and sustainable pharmacy practice in the ICU are unique chapters to pharmacy education and training Providing an up to date overview of topics related to critical care and emphasizing the importance of correct diagnosis in providing appropriate and optimal treatment this collection will help prepare ICU pharmacists for their multifaceted responsibilities as members of the ICU team including an expanded role in limiting misdiagnosis This book will serve as a useful resource for all pharmacists involved in the management of critically ill patients whatever their level of experience and training

Essential Numerical Computer Methods Michael L. Johnson, 2010-11-25 The use of computers and computational methods has become ubiquitous in biological and biomedical research During the last 2 decades most basic algorithms have not changed but what has is the huge increase in computer speed and ease of use along with the corresponding orders of magnitude decrease in cost A general perception exists that the only applications of computers and computer methods in biological and biomedical research are either basic statistical

analysis or the searching of DNA sequence data bases While these are important applications they only scratch the surface of the current and potential applications of computers and computer methods in biomedical research The various chapters within this volume include a wide variety of applications that extend far beyond this limited perception As part of the Reliable Lab Solutions series Essential Numerical Computer Methods brings together chapters from volumes 210 240 321 383 384 454 and 467 of Methods in Enzymology These chapters provide a general progression from basic numerical methods to more specific biochemical and biomedical applications The various chapters within this volume include a wide variety of applications that extend far beyond this limited perception As part of the Reliable Lab Solutions series Essential Numerical Computer Methods brings together chapters from volumes 210 240 321 383 384 454 and 467 of Methods in Enzymology These chapters provide a general progression from basic numerical methods to more specific biochemical and biomedical applications

Monitoring in Neurocritical Care E-Book Peter D. Le Roux, Joshua Levine, W. Andrew Kofke, 2013-02-01 Ideal for neurosurgeons neurologists neuroanesthesiologists and intensivists Monitoring in Neurocritical Care helps you use the latest technology to more successfully detect deteriorations in neurological status in the ICU This neurosurgery reference offers in depth coverage of state of the art management strategies and techniques so you can effectively monitor your patients and ensure the best outcomes Understand the scientific basis and rationale of particular monitoring techniques and how they can be used to assess neuro ICU patients Make optimal use of the most advanced technology including transcranial Doppler sonography transcranial color coded sonography measurements of jugular venous oxygen saturation near infrared spectroscopy brain electrical monitoring techniques and intracerebral microdialysis and techniques based on imaging Apply multimodal monitoring for a more accurate view of brain function and utilize the latest computer systems to integrate data at the bedside Access practical information on basic principles such as quality assurance ethics and ICU design

Biomedical Engineering Systems and Technologies Xuesong Ye, Filipe Soares, Elisabetta De Maria, Pedro Gómez Vilda, Federico Cabitza, Ana Fred, Hugo Gamboa, 2021-03-29 This book constitutes extended and revised versions of the selected papers from the 13th International Joint Conference on Biomedical Engineering Systems and Technologies BIOSTEC 2020 held in Valletta Malta in February 2020 The 29 revised and extended full papers presented were carefully reviewed and selected from a total of 363 submissions The papers are organized in topical sections on biomedical electronics and devices bioimaging bioinformatics models methods and algorithms bio inspired systems and signal processing health informatic

Contemporary Topics in Critical Care Medicine Atul P Kulkarni, Ross Callum Freebairn, Subhash P Acharya, 2022-12-20

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Surgical Metabolism Kimberly A. Davis, Stanley H. Rosenbaum, 2020-04-15 The goal of this book is not to follow a traditional systems or organ based approach but rather to encourage our readers to think of the patients as complex biochemical systems The book provides information that supplements the more traditional approaches and provides a detailed overview of the metabolic knowledge needed for surgical practice The text reviews normal physiology the pathophysiology of starvation and surgical stressors It also focuses on appropriate nutritional repletion for various common disease states Specifically chapters address the severe metabolic demands created by systemic inflammation infection and major insults such as trauma and burns All chapters are written by experts in their fields and include the most up to date scientific and clinical information As biochemical aspects of modern medicine are advancing rapidly chapters have been

updated and several new chapters have been added in order to help readers keep pace in this race for state of the art knowledge Surgical Metabolism The Metabolic Care of the Surgical Patient 2nd Edition is designed for clinicians across levels of training and provides clear and concise evidence based guidelines for the metabolic management and nutritional support of the surgical patient

Critical Care Medicine E-Book Joseph E. Parrillo, R. Phillip Dellinger, 2018-11-12 Now completely revised to bring you up to date with the latest advances in the field Critical Care Medicine Principles of Diagnosis and Management in the Adult 5th Edition delivers expert practical guidance on virtually any clinical scenario you may encounter in the ICU Designed for intensivists critical care and pulmonology residents fellows practicing physicians and nurse practitioners this highly regarded text is clinically focused and easy to reference Led by Drs Joseph Parrillo and Phillip Dellinger the 5th Edition introduces numerous new authors who lend a fresh perspective and contribute their expertise to that of hundreds of top authorities in the field Includes new chapters on current applications of bedside ultrasound in the ICU both diagnostic and procedural mechanical assist devices and extra corporeal membrane oxygenation ECMO Contains new administrative chapters that provide important information on performance improvement and quality length of stay operations working with the Joint Commission and more Features new videos and images that provide visual guidance and clarify complex topics Keeps you up to date with expanded chapters on echocardiography in the ICU and valvular heart disease including TAVR Includes separate chapters on mechanical ventilation of obstructive airway disease and acute respiratory distress syndrome ARDS including the many recent changes in approach to positive end expiratory pressure setting in ARDS Covers key topics such as patient ventilator synchrony and non invasive ventilation for treating chronic obstructive pulmonary disease patients with acute respiratory failure Reflects the recent literature and guidance on amount of fluids type of fluid vasopressor selection mean arterial pressure target and decision on steroid use in septic shock Provides questions and answers in every chapter perfect for self assessment and review Enhanced eBook version included with purchase Your enhanced eBook allows you to access all of the text figures and references from the book on a variety of devices

Robert J. Lederman, 2011-11-18 Packed with essential lists figures tables and algorithms the Tarascon Internal Medicine Echo MRI and Nuclear Anatomy ECG ST Elevation STE Patterns Sepsis Therapeutic Hypothermia Pharyngeal Swab Technique NIH Stroke Scale Bronchoscopic Anatomy SIADH Serotonin Syndromes and more Intended for busy internal medicine physicians nurses or any healthcare provider in the ICU Tarascon Internal Medicine Critical Care Pocketbook is meticulously referenced with expert commentary on current academic controversies in the field

Principles and Practice of Hospital Medicine, Second Edition Sylvia C. McKean, John J. Ross, Daniel D. Dressler, Danielle Scheurer, 2016-10-22 The leading textbook of hospital medicine completely updated to reflect today's challenges A Doody's Core Title for 2021 Since its publication in 2012 Principles and Practice of Hospital Medicine Second Edition has become the field's premier resource Comprehensive authoritative and practical this landmark text provides a solid grounding in clinical organizational and

administrative areas central to the practice of hospital medicine The Second Edition has been completely updated to reflect the evolving practice responsibilities of hospitalists Examples include value based medicine expanded surgical content bedside clinical reasoning and a new segment devoted to rehabilitation and skilled nursing care This edition also features a more accessible and streamlined full color design enriched by more than 600 illustrations Each clinical chapter opens with boxed Key Clinical Questions that are addressed in the text and summarized in hundreds of tables Case studies demonstrate how to apply this information specifically to the management of hospitalized patients Representing the expertise of more than two hundred renowned contributors Principles and Practice of Hospital Medicine Second Edition is logically divided into six sections The Specialty of Hospital Medicine and Systems of Care Medical Consultation Rehabilitation and Skilled Nursing Care The Approach to the Patient at the Bedside Diagnostic Testing and Procedures Clinical Conditions in the Inpatient Setting Principles and Practice of Hospital Medicine Second Edition is essential reading for clinicians who strive to optimize inpatient care and sharpen their leadership skills

Surgical Intensive Care Medicine John M. O'Donnell, Flávio E. Nácul, 2009-11-18 We are honored to present the second edition of Surgical Intensive Care Medicine Our first edition was considered to be an important contribution to the critical care literature and received excellent reviews from Critical Care Medicine Chest and Anesthesiology In the second edition the basic organization of the book remains unchanged being composed of 60 carefully selected chapters divided into 11 sections The book begins with general topics in primary intensive care such as airway management and vascular cannulation followed by categories based on medical and surgical subspecialties While the chapters discuss definitions pathophysiology clinical course complications and prognosis the primary emphasis is devoted to patient management The contents of the current edition have been comprehensively upgraded and the chapters retained from the first edition have been thoroughly updated revised or rewritten In this second edition some new topics have been added including Postoperative Care of the Obese Patient Postoperative Care of the Pancreas Transplant Patient Optimization of High Risk Surgical Patients Post operative Alcohol Withdrawal Syndrome Ethics and End of Life Issues Improving the ICU and Continuous Medical Education in Intensive Care Medicine We are extremely fortunate to have high quality contributors many of whom are nationally and internationally recognized researchers speakers and practitioners in Critical Care Medicine An important feature of this latest edition is the geographical diversity of its authors Most are based in the United States but colleagues from Canada England Ireland Germany Belgium Holland France Italy Portugal and Australia have also made notable contributions

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Yale Insulin Protocol Introduction

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