

## Transition from IV to SQ Insulin Protocol (Pilot)

(This protocol applies only to patients on an insulin drip for >24 hours.  
Physician to make a clinical judgment on all others.)

### Step 1: Does the patient need basal SQ insulin?

#### Yes:

All patients with type 1 DM  
All patients with Type 2 Diabetes and recent mean infusion rate  $\geq 1.0$  unit / hour  
All patients with stress hyperglycemia or unrecognized DM, a recent mean infusion rate  $\geq 1.0$  units/hr, AND a Hgb A1c  $\geq 6.0\%$   
All patients on  $\geq 60$  mg of prednisone/day or equivalent AND an infusion rate  $\geq 1.0$  units/hr. (Taper insulin to match steroid taper. This does NOT include patients on stress dose steroids for spinal injuries.)

#### No:

Type 2 diabetics with a recent mean infusion rate of  $< 1.0$  units/hr  
Stress hyperglycemia with a HgbA1c  $< 6.0\%$

No: Order correction insulin (sliding scale). **Stop here.**

#### Yes:



### Step 2: Evaluate the patient's nutritional intake to calculate the Total Daily Dose (TDD) of insulin.

**Full nutrition:** Pt is eating >50% of their meals, on goal tube feeds, or on TPN.

Step A: Average the rate of insulin infusion over the previous 6 hrs  
Step B: Multiply this number by 20

(avg drip rate) \_\_\_\_\_ units/hr X 20 = \_\_\_\_\_ = TDD

*OR*

**Minimal nutrition:** Pt is NPO, taking <50% of their meals, or is on a clear liquid diet.

Step A: Average the rate of insulin infusion over the previous 6 hrs  
Step B: Multiply this number by 40

(avg drip rate) \_\_\_\_\_ units/hr X 40 = \_\_\_\_\_ = TDD

### Step 3: Divide the TDD into the appropriate components of insulin treatment (basal, nutritional and correction), depending on the nutritional situation.

50% TDD = basal insulin ordered as Lantus QD  
50% TDD = nutritional insulin divided TID if tolerating meals (Lispro) or Q6 hours if on continuous tube feeds (Regular).

#### **Watch Out!!!**

- Do **NOT** exceed a TDD of **100 units/day** unless the patient was previously on >100 units of insulin/day.
- Re-evaluate and adjust the TDD every day.
- Call the **"glycemic control" pager** with all questions regarding this insulin transition protocol: **290-1328**.