

# Hypoglycemia - Maryland

## Format

**Applies to:** Blood glucose less than 70 mg/dL or greater than 300 mg/dL

- Patient-reported low or high blood glucose
- Diabetic patients with other medical symptoms (e.g., vomiting)
- Altered mental status
- Alcohol intoxication, suspected
- Seizure
- Stroke symptoms
- Unresponsive patients
- Cardiac arrest

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## BLS

- Check blood glucose level
- If blood glucose is less than 70 mg/dL, administer 10-15 grams of oral glucose between the patient's gum and cheek.
- Administer additional dose of 10-15 grams of oral glucose if not improved after 10 minutes.

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## ALS

- **HYP**Oglycemia: If blood glucose is less than 70 mg/dL, administer 10% dextrose in 50 mL (5 gram) boluses, 1 minute apart, to a maximum of 250 mL OR 25 grams of 50% dextrose IVP, until:
  - the patient has a return to normal mental status, and
  - the patient's blood glucose is at least 90 mg/dL
- If patient has persistently altered mental status and blood glucose less than 90 mg/dL despite treatment, repeat dosing regimen above.
- If unable to initiate an IV and blood glucose is less than 70 mg/dL, administer glucagon 1 mg IM/IN.
  - If the patient has persistently altered mental status and blood glucose less than 90 mg/dL at 15 minutes, transport to the hospital should not be delayed.
- **HYPER**glycemia: If blood glucose is greater than 300 mg/dL, administer 10 mL/kg Lactated Ringer's bolus unless rales, wheezing, pedal edema, or history of renal

failure or CHF is present.

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## MC

- Not Applicable
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