

**CLASS:** A

**PROTOCOL(S) USED IN:** Altered mental status, PICC Line Access, Lidocaine, Glucagon, BLS Transport Parameters, Stroke CVA

**PHARMACOLOGY AND ACTIONS:**

- A. Glucose is used by the body as quick energy.
- B. Its use is regulated by insulin, which stimulates storage of glucose from the bloodstream lowering blood glucose levels.

**INDICATIONS:**

- A. Hypoglycemic states usually associated with insulin shock in diabetes.
- B. The unconscious patient, when history is unobtainable but after a blood glucose test.
- C. Hypothermia, generalized.

**CONTRAINDICATIONS:**

None

**SIDE EFFECTS AND NOTES:**

- A. Determine blood glucose level prior to administration.
- B. Extravasation of dextrose will cause necrosis of tissue.
- C. IV should be secured in a large vein and free return of blood into the syringe or tubing should be checked prior to administration
- D. If extravasation does occur, immediately dilute with up to **5 ml Lidocaine 2% in 5 ml Normal Saline** injected SQ into extravasated area.
- E. If the possibility of alcohol abuse, malnutrition or chemotherapy exists administer **Thiamine 100 mg IV/IO** prior to **Dextrose**
- F. Effect is delayed in elderly patients with poor circulation.
- G. Recheck blood glucose level 5 min after administration.

**ADULT DOSING:**

**Hypoglycemia**

**D10** 100 ml IV/IO over 5 min

**PEDIATRIC DOSING:**

**Hypoglycemia**

Infants < 10 kg (birth to 1 year) with *CBG* < 40 mg/dl:  
0.5 g/kg IV/IO of **D10**. Repeat prn.

Children 10 kg – 35 kg with *CBG* < 60 mg/dl:  
0.5 g/kg IV/IO of **D10**. Repeat prn.