



Reducing the Incidence of Hypoglycemia in Inpatients Receiving Insulin or Oral Hypoglycemics

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Objectives & About Us

Mistate Medical Center is a 144 - Bed Community Hospital located in Central Connecticut

Our AIM: Reduce the incidence of Hypoglycemia by 20% in our inpatient population by December 31, 2013

Objective: To provide participants with tools and strategies to successfully initiate a Hypoglycemia Reduction Program



Tests & What we Learned

- ❖ Reviewed current policies and procedures and compared with best practice recommendations
 - Our POC machines and labels noted hypoglycemia as 60mg/dl
 - Our policy states 70mg/dl
 - Update POC Labels and monitors and educate RNs and CCAUs
- ❖ Incorporated Pyxis Trigger tool for timely notification of hypoglycemic events (D50W)
- ❖ Implemented a Hypoglycemia Audit Tool to retrospectively & prospectively review occurrences of Hypoglycemia
- ❖ Established upper limits for Insulin Infusions on the Smart Pump (Soft limits)



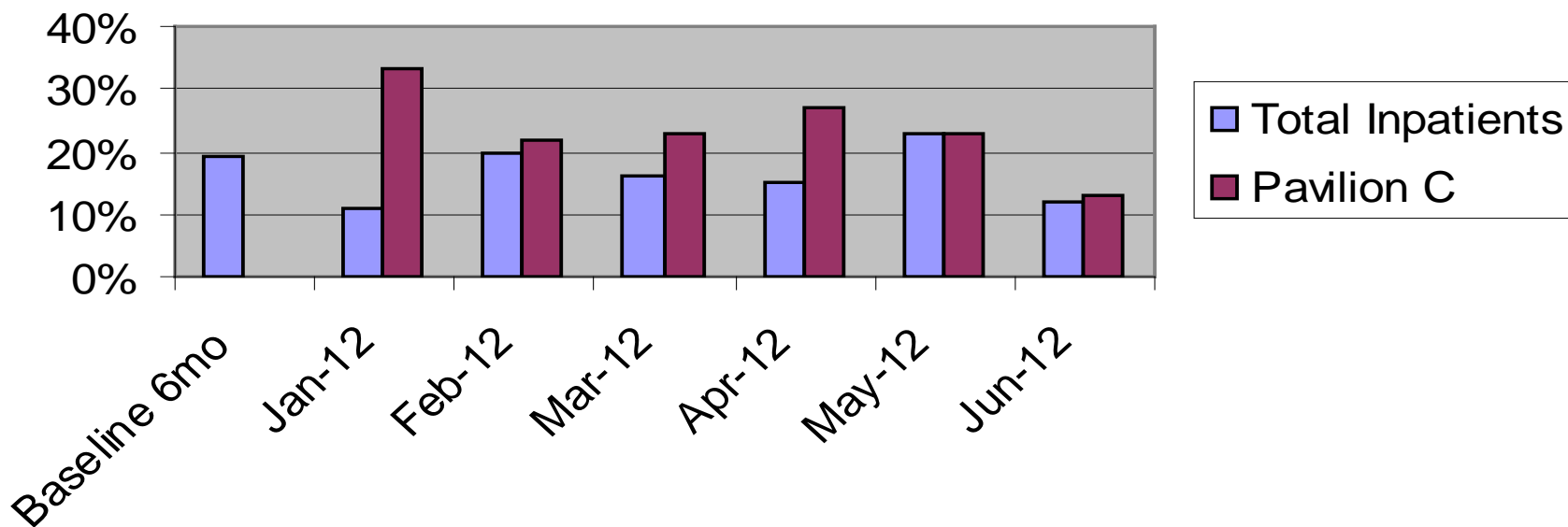
Barriers & How we Resolved

- **Getting Started!**
 - Not being the content expert
 - Brainstorming session with Diabetes Educator
- **Collection of Data**
 - Manual consolidation of Lab Data (Glucose < 50mg/dl) and Pharmacy Data (Insulin/Hypoglycemic Agents)



Measures – What & How

Occurrence of Hypoglycemia ($\leq 50\text{mg/dl}$) in inpatients receiving insulin/hypoglycemics





Advice for others

- ❖ Include content experts and willing participants
 - Diabetes Center Educator
 - Data showed we had the most opportunity in ICU/PCU (Use of D50W)
 - Focusing on this area for chart audits and small tests of change
- ❖ Incorporate into existing Performance Improvement Processes (H3W Meetings)
- ❖ Routinely share with Senior Clinical Leaders and Patient Safety Committee



Wrap Up & Next Steps

Summary



Wrap Up & Next Steps

Questions?



Wrap Up & Next Steps

- Next Tests of Change
 - ✓ Review results of hypoglycemia audit
 - ✓ Policy change – new insulin orders when changing from parenteral to enteral nutrition
 - ✓ Evaluate/Review coordination of meals and insulin times
 - ✓ Reduce/Eliminate Sliding Scale Variation
 - ✓ Determine Appropriate BS ranges



Contact Information

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