SubQ Insulin Management in TogetherCare

Cliff Notes:

Our **current** rapid acting insulin sliding scales are built to include both prandial coverage <u>and</u> an appropriate correction dose. By combining both, the nurse references 1 scale, and can administers the appropriate dose. **In TogetherCare**, the <u>prandial</u> insulin is ordered as a fixed dose TID with meals, and a SEPARATE order is placed for the <u>correction dose</u> based on BG. The nurse must now reference both orders and add the prandial dose to the correction dose (dictated by the sliding scale) to get the total dose. The total dose is then administered prior to the patient eating their meal.

What do we do NOW?

- Calculate total daily dose (TDD) of insulin (based on home regimen, weight, etc.)
- Place orders for 50% TDD as basal insulin (Lantus)
- Place orders 50% TDD divided into 3 meals as rapid acting insulin
 - Example: Total daily dose = 20 units
 - Currently, 2 inpatient orders placed for:
 - 1. Lantus 10u nightly
 - 2. Sliding Scale #3 (10 units/3 meals = 3 units TID)
- Current SJH sliding scales account for prandial coverage and correction doses

How does this CHANGE in TogetherCare?

- Calculate total daily dose of insulin (based on home regimen, weight, etc.)
- Place orders for 50% TDD as basal insulin (Lantus)
- Place orders 50% TDD divided into 3 meals as rapid acting insulin
- Place an additional order for the low dose correctional scale (explained more below...)
 - Example: Total daily dose = 20 units
 - In TogetherCare, 3 inpatient orders placed for:
 - 1. Lantus 10u nightly
 - 2. Humalog 3 units TID
 - 3. Low dose correction scale
- If a patient is NPO the scheduled prandial coverage will be held!!

Quick/Easy way to think of this:

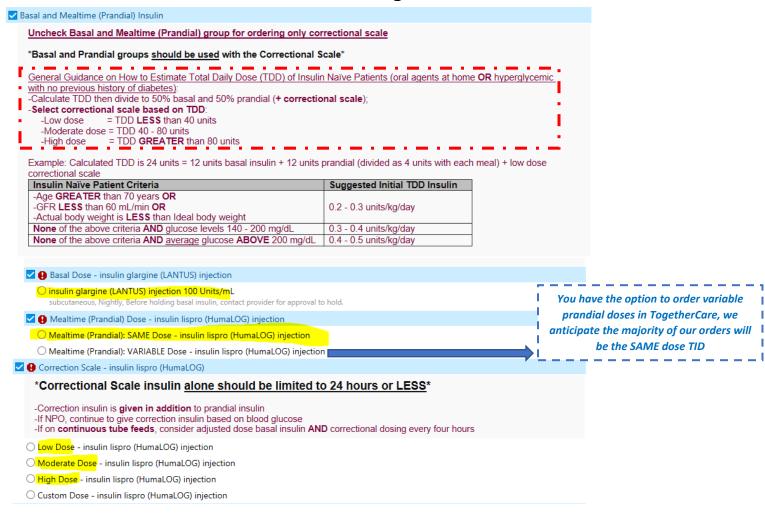
The fixed prandial TID Humalog dose is the SAME as the numerical scale you'd currently order in our EPIC!

Ex: If you want a Humalog Scale #5 → order Humalog 5u TID + the appropriate correctional scale

How to do you pick your correction scale?? It's easy... there are only 3 options!

- You select the correctional scale (AKA: sliding scale) based on the patients TDD
 - o TDD <40 units: order the low dose scale
 - o TDD 40-80 units: order the moderate dose scale
 - o TDD >80 units: order the high dose scale

Screenshots from the Insulin Order set in TogetherCare:



Things to keep in mind:

- Always ensure orders are placed for **BOTH** the prandial and the correction coverage.
 - Patients should not be on just one, or the other!!
- If the patient is **NPO**, the prandial coverage is **HELD**. The correction scale is still administered, if the BG warrants coverage.
 - This mirrors our current sliding scales with the eats 0% column
- When you titrate the insulin for hyperglycemia, the goal is to maintain a 50/50 split between long acting and rapid acting insulin.
 - In TogetherCare, you would increase the PRANDIAL dose accordingly, and only increase the correction scale if your TDD reaches a threshold (40u or 80u daily).
- If your patient is on <u>ENTERAL FEEDS or TPN</u> → you need to convert the insulin orders via the <u>ENTERAL</u> FEED order set to regular insulin scales!!