



Summary of Changes Report – March 2008

Subcutaneous Insulin Management Order Set

ICSI has developed a new format for all scientific documents. Key additions and changes are:

- Citations are listed in the guideline utilizing the format of *Author, YYYY [report class]*. A full explanation of ICSI Evidence Grading System can be found in the Foreword of the order set.
- Citations now correspond to the recommendations at the sentence and paragraph level where applicable.

Updated the references with the 2007 American Diabetes Association recommendations.

Patient Information, Admit/Attending, Diagnosis, Condition

None

Vitals, Activity, Nursing

Nursing – Blood Glucose) Added an order for postprandial glucose to be kept at less than 180 mg/dL.

- * 3) Added the option for organizations to consider a less aggressive blood glucose goal of 90-150 mg/dL with the initial implementation of an order set based on a review of studies on the topic (*Inzucchi, 2006 [D]*).

Sedative/Symptom Medication, Medication/Home Medication

- * Dosing Schedule) Added orders for Detemir insulin.
- * 3) Added the information that Glargine or Detemir insulin are the preferred basal insulin based on comparison studies with NPH (*Yki-Jarvinen, 2000 [A]*; *Wang, 2003 [M]*; *Vague, 2003 [R]*).
- * 3) Added information on a small, randomized trial comparing basal/prandial insulin regimens to traditional sliding scale insulin regimens and the basal/prandial regime resulted in improved glycemic control during hospitalization (*Umpierrez, 2007 [A]*).
- * 3) Add the precaution for patients on corticosteroids when giving an insulin correction dose at bedtime because these patients are at greater risk for nocturnal hypoglycemia (*Clement, 2004 [R]*).

Lab/Diagnostics

None

Other

None

Priority Aims & Suggested Measures, Measurement Specifications

None

Support for Implementation

None

**An asterisk indicates any changes in clinical practice recommendations*