Standing Orders for Insulin Therapy Adjustments

SIGNED ORDER VALID FOR 6 MONTHS

Patient Name:	D	OB	Date	
octor Name: Doctor Signature:				_
Communication Requirements:				
The patient will be instructed to report by phone call/fax/email every 3 to 14 days based on patient's individual need.				
The patient is instructed to monitor blood glucose at the following times:				
☐ fasting				
☐ before meals				
☐ 2 hours after meals				
□ bedtime				
*Frequency of testing may decrease to fasting, pre-prandial and at bedtime when basal rates are established and tested.				
* Patient is instructed to check urine/blood for ketones when two consecutive readings are over 250 mg/dL (type 1).				
Target Blood Glucose:				
* The following initial glucose targets will be established, unless otherwise specified by healthcare provider. Individualized targets may also				
be established due to patient current tolerance level of glucose.				
	before meal	bedtime/overnight		
Adolescents and young adults (13 -19 years of age)	90-130mg/dL	100-180mg/dl		
Healthcare provider blood glucose targets if different from above				
	FBG/before meal	2 hour post meal	bedtime/overnight	
Adults (19+ years of age)	80-130mg/dL	100 to 140mg/dL	100 to 140mg/dL	
Healthcare provider blood glucose targets if different from above				

Insulin Dose Adjustments:

Long-Acting /Intermediate - Insulin: (Lantus/Toujeo/Levemir/Tresiba /Basaglar/NPH)

- If patient taking long-acting at bedtime adjustment will be based on FBG
 - If FBG remain higher than 130mg/dL for 3-4 days in a row, increase amount of by 2 units. Continue to increase every 3-4 days until morning FBG are less than 130mg/dL consistently.

Meal Time insulin and/or Correction Bolus Adjustment:

Rapid/Short Acting Insulin: (Humalog/Admelog/Novolog/Apidra/Regular/Fiasp/Afreeza)

- Insulin to carbohydrate ration (I:C) when a pattern BG data above or below target is received, insulin will be adjusted in
 - o adults up or down in 2 units per meal bolus dose or I:C changed up or down in no more than 5 grams increments
 - o adolescents and young adults changes to I:C will not be adjusted more than 10% in either direction
- Insulin sensitivity factor (ISF)
 - for adults, adjustments to ISF, correction factor, are made in increments of up to 25mg/dL
 - o adolescents and young adults, ISF will be adjusted no more than 10% in either direction

The initial education will include the following areas: Insulin action times, site selection and rotation, BG targets, Meal-time Bolus/BG Correction Bolus/Long Acting Insulin, sick day guidelines. Patients will be instructed regarding signs and symptoms of hypo and hyperglycemia. If hypoglycemic, patient will check blood glucose level, consume 15mg of carbohydrate, wait 15 minutes then recheck blood glucose level again and retreat if necessary. The patient may be instructed to maintain a food log. When patient reports BG on average meeting the above stated target BG greater than 90% adjustment period will end.