



CLINICAL DIRECTIVE 07/2011

FROM: Medical Director

TO: Paramedics, Advanced Paramedics, Emergency Medical Technicians

SUBJECT: Glucometry and management of potential hypoglycaemic emergencies

Blood glucose assessment by handheld glucometers has some limitations that may affect accuracy.

Patients with:

- a) good clinical evidence of hypoglycaemia (eg history of insulin dependent diabetes mellitus, diminished level of consciousness and good clinical grounds to suspect hypoglycaemia) and;
- b) glucometer reading between 4 -5 mmol/L or glucometer failure

should be treated for hypoglycaemia as per CPG even if the glucometer reading does not indicate this.

Administration of glucose gel, glucagon or 10% dextrose IV to a patient that is normoglycaemic has little or no negative connotations-err on the side of treatment.

RATIONALE:

- -Handheld glucometers can vary by +/- 1mmol/L (eg 4mmol/L can represent anything from 3-5 mmol/L);
- -Test strips must be stored between 9 and 30 degrees Celsius; if they have been stored outside this temperature range they take minimum of 20 minutes to adjust to the new temperature;
- -Capillary blood from patients with hypotension, dehydration and hyperosmolar hypoglycaemia may not be accurately interpreted by handheld glucometers.

EFFECTIVE FROM: August 12th 2011

EFFECTIVE TO: Indefinite

QUESTIONS OR COMMENTS ON THIS DIRECTIVE:

Education and Competency Assurance Officer

Clinical Directives are formulated by the National Ambulance Service Medical Directorate, the National Ambulance Service Education and Competency Assurance Team, the Dublin Fire Brigade Medical Director, the Dublin Fire Brigade EMS Support Team and the Irish Coast Guard Chief Crewman (Standards). Clinical Directives apply to all relevant staff in the HSE National Ambulance Service, Dublin Fire Brigade and Irish Coast Guard helicopter winch-crew.

Seirbhís Náisiúnta Otharchairr Teach Dara, Ascaill an Crann Teile, Páirc na Mílaoise, Nás na Rí, Co. Chill Dara