

- Directions:**
1. Mark through the item you do not wish to order
 2. Indicate choice when options are available by placing a check (✓) in the parenthesis

1. Finger stick blood glucose monitoring <input type="checkbox"/> Before meals and bedtime <input type="checkbox"/> 3 am				
2. ** BASAL INSULIN: <input type="checkbox"/> Lantus <input type="checkbox"/> NPH _____ units breakfast _____ units supper _____ units bedtime				
3. *** PRANDIAL INSULIN <input type="checkbox"/> Novolog <input type="checkbox"/> Humalog <input type="checkbox"/> Regular				
_____ units breakfast _____ units lunch _____ units dinner				
4. **** CORRECTION FACTOR or SLIDING SCALE INSULIN for pre-meal or bedtime hyperglycemia to be administered in addition to scheduled Insulin to correct hyperglycemia in patients with Type 1 or Type 2 diabetes.				
Check the Type of Insulin below and choose a Dosing Algorithm				
Type of Insulin:	<input type="checkbox"/> Low Dose	<input type="checkbox"/> Medium Dose	<input type="checkbox"/> High Dose	<input type="checkbox"/> Custom Dose
<input type="checkbox"/> Novalog	For patients requiring less than 40 Units per day	For patients requiring 40-80 Units per day	For patients requiring more than 80 Units per day	
<input type="checkbox"/> Humalog				
<input type="checkbox"/> Regular				
Glucose 150-199	1 unit	1 unit	2 units	Units
Glucose 200-249	2 units	3 units	4 units	Units
Glucose 250-299	3 units	5 units	7 units	Units
Glucose 300-349	4 units	7 units	10 units	Units
Glucose over 350	Call physician	Call physician	Call physician	Call physician

Verbal Order Verification

Physician's Signature: _____ **Date/Time:** _____

- * New onset diabetics – If a patient is newly diagnosed, the usual daily total insulin requirement for Type 1 diabetes is 0.5-0.7 units/kg/day. For Type 2 diabetes, the usual total insulin requirement is 0.5-1.0 unit/kg/day. The dose requirement is less (usually 1/3 to 1/2) in patients with renal insufficiency. For patients on **LANTUS**, fifty percent can be given as **BASAL INSULIN** and the remainder as **PRANDIAL INSULIN**. If the patient is on **NPH**, typically about 2/3 of the **BASAL INSULIN** is **NPH** and 1/3 is **PRANDIAL INSULIN**.
- ** Order **BASAL INSULIN** – Type 1 diabetes – This patient must have basal insulin at all times to prevent ketosis, even if the patient is NPO. If stable, continue the same dose of Lantus as at home. If on **NPH**, this may have to be adjusted downward since it does have some prandial effect, i.e., if the patient is not eating. Type 2 diabetes – if tightly controlled at home, decrease basal insulin by approximately 20%. Lantus is usually given once daily before supper, and **NPH** is usually given twice daily before breakfast and bedtime. Some type 2 diabetics may not require basal insulin (patients on oral agents or diet controlled).
- *** Order scheduled **PRANDIAL INSULIN** – Type 1 diabetes: patients on Lantus require a prandial insulin prior to each meal; patients on **NPH** require a prandial insulin prior to breakfast and supper. Type 2 diabetes: requirement varies for prandial insulin, but the same rules hold as above in Type 1 diabetes. If the patient is eating much less than usual, the prandial insulin will need to be adjusted. If the patient is NPO, then the patient will not need scheduled prandial insulin. If the patient is under significant metabolic stress (infection, glucocorticoids), they may require a larger dose of prandial insulin.
- **** Adjust **BASAL INSULIN** dose as necessary by determining the number of units of **CORRECTION FACTOR INSULIN** given the previous day and adding 2/3 of this dose to the **BASAL INSULIN** dose for the following day.

Patient Identification