

MORNING CMO REPORT

10.19.2016

FROM THE DESK OF:
Anthony P. Weiss, MD, Chief Medical Officer,
Associate Dean for Clinical Affairs,
Upstate University Hospital

UPSTATE
UNIVERSITY HOSPITAL

Insulin Protocol to Start at Community Campus

[Applies to All Physicians](#)

Insulin Protocol
Informational

Diabetes is a commonly encountered diagnosis in inpatient populations, affecting about 25 to 35% of hospitalized patients at any time, and often poses many therapeutic challenges. Though diabetes may not be the main reason prompting hospitalization, inadequate attention to or improper management of diabetes can result in hyperglycemia and /or hypoglycemia, and both can adversely affect morbidity, mortality, and patients' length of stay.

To improve patient safety and streamline inpatient diabetes management, EPIC-based subcutaneous insulin order-sets were successfully implemented at Upstate's downtown campus. Experience over the past year with shows a reduced incidence of hypoglycemia.

In order to ensure the uniform delivery of care at both Upstate campuses, these order-sets will be available at the Community campus as well for use with a target start date of December, 1st 2016.

These order-sets presently apply to patients who are eating meals and need insulin therapy with a plan to expand the scope of the order-sets to include other clinical scenarios, such as patients who are NPO or on enteral feeding/TPN, transition from IV to SC insulin, etc.

The order-sets are based on basal-bolus insulin dosing.

The salient features of the order sets are as follows:

1. One basal (Glargine) and one bolus (Lispro) insulin
2. Patient will get finger-stick glucose checks before meals.
3. Provider caring for patient will have option to select either pre-determined insulin dosing scales (low dose, medium dose or high dose) or customize the scale if needed. Each scale will have 3 columns: NPO, ≤50%, and >50% to account for the meal consumption.
4. Nurse will assess the meal consumption soon after the patient finishes his/her meal. Based on the assessment, the nurse will categorize it as NPO, ≤50%, or >50% meal consumed and will administer insulin per scale within 30 min of the meal consumption.

This order-set addresses the variable degrees of meal consumption often encountered in hospitalized patients resulting hyper or hypoglycemia.

When the patient is ready for discharge, EPIC can also provide valuable help in providing appropriate discharge instructions and diabetes related supply prescriptions to patients.

ALERT-Highest priority emergency communication; warrants immediate action or attention by the recipient.

HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

ADVISORY-Provides very important information for a specific incident or situation that does not require immediate action.

UPDATES TO ALERTS AND ADVISORIES-Provides updated information regarding an incident or situation; unlikely to require immediate action.

INFORMATIONAL MESSAGE-Provides timely information, important for review or serves as a reminder for an action that should be taken.

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Please see the attached Power point presentation detailing the steps how to order the order set in EPIC.

Many thanks to Dr. Prashant Nadkarni for providing this educational blurb and for his leadership of a multidisciplinary team in this effort to provide better patient care and improve patient safety.

Important Message from Dr. Nadkarni Regarding Insulin Stacking

[Applies to All Physicians](#)

Insulin Stacking
Informational

Recent analysis of hypoglycemic incidents in hospitalized patients revealed insulin stacking as important contributory factor in causing hypoglycemia. Insulin stacking results from additive action of active insulin from prior insulin dose (also called as insulin on board) to the new insulin dose. This can happen with both rapid acting insulins and long acting insulins. Hence it is important to take into consideration the dose and type of insulin patient has received prior to ordering insulin to patient. As a rule of thumb, **rapid active insulin (such as Lispro) dose should not be repeated within 3 hours of the last dose of similar insulin** unless indicated after careful consideration of insulin on board.

Paging System Failures

[Applies to All Physicians](#)

Paging
Informational

We have become aware of some members of the medical staff not receiving messages via the paging system. While this is unfortunately a situation where "you don't know what you don't know", if you do become aware of a potential dropped page, please let us know. We are treating this as the important safety concern that it is and would like all such events routed through our Safety Event reporting system. Information on how to submit such an event is attached. For assistance, please call Julie Briggs, Patient Safety Officer, at [315-464-6170](tel:315-464-6170).

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Outstanding Physician Comments

[Applies to All Physicians](#)

Each week we receive written comments from our patients regarding the care we provide within the Hospital. Below are this week's comments from grateful patients receiving care on the units and clinics at Upstate:

Comments
Informational

7A – Dr. Pletka was great! I liked his bedside manner and he explained everything to me
Dr. Harley and anesthesiologist trusted them 100% at all times

9G – Dr. Krishnamurthy did a great job!

Breast Care Center– Dr. Albert made special arrangements for me to come in for my procedure at my convenience.

Dr. Albert was excellent and professional in every manner regarding my surgery.

Dr. Albert was very comforting during visit.

Adult Medicine– It is hard to find the right words to describe Dr. Cleary – “Doctor Extraordinaire,” “one in a million” come to mind. I am 81 and in good health because of her!

University Center for Vision Care – Dr. Alpert was very caring about my eye sight, test and medicine I was taking.

UHCC - Neurology – Dr. Bradshaw and all the staff were very patient with me.

ENT – Dr. Khakoo is very professional and very caring. I am very grateful to him. He appeared at all of my follow up visits even when I didn't expect to see him.

University Geriatricians – Dr. Berg – incredibly compassionate and caring.

Upstate Urology – Dr. Makhuli has always been very careful.

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HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

ADVISORY-Provides very important information for a specific incident or situation that does not require immediate action.

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INFORMATIONAL MESSAGE-Provides timely information, important for review or serves as a reminder for an action that should be taken.

Entering an Occurrence

Access the Occurrence Reporting System by logging onto Upstate's iPage

iPage

Inside Upstate

UPSTATE STARS
Upstate Stars Blog

PROUD TO KNOW
Proud to Know

FINDING YOUR WAY AT UPSTATE
Step-by-Step Directions

Upstate Intranet Quick Links

Upstate Directory

BlackBoard

HELP DESK

SELF SERVE

POLICIES & FORMS

MY UPSTATE

Library

EPIC

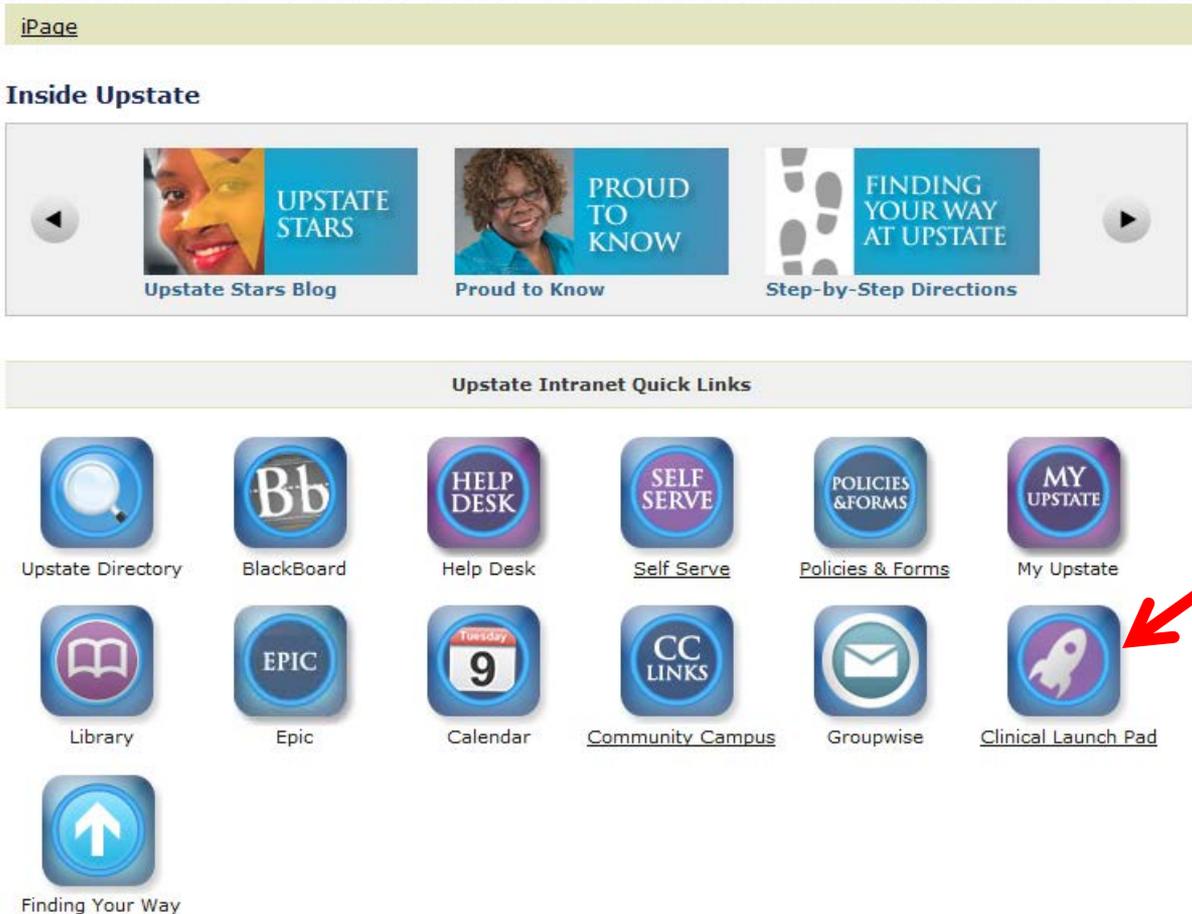
Calendar

CC LINKS

Groupwise

Clinical Launch Pad

Finding Your Way



Occurrence Reporting

UHC Safety Intelligence

Clinical Launch Pad



EPIC Training



PACS



Chartmaxx



Policies & Forms



AM I ON



Lexi-comp



Micromedex



Approved Internet
Sites



Occurrence
Reporting



IMT Project
Requests



Citrix



I-Stop



RHIO

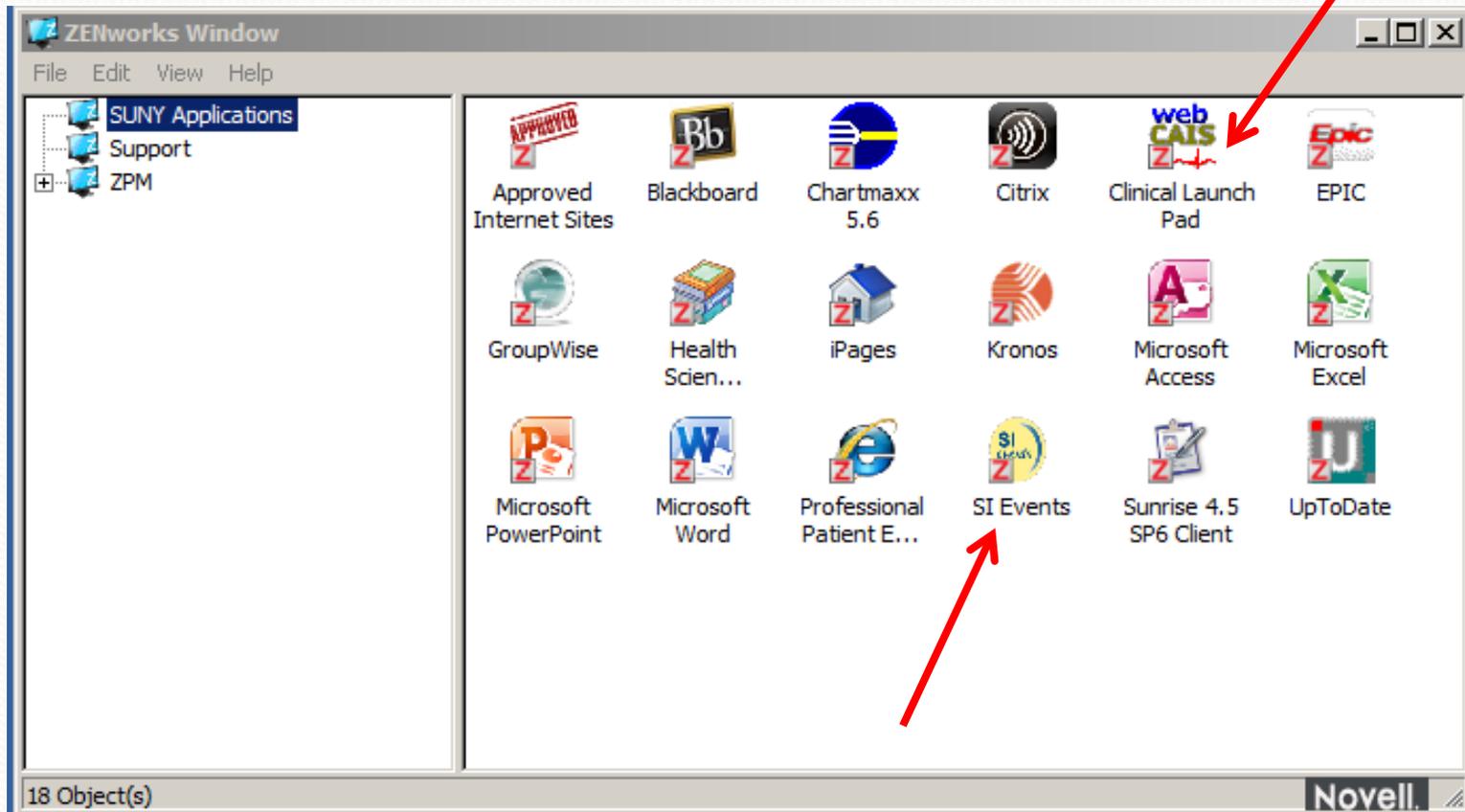


UpToDate



MyAccounts

You can also access Event Reporting via your desktop (Downtown Only)



Access Event Reporting via iPage (Community Campus)

Upstate Intranet Quick Links

 Upstate Directory	 BlackBoard	 Help Desk	 <u>Self Serve</u>	 <u>Policies & Forms</u>	 My Upstate
 Library	 Epic	 Calendar	 <u>Community Campus</u>	 Groupwise	 <u>Clinical Launch Pad</u>
 Finding Your Way					

A red arrow points to the Community Campus icon.

Access Event Reporting via iPage (Community Campus)

Community Campus Intranet

Community Campus Intranet

Safety Intelligence  ←

Emergency Codes and Numbers

My Account (User Password Reset) 

Report Distribution System

Patient Education

ER NEDOCs Score

QUICK LINKS

Cafeteria Menu



Upstate Directory



BlackBoard



Help Desk



Self Serve



Policies & Forms



Clinical Apps



On Call



Epic



Email



Kronos



Service Requests



Knowledge Bases

Risk Management

Risk Management Home

Risk Management Program

UHC Safety Intelligence Event Reporting

Basic Risk Management Glossary

Event Reporting—Safety Intelligence (SI)

Patient Occurrences/Event

Report an Occurrence/Incident ←

Employee/Volunteers Occurrences Only

Interactive NYS Employee Injury Report

Tools



The Report

- You will need information about the patient including name, medical record number
- Location of the event
- Date of the event; approximate time
- Use the scroll down functions on the questions to assist with answering
- Do the best you can, answers can be adjusted later by Risk Management staff
- They can be entered anonymously

Welcome to the UHC Safety Intelligence powered by Datix Front Line Reporter Form.

- A ***** indicates a mandatory field.
- Click the  icon for help with a particular field.
- Click the  button to view and select from the list of available options for that field.
- Click the  button to remove values from a field.

If you have any questions or require assistance with completing this form please contact your on-site administrator.

Start

***** Who was affected by the event?

Event Basics

***** Event Type

***** Event Category

***** Event Subcategory

***** Event discovery date

***** Event discovery time

Use the military time format.

***** Event occurrence date (MM/dd/yyyy) 

Event occurrence time (hh:mm)

Use the military time format.

Was the event related to a handover/handoff?

Was health information technology (HIT) implicated in this event?

Event Location

Use this section to detail where the event took place

* Campus

* Site Name

* Location / Service Name

Other involved site

Other involved location/service

Clinical Service

Event Detail

* Describe the event in your own words

When completing this field, please keep the following in mind:

- + DO NOT enter the names of individuals in this field. Instead, use terms like "Patient", "Receptionist", "Nurse", etc.
- + Avoid entering your own personal opinions - stick to the facts.
- + Make sure the information is relevant, being as brief as possible.

ABC

Harm Score

* Extent of harm

* Harm score 

Was any intervention attempted to prevent, reverse, or halt the progression of harm?

Nature of injury

Inpatient Diabetes Management

EPIC based Subcutaneous insulin order-sets

Nuts and Bolts

Prashant Nadkarni, MD, FACE.

Staff Endocrinologist.

Joslin Clinic-SUNY Upstate Medical University

Order Sets

Summary

Chart Review

Results Review

Synopsis

Intake/Output

Problem List

History

Notes

Manage Orders

Procedure

Charge Capture

Admission

Transfer

Discharge

Surgical

Consult

FYI

Report Viewer

Order Sets

More Activities

Order Sets

diabetes + Add Advanced

Suggestions

Sepsis Management Adult IP

Right click on an Order Set to add to favorites.

Restore Close F9

Orders click to open

3. Search "diabetes" or "Insulin"

Summary Orders

Manage Orders Go to Order Sets

Edit Multiple Providers Phase of Care

Place new order + New

2

Remove All Save Work

Order Sets

? Actions

Order Sets

Search

Adult Subcutaneous Insulin Management (Meal Consumption Based) Endocrinology IP



▼ Suggestions

Sepsis Management Adult IP



Right click on an Order Set to add to favorites.

F9

F7 F8

Orders

[click to open](#)

Summary

[Manage Orders](#)

View of opened order-set

Orders

Clear All Orders

Order Sets

Multiple Versions of User Order Sets

Do Not Show This Again

You can now save multiple versions of user order sets. Click the Manage My Version link below to begin. [Learn More](#)

Adult Subcutaneous Insulin Management (Meal Consumption Based) Endocrinology IP [Manage My Version](#)

Add Order

Guidelines for Transition of IV Insulin to Subcutaneous Insulin:

1. IV insulin can be transitioned to subcutaneous insulin if the patient is clinically stable according to the provider

NOTE: Please ensure to select basal insulin if indicated. Patients with Type I Diabetes Mellitus can develop DKA without basal insulin.

Nursing

Notify Physician

- Notify Physician Call physician for blood sugars less than 70 mg/dl and more than 401 mg/dl
Routine, CONTINUOUS starting Today at 1141 until Tue 11/8 for 30 days
Whom To Notify: Physician
Call physician for blood sugars less than 70 mg/dl and more than 401 mg/dl

Interventions

1 of 1 selected

- Discontinue All Other Anti-Hyperglycemic Agents
Routine, ONCE First occurrence Today at 1141

Nutrition

Diet/Nutrition

1 of 4 selected

- Diet Age: Adult; Diet: Modified; Modifier: Consistent Carbohydrate; Consistent Carbohydrate: Adult-Moderate
DIET EFFECTIVE NOW starting Today at 1141 until Tue 11/8 for 30 days
Age: Adult
Diet: Modified
Modifier: Consistent Carbohydrate
Consistent Carbohydrate: Adult-Moderate

Diagnostic

Lab - Chemistry Basic

1 of 1 selected

- Hemoglobin A1c
ONCE First occurrence Today at 1141
If not available in the last 30 days

Lab - Point of Care

1 of 3 selected

- POCT Glucose, Docked AC & HS (UH)
Routine, 4 TIMES DAILY BEFORE MEALS & AT BEDTIME First occurrence Today at 1700 Last occurrence on Tue 11/8 at 1100 for 30 days

Consults

Consults

0 of 3 selected

Manage Orders Go to Order Set

Edit Multiple Providers Phase

Place new order

Orders from Order Sets

Adult Subcutaneous Insulin Management (Meal Consumption Based) Endocrinology IP

POCT Glucose, Docked AC & HS (UH)
Routine, 4 TIMES DAILY BEFORE BEDTIME First occurrence Today occurrence on Tue 11/8 at 1100

Hemoglobin A1c

ONCE First occurrence Today at If not available in the last 30 days

Diet Age: Adult; Diet: Modified; Modifier: Consistent Carbohydrate; Consistent Carbohydrate: Adult-Moderate
DIET EFFECTIVE NOW starting Today until Tue 11/8 for 30 days
Age: Adult
Diet: Modified
Modifier: Consistent Carbohydrate
Consistent Carbohydrate: Adult-Moderate

Discontinue All Other Anti-Hyperglycemic Agents

Routine, ONCE First occurrence Today

Notify Physician Call physician for blood sugars less than 70 mg/dl and more than 401 mg/dl
Routine, CONTINUOUS starting Today until Tue 11/8 for 30 days
Whom To Notify: Physician
Call physician for blood sugars less than 70 mg/dl and more than 401 mg/dl

Remove All Save Work

Suggested insulin dosing information for insulin naïve patients

▼ Consults

▶ Consults

0 of 3 selected

▼ Medications

For Insulin Naïve Patients, consider using:

1. **Low Dose Insulin**

- a. Insulin sensitive patients such as frail, elderly, lean patients with body weight less than 50kg, patients requiring total daily insulin dose < 30 units, patients with history of frequently hypoglycemia or hypoglycemia unawareness, patients with chronic renal insufficiency or coronary artery disease

2. **Medium Dose Insulin**

- a. For Patients who do not fulfill criteria for either insulin sensitive or insulin resistant profile such as patients less than 65 y.o. with weight greater than 50kg and less than 100kg, patients requiring total daily dose of insulin between 30 and 100 units, patients with normal renal function and without significant coronary artery disease or seizure disorder and not receiving glucocorticoids.

3. **High Dose Insulin**

- a. For Insulin resistant patients such as obese patients with BMI > 40, weight > 100kg, patients requiring total daily dose of insulin > 100 units, receiving high dose glucocorticoids.

4. For patients already being treated with Insulin, **Customize Insulin** orders based on existing Insulin regimen with modifications as needed.

▶ Basal Insulin

Basal Insulin

0 of 4 selected

▶ Nutritional Insulin - LOW DOSE INSULIN Patient

0 of 1 selected

▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient

0 of 1 selected

▶ Nutritional Insulin - HIGH DOSE INSULIN Patient

0 of 1 selected

▶ Customized Insulin

0 of 4 selected

Bolus Insulin

▼ Additional SmartSet Orders

Add Order

Click the Add Order button to add an order in this section

Close F9

Previous F7

Next F8



Medications

For Insulin Naïve Patients, consider using:

1. Low Dose Insulin

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- For patients already being treated with Insulin, **Customize Insulin** orders based on existing Insulin regimen with modifications as needed.

Basal Insulin

(suggested glargine dose calculations for insulin Naïve patients:

For low dose insulin patients: 0.15 units /kg BW

For medium dose insulin patients: 0.2 units /kg BW

For high dose insulin patients: 0.3 units/kg BW

Note: if LANTUS Insulin is ordered remember to select LISPRO Insulin if needed.

- For LOW DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.15 units/kg
0.15 Units/kg, Subcutaneous, Nightly, for 30 days
- For MEDIUM DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.2 units/kg
0.2 Units/kg, Subcutaneous, Nightly, for 30 days
- For HIGH DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.3 units/kg
0.3 Units/kg, Subcutaneous, Nightly, for 30 days
- CUSTOMIZED DOSE: insulin glargine (LANTUS) injection
Subcutaneous, Nightly, for 30 days

Basal dosing
suggestions &
Available options

▶ Nutritional Insulin - LOW DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - HIGH DOSE INSULIN Patient	0 of 1 selected
▶ Customized Insulin	0 of 4 selected

4. For patients already being treated with Insulin, **Customize Insulin** orders based on existing Insulin regimen with modifications as needed.

▼ Basal Insulin

(suggested glargine dose calculations for insulin Naïve patients:

For low dose insulin patients: 0.15 units /kg BW

For medium dose insulin patients: 0.2 units /kg BW

For high dose insulin patients: 0.3 units/kg BW

Note: if LANTUS Insulin is ordered remember to select LISPRO Insulin if needed.

For LOW DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.15 units/kg
0.15 Units/kg, Subcutaneous, Nightly, for 30 days

insulin glargine (LANTUS) injection 17 Units
17 Units (rounded from 16.7 Units = 0.2 Units/kg × 83.5 kg), Subcutaneous, Nightly, First Dose Today at 2200, For 30 days
If patient blood glucose is < 70 mg/dL Follow the hypoglycemia procedure CM H-09. If patient blood glucose is >400 mg/dL notify the provider

For HIGH DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.3 units/kg
0.3 Units/kg, Subcutaneous, Nightly, for 30 days

CUSTOMIZED DOSE: insulin glargine (LANTUS) injection
Subcutaneous, Nightly, for 30 days

EPIC will calculate weight based Basal dose depending on selection



▶ Nutritional Insulin - LOW DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - HIGH DOSE INSULIN Patient	0 of 1 selected
▶ Customized Insulin	0 of 4 selected

▼ Basal Insulin

(suggested glargine dose calculations for insulin Naïve patients:

For low dose insulin patients: 0.15 units /kg BW

For medium dose insulin patients: 0.2 units /kg BW

For high dose insulin patients: 0.3 units/kg BW

Note: if LANTUS Insulin is ordered remember to select LISPRO Insulin if needed.

- For LOW DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.15 units/kg
0.15 Units/kg, Subcutaneous, Nightly, for 30 days
- For MEDIUM DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.2 units/kg
0.2 Units/kg, Subcutaneous, Nightly, for 30 days
- For HIGH DOSE INSULIN patients: insulin glargine (LANTUS) injection 0.3 units/kg
0.3 Units/kg, Subcutaneous, Nightly, for 30 days
- insulin glargine (LANTUS) injection
 Subcutaneous, Nightly, First Dose Today at 2200, For 30 days
If patient blood glucose is < 70 mg/dL Follow the hypoglycemia procedure CM H-09. If patient blood glucose is >400 mg/dL notify the provider

Basal insulin dose also
can be customized if
needed.

▶ Nutritional Insulin - LOW DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - HIGH DOSE INSULIN Patient	0 of 1 selected
▶ Customized Insulin	0 of 4 selected

▼ Additional SmartSet Orders

Add Order

2. Medium Dose Insulin

insulin glargine (LANTUS) injection

✓ Accept ✗ Cancel

Reference: 1. Lexi-Comp

Links:

Report: Lab Test Results

Component	Time Elapsed	Value	Range	Status	Comments
Glucose	8 hours (10/09/16 0350)	113 (H)	65 - 110 mg/dl	Final result	
	1 day (10/08/16 0202)	158 (H)	65 - 110 mg/dl	Final result	
	1 day (10/07/16 2026)	170 (H)	65 - 110 mg/dl	Final result	

⚠ Dose:

Route:

Frequency:

For: Doses Hours Days

Starting:

First Dose:

First Dose: **Today 2200** Last Dose: **Mon 11/7 2200** Number of doses: 30

[Show Additional Options](#)

Scheduled Times: [Hide Schedule](#) [Adjust Schedule](#)

Based on system settings, only one day of scheduled times is shown.

Admin. Inst.: [If patient blood glucose is < 70 mg/dL. Follow the hypoglycemia procedure CM H-09. If patient blood glucose is >400...](#)

Comments (F6): [Click to add text](#)

(300 char max.)

Priority:

▶ [Additional Order Details](#)

⚠ Next Required

✓ Accept ✗ Cancel

▶ **Nutritional Insulin - HIGH DOSE INSULIN Patient**

0 of 1 selected

▶ **Customized Insulin**

0 of 4 selected

Customizable dosing option

Bolus dosing selection options

provider

▶ Nutritional Insulin - LOW DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient	0 of 1 selected
▶ Nutritional Insulin - HIGH DOSE INSULIN Patient	0 of 1 selected
▶ Customized Insulin	0 of 4 selected

▼ Additional SmartSet Orders

Add Order

Click the Add Order button to add an order in this section

▼ Nutritional Insulin - LOW DOSE INSULIN Patient

LOW DOSE INSULIN Patient Scale			
Blood Glucose (mg/dl)	NPO	Eats <= 50% meal	Eats > 50% meal
< 70	Hypoglycemia Protocol	Hypoglycemia Protocol	Hypoglycemia Protocol
71 - 90	0	0	2
91 - 130	0	1	3
131 - 150	0	1	3
151 - 200	0	2	4
201- 250	1	3	5
251 - 300	2	3	5
301 - 350	2	4	6
351 - 400	3	4	7
> 401	4 and notify	5 and notify	8 and notify

Low dose Scale will be displayed for review .
Select if appropriate.



For LOW DOSE INSULIN patients: insulin lispro (HUMALOG) injection

1-8 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient

▶ Nutritional Insulin - HIGH DOSE INSULIN Patient

▶ Customized Insulin

insulin glargine (LANTUS) injection



Subcutaneous, Nightly, First Dose Today at 2200, For 30 days

If patient blood glucose is < 70 mg/dL. Follow the hypoglycemia procedure CM H-09. If patient blood glucose is >400 mg/dL provider

▶ Nutritional Insulin - LOW DOSE INSULIN Patient

0 of 1 :

▼ Nutritional Insulin - MEDIUM DOSE INSULIN Patient

MEDIUM DOSE INSULIN Patient Scale

Blood Glucose (mg/dl)	NPO	Eats <= 50% meal	Eats > 50% meal
< 70	Hypoglycemia Protocol	Hypoglycemia Protocol	Hypoglycemia Protocol
71 - 90	0	0	3
91 - 130	0	2	4
131 - 150	0	3	5
151 - 200	0	4	6
201- 250	2	5	8
251 - 300	4	6	10
301 - 350	6	8	12
351 - 400	8	10	14
> 401	10 and notify	12 and notify	16 and notify



For MEDIUM DOSE INSULIN patients: insulin lispro (HUMALOG) injection

1-16 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

▶ Nutritional Insulin - HIGH DOSE INSULIN Patient

0 of 1 :

▶ Customized Insulin

0 of 4 :

provider

▶ Nutritional Insulin - LOW DOSE INSULIN Patient

▶ Nutritional Insulin - MEDIUM DOSE INSULIN Patient

▼ Nutritional Insulin - HIGH DOSE INSULIN Patient

HIGH DOSE INSULIN Patient Scale

Blood Glucose (mg/dl)	NPO	Eats <= 50% meal	Eats > 50% meal
< 70	Hypoglycemia Protocol	Hypoglycemia Protocol	Hypoglycemia Protocol
71 - 90	0	2	6
91 - 130	0	4	8
131 - 150	0	5	10
151 - 200	2	6	12
201 - 250	4	8	14
251 - 300	6	10	16
301 - 350	8	12	18
351 - 400	10	14	20
> 401	12 and notify	16 and notify	22 and notify



○ For HIGH DOSE INSULIN patients: insulin lispro (HUMALOG) injection

1-22 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

▶ Customized Insulin

▶ **Nutritional Insulin - LOW DOSE INSULIN Patient**

▶ **Nutritional Insulin - MEDIUM DOSE INSULIN Patient**

▶ **Nutritional Insulin - HIGH DOSE INSULIN Patient**

▼ **Customized Insulin**

Customized Insulin: insulin lispro (HUMALOG) injection

1-22 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

Customized Insulin: insulin lispro (HUMALOG) injection

1-22 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

Customized Insulin: insulin lispro (HUMALOG) injection

1-22 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

Customized Insulin: insulin lispro (HUMALOG) injection

1-22 Units, Subcutaneous, Three Times Daily-With Meals, for 30 days

Customizable
Bolus dosing
option

insulin lispro Details

↑ Daily dose of 3-66 Units (1-22 Units Three Times Daily-With Meals) exceeds recommended maximum of 50.1 Units (0.6 Units/kg), over by 32%

Override Reason/Comment:

Reference Links: 1. Lexi-Comp

Report: Lab Test Results

Component	Time Elapsed	Value	Range	Status	Comments
Glucose	8 hours (10/09/16 0350)	113 (H)	65 - 110 mg/dl	Final result	
	1 day (10/08/16 0202)	158 (H)	65 - 110 mg/dl	Final result	
	1 day (10/07/16 2026)	170 (H)	65 - 110 mg/dl	Final result	

Route:

Frequency:

For: Doses Hours Days

Starting:

First Dose:

First Dose: **Today 1300** Last Dose: **Tue 11/8 0800** Number of doses: **90**

Scheduled Times: [Hide Schedule](#) [Adjust Schedule](#)

Based on system settings, only one day of scheduled times is shown.

Admin. Inst.: [If patient blood glucose is < 70 mg/dL. Follow the hypoglycemia procedure CM H-09. If patient blood glucose is >400...](#)

Comments (F6): [Click to add text](#)
(300 char max.)

Questions:

Prompt	Answer
1. NPO	<input type="text" value="Yes"/> <input type="text" value="No"/>
2. <70 GIVE (UNITS OR OTHER) FOR NPO	<input type="text" value="Hypoglycemia protocol"/>
3. 71 - 90 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="text" value="0"/>
4. 91 - 130 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="text" value="0"/>
5. 131 - 150 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="text" value="0"/>
6. 151 - 200 GIVE (UNITS) FOR NPO	<input type="text"/>

Customizable Bolus dosing options

Fill in the desired dose

18:

Prompt	Answer
1. NPO	<input checked="" type="radio"/> Yes <input type="radio"/> No
2. <70 GIVE (UNITS OR OTHER) FOR NPO	Hypoglycemia protocol
3. 71 - 90 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="button" value="0"/>
4. 91 - 130 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="button" value="0"/>
5. 131 - 150 GIVE (UNITS) FOR NPO	<input type="text"/> <input type="button" value="0"/>
6. 151 - 200 GIVE (UNITS) FOR NPO	<input type="text"/>
7. 201 - 250 GIVE (UNITS) FOR NPO	<input type="text"/>
8. 251 - 300 GIVE (UNITS) FOR NPO	<input type="text"/>
9. 301 - 350 GIVE (UNITS) FOR NPO	<input type="text"/>
10. 351 - 400 GIVE (UNITS) FOR NPO	<input type="text"/>
11. >401 GIVE (UNITS OR OTHER) FOR NPO	<input type="text"/>
12. =====	<input type="button" value="="/>
13. EATS <= 50% MEAL	<input checked="" type="radio"/> Yes <input type="radio"/> No
14. <70 GIVE (UNITS OR OTHER) FOR EATS <= 50% MEAL	Hypoglycemia protocol
15. 71 - 90 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
16. 91 - 130 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
17. 131 - 150 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
18. 151 - 200 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
19. 201 - 250 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
20. 251 - 300 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
21. 301 - 350 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
22. 351 - 400 GIVE (UNITS) FOR EATS <= 50% MEAL	<input type="text"/>
23. >401 GIVE (UNITS OR OTHER) FOR EATS <= 50% MEAL	<input type="text"/>
24. =====	<input type="button" value="="/>
25. EATS > 50% MEAL	<input checked="" type="radio"/> Yes <input type="radio"/> No
26. <70 GIVE (UNITS OR OTHER) FOR EATS > 50% MEAL	Hypoglycemia protocol
27. 71 - 90 GIVE (UNITS) FOR EATS > 50% MEAL	<input type="text"/>
28. 91 - 130 GIVE (UNITS) FOR EATS > 50% MEAL	<input type="text"/>
29. 131 - 150 GIVE (UNITS) FOR EATS > 50% MEAL	<input type="text"/>
30. 151 - 200 GIVE (UNITS) FOR EATS > 50% MEAL	<input type="text"/>

For NPO

For Eats <=50% Meal

For Eats > 50% meal

Customize the scale by filling in the doses for 3 columns.

Beware of Insulin stacking !

- Recent analysis of hypoglycemic incidences in hospitalized patients revealed insulin stacking as important contributory factor in causing hypoglycemia. Insulin stacking results from additive action of active insulin from prior insulin dose (also called as insulin on board) to the new insulin dose. This can happen with both rapid acting insulins and long acting insulins. **Hence it is important to take into consideration the dose and type of insulin patient has received prior to ordering insulin to patient.** As a rule of thumb, rapid active insulin (such as Lispro) dose should not be repeated within 3 hours of the last dose of similar insulin unless indicated after careful consideration of insulin on board.

Discharge related to Diabetes .

HOW TO PROVIDE PATIENTS DISCHARGE INSTRUCTIONS WITH INSULIN ALGORITHMS .



Manage Orders

Procedure

Charge Capture

Admission

Transfer

Discharge

Surgical

Consult

FYI

Report Viewer

Order Sets

CBC and Differential

DAILY, First occurrence on Sat 10/8/16 at 0300, Last occurrence on Sun 11/6/16 at 0

Magnesium

DAILY, First occurrence on Sat 10/8/16 at 0300, Last occurrence on Sun 11/6/16 at 0

Nursing

I/O Intake and Output

Routine, EVERY SHIFT, First occurrence on Fri 10/7/16 at 2021, For 30 days

OOB ADLIB

Routine, CONTINUOUS, Starting Fri 10/7/16 at 2021, Until Sun 11/6/16, For 30 days

Vital Signs

EVERY 4 HOURS, First occurrence on Sat 10/8/16 at 0000, For 30 days

ED Adult Admit Short Set

Diet

Diet Age: Adult; Diet: Regular

DIET EFFECTIVE NOW, Starting Fri 10/7/16 at 1628, Until Sun 11/6/16, For 30 days

Age: Adult

Diet: Regular

Nursing

Notes

Manage Orders

Procedure

Charge Capture

Admission

Transfer

Discharge

Surgical

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FYI

Report Viewer

Order Sets

Discharge Orders

Checklist

Cosign Orders

Discharge Orders

Discharge Documentation

Discharge Summa...

Insulin Sliding Scale

H & P Notes

Progress Notes

Follow-Up

Audit Trail

After Visit Summary

Patient Instructions

Preview AVS

Charges

Charge Capture



discarded) in order reconciliation prior to dis
Orders section when ready to review the per



All pended orders must be reviewed before

Unresulted Labs

Unresulted Labs	
Start	
10/09/16 0350	Hepatic Function Panel ONCE, R
10/08/16 0851	ACTH Level STAT, STAT
10/08/16 0300	CBC and Differential DAILY, R
10/08/16 0300	Basic Metabolic Panel DAILY, R
10/08/16 0300	Magnesium DAILY, R
10/07/16 2039	T4, free ONCE, R
10/07/16 2028	Thyroid peroxidase antibody ONCE, R
10/07/16 2027	ACTH Level STAT, STAT
10/07/16 2026	Thyroid stimulating immunoglobulin ONCE,

Allergies/Contraindications

Allergies/Contraindications	

Place Discharge Orders

Select Pended Orders

New Order

Clear All Orders

Additional Orders Search

Search

Pref List

Additional Inpatient Orders

Discharge Patient

Order details



Re

Additional Outpatient Orders

Close F9

Previous F7

N

Pended Discharge Orders Report

If **pended orders** exist on this patient, use the "select pended orders" above to
Additional Orders Search box to bring in all pended discharge orders
or sign as appropriate.

Search for
"Diabetes"

All pended orders must be reviewed before discharge.

Discharge Order Sets

click

Add

Advanced

▼ Suggestions

Discharge - Home or Self Care IP



OB Postpartum Discharge - Home or Self Care IP

Discharge - OB Antepartum Home



 [Pended Discharge Orders Report](#)



If **pended orders** exist on this patient, use the "**select pended orders**" above the Additional Orders Search box to bring in all pended discharge orders, then remove or sign as appropriate.

All pended orders must be reviewed before discharge.

 [Discharge Order Sets](#)

[click to open](#)

▼ [Suggestions](#)

- | | |
|---|---|
| <input type="checkbox"/> Discharge - Home or Self Care IP  | <input type="checkbox"/> OB Postpartum Discharge - Home or Self Care IP  |
| <input type="checkbox"/> Discharge - OB Antepartum Home  | <input type="checkbox"/> Research Dengue Vaccine Study Discharge Orders  |
| <input type="checkbox"/> Discharge - Transplant Home or Self Care  | <input type="checkbox"/> Sepsis Management Adult IP  |
| <input type="checkbox"/> Generic Discharge Surgery IP  | |

Right click on an Order Set to add to favorites.

 [BestPractice Advisories](#)

[click to open](#)

Insulin Sliding Scale Instructions (F3 to enlarge)

Service: [red icon] [magnifying glass] Date: 10/9/2016 [calendar] Time: 12:18 PM [clock] [bookmarks icon] Bookm

Cosign Required

[star] [B] [table icon] [magnifying glass] abc [undo] [redo] [plus] Insert SmartText [print] [undo] [redo] [undo] [redo] [undo] [redo] [undo] [redo]

{Insulin Sliding Scale Instructions:304222288}

{LOW Meal Consumption Based Sliding Scale:TXT,304222288}
{MEDIUM Meal Consumption Based Sliding Scale:TXT,304222288}
{HIGH Meal Consumption Based Sliding Scale:TXT,304222288}
{CUSTOM Meal Consumption Based Sliding Scale:TXT,304222288}
{JOSLIN Insulin Sliding Scale:TXT,3042222500}
{CUSTOM Insulin Sliding Scale:TXT,3042222501}

F2 will open available options:
Make selection

[checkmark] Pend [checkmark] Sign [X]

[restore icon] Restore [checkmark] Close F9 [X] Cancel [up arrow] Previous F7 [down arrow]

H & P Notes

Insulin Sliding Scale Instructions (F3 to enlarge)

Service: Date: 10/9/2016 Time: 12:18 PM

Bookmarks

Cosign Required

B Insert SmartText

MEDIUM Dose Insulin Patient Scale

Blood Glucose (mg/dL)	Eats Breakfast, Lunch & Dinner (not with snacks)
< 70	<ul style="list-style-type: none">• Have 15 grams of carbohydrates such as: 4 ounces of juice, 8 ounces of glucose tablets• Wait 15 minutes, check blood glucose again• If blood glucose is still less than 70, have an additional 15 grams of carbohydrate• If you won't be having a meal for 2-3 hours have a small snack
71 - 90	3 units
91 - 130	4 units
131 - 150	5 units
151 - 200	6 units
201 - 250	8 units
251 - 300	10 units

Pend Sign

Restore Close F9 Cancel

Previous F7

Insulin Sliding Scale Instructions (F3 to enlarge)

Service: Date: 10/9/2016 Time: 12:21 PM

Bookmark

Cosign Required

Rich text editor toolbar with icons for bold, italic, text color, background color, bulleted list, numbered list, link, unlink, undo, redo, print, and help. Includes a text input field with "Insert SmartText" and a plus sign icon.

CUSTOM Dose Insulin Patient Scale

Blood Glucose (mg/dl)	Eats Breakfast, Lunch & Dinner (not with snacks)
< 70	<ul style="list-style-type: none">• Have 15 grams of carbohydrates such as: 4 ounces of juice, 8 ounces of glucose tablets• Wait 15 minutes, check blood glucose again• If blood glucose is still less than 70, have an additional 15 grams of carb• If you won't be having a meal for 2-3 hours have a small snack
71 - 90	*** units
91 - 130	*** units
131 - 150	*** units
151 - 200	*** units
201- 250	*** units

Pend Sign [Close]

Restore Close F9 Cancel

Previous F7

H & P Notes

Create Note in NoteWriter Create Note Go to Notes Refresh

ALL H&P Notes

Diabetes Related Discharge :

HOW TO USE DISCHARGE ORDERSETS FOR DIABETES SUPPLIES :

1. For diabetes related discharge supplies, search "Diabetes"

Record Select

Search:

%	Type	Display Name	Record Name	ID
<input checked="" type="checkbox"/>		Adult Diabetes Discharge Prescriptions	DIABETES DISCHARGE PRES...	30400009509
<input checked="" type="checkbox"/>		Pediatric Diabetes Discharge Prescriptions	DIABETES DISCHARGE PRES...	30400009510
<input checked="" type="checkbox"/>		72 Hour Fast IP Endocrinology	ENDOCRINOLOGY IP 72 HOU...	30400009084
<input checked="" type="checkbox"/>		Adult Subcutaneous Insulin Management (Meal Consum...	ENDOCRINOLOGY IP INSULIN ...	30400009083
<input checked="" type="checkbox"/>		Insulin Pump IP Endocrinology	ENDOCRINOLOGY IP INSULIN ...	30400009125
<input checked="" type="checkbox"/>		Mixed Meal Test for AP-1 IP Endocrinology	ENDOCRINOLOGY IP MIXED ...	30400009557

6 records total, all records loaded.

2. Select "Adult Diabetes Discharge Prescriptions"

Discharge Order Sets

Order details

Additional Outpatient Orders

Close F9

Pended Discharge Orders Report

If **pended orders** exist or Additional Orders Search or sign as appropriate.

All pended orders must

diabetes + Add

Suggestions

- Discharge - Home or Self Car
- Discharge - OB Antepartum H
- Discharge - Transplant Home
- Generic Discharge Surgery IP

Right click on an Order Set to add to favorites.

BestPractice Advisories [click to open](#)

⚠ This patient has ischemic stroke and atrial fib/flutter diagnosis. They do not yet have an anticoagulation therapy discharge order. Please select the appropriate option below:

 **Pended Discharge Orders Report** 

If **pended orders** exist on this patient, use the "**select pended orders**" above the Additional Orders Search box to bring in all pended discharge orders, then remove or sign as appropriate.

All pended orders must be reviewed before discharge.

 **Discharge Order Sets** [click to open](#)

Search

<input checked="" type="checkbox"/> Adult Diabetes Discharge Prescriptions 	<input type="checkbox"/> Adult Subcutaneous Insulin Management (Meal Consumption Based) Endocrinology IP 
--	--

▼ Suggestions

<input type="checkbox"/> Discharge - Home or Self Care IP 	<input type="checkbox"/> OB Postpartum Discharge - Home or Self Care IP 
<input type="checkbox"/> Discharge - OB Antepartum Home 	<input type="checkbox"/> Research Dengue Vaccine Study Discharge Orders 
<input type="checkbox"/> Discharge - Transplant Home or Self Care 	<input type="checkbox"/> Sepsis Management Adult IP 
<input type="checkbox"/> Generic Discharge Surgery IP 	

Right click on an Order Set to add to favorites.

 **BestPractice Advisories** [click to open](#)



i insulin lispro (HUMALOG) 100 UNIT/ML injection is **not on a preferred formulary** for the patient's insurance plan. Below are alternatives that might be more affordable. **Review their clinical appropriateness.**

These alternatives are medications that are in the same pharmaceutical subclass as the ordered medication and are on formulary for the patient's insurance plan.

insulin lispro (HUMALOG) 100 UNIT/ML injection

Pharmacy Coverage Summary

Coverage for current selected plan: MCD OVR 21 (CMX)

Plan	Formulary	Copay	Coverage
MCD OVR 21 (CMX)	Not on Formulary	N/A	N/A

Alternative	Source	Formulary	Copay	Coverage
NOVOLIN N 100 UNIT/ML SC SUSP	Insulin	Preferred Level 1		
NOVOLIN R 100 UNIT/ML IJ SOLN	Insulin	Preferred Level 1		
HUMULIN 70/30 (70-30) 100 UNIT/ML SC...	Insulin	Preferred Level 1		
HUMULIN N 100 UNIT/ML SC SUSP	Insulin	Preferred Level 1		
HUMULIN R 100 UNIT/ML IJ SOLN	Insulin	Preferred Level 1		
HUMALOG 100 UNIT/ML SC SOLN	Insulin	Preferred Level 1		
HUMULIN R U-500 (CONCENTRATED) 5...	Insulin	Preferred Level 1		
HUMALOG MIX 75/25 (75-25) 100 UNIT/...	Insulin	Preferred Level 1		
LANTUS 100 UNIT/ML SC SOLN	Insulin	Preferred Level 1		
NOVOLOG 100 UNIT/ML SC SOLN	Insulin	Preferred Level 1		
NOVOLOG MIX 70/30 (70-30) 100 UNIT/...	Insulin	Preferred Level 1		
LEVEMIR 100 UNIT/ML SC SOLN	Insulin	Preferred Level 1		
HUMALOG MIX 50/50 (50-50) 100 UNIT/...	Insulin	Preferred Level 1		
APIDRA 100 UNIT/ML IJ SOLN	Insulin	Preferred Level 1		
NOVOLIN R RELION 100 UNIT/ML IJ SO...	Insulin	Preferred Level 1		
NOVOLIN N RELION 100 UNIT/ML SC S...	Insulin	Preferred Level 1		
NOVOLIN 70/30 RELION (70-30) 100 UNI...	Insulin	Preferred Level 1		
LANTUS SOLOSTAR 100 UNIT/ML SC S...	Insulin	Preferred Level 1		
HUMALOG MIX 50/50 KWIKPEN (50-50) ...	Insulin	Preferred Level 1		
HUMALOG MIX 75/25 KWIKPEN (75-25) ...	Insulin	Preferred Level 1		
HUMULIN N KWIKPEN 100 UNIT/ML SC...	Insulin	Preferred Level 1		
HUMALOG 100 UNIT/ML SC SOCT	Insulin	Preferred Level 1		

Select appropriate insulin

Load More

Accept Alternative

Continue With Original Order

Cancel

Order Sets

▼ Adult Diabetes Discharge Prescriptions Manage My Version ▼

Add Order

▼ Prescriptions Needed

▼ Select the Meter / Test Strips / Lancets order needed:

Select the brand of meter that was provided to the Patient.

- Ultra Mini Meter / Test Strips / Lancets
- Verio IQ Meter / Test Strips / Lancets
- Freestyle Insulinx Meter / Test Strips / Lancets
- Freestyle Lite Meter / Test Strips / Lancets
- Smart View / Nano Meter / Test Strips / Lancets

Select
Fingerstick
glucose testing
supplies

▶ Diabetes Discharge Prescriptions for Adults

6 of 6 selected

- Insulin Syringe-Needle U-100 31G X 15/64" 0.5 ML MISC
! ? Does not apply, starting 10/9/2016
#200. Use 4-6 daily, dx. 250.00, 1 refill
- acetone, urine, test (KETOSTIX) strip
✔ starting 10/9/2016
#100, test ketones when BG > 250 mg/dl twice in a row or with illness, MDD: 4, dx. 250.03, 1 refill
- glucagon (GLUCAGON EMERGENCY) 1 MG injection
✔ starting 10/9/2016 until 10/8/2017
#1, inject 1 mg SC/IM for severe hypoglycemic event, 1 refill
- Alcohol Swabs PADS
✔ Use as directed. use 8-10 per day, dx. 250.00, #200, 1 refill
Disp-200 each, R-1
- insulin lispro (HUMALOG) 100 UNIT/ML injection
! ✘ starting 10/9/2016 until 10/8/2017
#2 vials (20 ml), inject 3 times daily ac TID per the insulin algorithm, MDD: *** units, 1 refill
- insulin glargine (LANTUS) 100 UNIT/ML injection
! ✔ Subcutaneous, Nightly starting 10/9/2016 until 10/8/2017 or ending after 364 doses

For Insulin
vials and
Syringes

▼ If Pens are required select items below:

- Lantus Solorstar Pen & Needles
- Humalog Kwikpen Pen & Needles

For Insulin Pens and
pen needles

▼ If Pens are required select items below:

Lantus Solorstar Pen & Needles

insulin glargine (LANTUS SOLOSTAR) 100 UNIT/ML SOPN



Accept Cancel

Product: **INSULIN GLARGINE 100 UNIT/ML SC SOPN**

Sig:

Method:

Mark long-term: INSULIN GLARGINE

Patient Sig:

5 pens, inject *** units SC q *** , 1 refill

abc

5 pens, inject *** units SC q *** , 1 refill

Start Date: End Date:

Dispense: Refill

Days/Fill:

Dispense As Written

Notes to [Click to add text](#)

Pharmacy (F6):
(300 char max.)

Class:

Pharmacy Coverage: **Preferred Level 1**

▶ [Additional Order Details](#)

Accept Cancel

And

Insulin Pen Needle (B-D UF III MINI PEN NEEDLES) 31G X 5 MM MISC



starting 10/9/2016

200, use 4-6 per day, 1 refill

Humalog Kwikpen Pen & Needles

To order
Insulin Pens
with pen
Needles

Select the brand of meter that was provided to the Patient.

Ultra Mini Meter / Test Strips / Lancets

Blood Glucose Monitoring Suppl (ONE TOUCH ULTRA MINI) W/DEVICE KIT



Accept Cancel

Product: **ONETOUCH ULTRA MINI W/DEVICE KIT**
Sig: Specify Dose, Route, Frequency **Use Free Text**
Method:
Mark long-term: BLOOD GLUCOSE MONITORING SUPPL

Patient Sig: **Use as directed. #1 meter, use as directed. dx. 250.00, no refill**

abc ↶ ↷ ? ? + Insert SmartText ↶ ↷ ↵ ↶ ↷

#1 meter, use as directed. dx. 250.00, no refill

E 10.65 for Type 1 DM
E 11.65 for Type 2 DM

Start Date: 10/9/2016 End Date:
Dispense: 1 each Refill 0 Days/Fill: Full (0 Days) 30 Days 90 Days
 Dispense As Written

Notes to Pharmacy (F6): [Click to add text](#)
(300 char max.)
Class: Normal Normal Print Phone In No Print
Pharmacy: Unknown
Coverage:
▶ Additional Order Details

Accept Cancel

And
glucose blood (ONE TOUCH ULTRA TEST) test strip
starting 10/9/2016 until 10/8/2017
#200, test 6-8 times daily, dx. 250.00, 1 refill

And
ONETOUCH DELICA LANCETS 33G MISC
Does not apply, Six Times Daily Standard starting 10/9/2016
use 6-8 per day, dx. 250.00, 1 refill

Need to change to update ICD 10 code

To order testing supplies

Questions/Comments :

Contact:

For Community Campus :

Lori Gordon ,RN,CDE or CDE on call

Prashant Nadkarni,MD

nadkarnp@upstate.edu