

(HYPOGLYCEMIA) NURSING CARE PLAN

| Medical Diagnosis: Hypoglycemia | | |
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| Subjective Data: | Nursing Intervention (ADPIE) | Rationale |
| <ul style="list-style-type: none"> • Hunger • Irritability • Headaches • Anxiety • Weakness • Double Vision | Check blood glucose | The best way to detect and prevent hypoglycemia is by doing frequent blood glucose checks. Should be done in the morning, before each meal and at bedtime. |
| | Replace glucose | If patient can take PO, give 15-20g of glucose. Recheck BG in 15 minutes and repeat if necessary. If unstable, Glucagon may be given IM or SubQ. IV Dextrose may also be administered. |
| | Educate on prevention strategies | Patient should understand how to prevent hypoglycemia. Ensure they know th have adequate food intake, they have a regular BG check schedule, limit alcohol consumption |
| Objective Data: <ul style="list-style-type: none"> • Tremors • Seizures • Clammy • ↑HR • Glucose level below 70 mg/dL • New confusion • Change in LOC (Level of consciousness) | Monitor for signs of infection | Extremes in BG levels often occur in the presence of infection. ↑HR or fever may indicate infection Blood cultures may need to be collected. |
| | Educate on treatment at home | It is important for patient to be able to treat mild to moderate hypoglycemia at home. Keep glucose tablets if prone to hypoglycemia; ½ cup of juice; hard candy; Honey or syrup; |