Le Bonheur Methodist Healthcare Family **CHILDREN'S Hospital**

Physician Orders PEDIATRIC: LEB DTU 5 Hour Oral Glucose Tolerance Test (OGTT) Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans

☑ Initiate Powerplan Phase
Phase: LEB DTU 5Hr Oral Glucose Tolerance Test (OGTT) Phase, When to Initiate:_____

LEB DTU 5Hr Oral Glucose Tolerance (OGTT
Admission/Transfer/Discharge

☑ Patient Status Initial Outpatient
T;N Admitting Physician: _____
Reason for Visit:_____
Bed Type: _____ Specific Unit: DTU
Care Team: _____ Anticipated LOS: 2 midnights or more

☑ Discharge Instructions
Other Instructions: When testing is complete and VS stable, discontinue IV and discharge home from DTU

Vital Signs

☑ Vital Signs
Monitor and Record Pulse | Blood Pressure, At baseline (0 mins) and 5 hours later (300 min)

Food/Nutrition

☑ NPO
Keep NPO (except for glucola) during test. Patient may have regular diet upon completion of test, unless otherwise specified.

Patient Care

☑ Weight
☑ Height
☑ Accucheck Nsg
Complete meter blood glucose as needed

Nursing Communication

☑ Nursing Communication
Perform test after an overnight fast of at least 8 hours, start no later than 10:00am.

☑ Nursing Communication
Draw baseline samples and then have patient drink glucola solution in 5 minutes or less.

☑ Nursing Communication
Time all subsequent blood samples from the completion of the glucola intake.

☑ Nursing Communication
Contact Physician and request an order for Dextrose 10% IV solution, 5ml/kg, PRN severe hypoglycemia. IF NOT ALREADY ORDERED.

☑ Nursing Communication
Observe patient for potential side effects: Hypoglycemia: palpitations, diaphoresis, agitation, headache, confusion, unresponsive, change in Level of consciousness.

Medications

☐ **+1 Hours** Glucola
1.75 g/kg, PO, once, Routine, max of 75g

☐ **+1 Hours** Dextrose 10% in Water (Bolus)
5 mL/kg, IV, prn, PRN Other, specify in Comment, Routine
Comments: severe hypoglycemia

Laboratory

☑ Glucose Level
Routine, T;N, once, Type: Blood
Comments: Draw Baseline (0 mins) Glucose level

☑ Glucose Level
Time Study, T;N, q1h x 5 occurrence, Type: Blood

* * * Ø 6 5 * * *

Physician Orders PEDIATRIC: LEB DTU 5 Hour Oral Glucose Tolerance Test (OGTT) Plan

> *Comments: Draw Glucose level every hour from the time the patient COMPLETES the glucola drink.*

☑ Insulin Level Pediatric
   Routine, T;N, once, Type: Blood
   > *Comments: Draw Baseline (0 mins) Insulin level*

☑ Insulin Level Pediatric
   Time Study, T;N, q1h x 5 occurrence, Type: Blood
   > *Comments: Draw Insulin level every hour from the time the patient COMPLETES the glucola drink.*

☑ Proinsulin Level
   Routine, T;N, once, Type: Blood
   > *Comments: Draw Baseline (0 mins) Proinsulin level*

☑ Proinsulin Level
   STAT, T;N, q1h x 5 occurrence, Type: Blood
   > *Comments: Draw Proinsulin level every hour from the time the patient COMPLETES the glucola drink.*

☐ HA1C
   Routine, T;N, once, Type: Blood

☐ BMP
   Routine, T;N, once, Type: Blood

☐ ALT
   Routine, T;N, once, Type: Blood

☐ GGT
   Routine, T;N, once, Type: Blood

☐ TSH
   Routine, T;N, once, Type: Blood

☐ T4 Free
   Routine, T;N, once, Type: Blood

☐ Urinalysis w/Reflex Microscopic Exam
   Routine, T;N, once, Type: Urine, Nurse Collect

☐ Lipid Profile
   Routine, T;N, once, Type: Blood

☐ PAI-1 Plasminogen Activator Inhibitor Antigen
   Routine, T;N, once, Type: Blood

☐ C-Peptide
   Routine, T;N, once, Type: Blood

Consults/Notifications/Referrals

☑ Notify Physician-Once
   > *Notify: On call Endocrinologist at (901)418-0329., Notify For: To report any adverse symptoms or concerns.*

_____ _____ _____ _____
Date   Time   Physician's Signature   MD Number

*Report Legend:
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
IVS - This component is an IV Set

* * * 0 6 5 * * *

Physician Orders PEDIATRIC: LEB DTU 5 Hour Oral Glucose Tolerance Test (OGTT) Plan

NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub phase, see separate sheet
R-Required order