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Pharmacy Mnemonic: DKAORDP1

1. Admit as inpatient to Dr. _____________________ Critical Care

2. **Initial management:**  
   Patient weight ____________ kg. 
   STAT LABS - ABG’s. CBC with differential, urinalysis, CMP, serum & urine ketones, serum osmolality, serum magnesium, serum phosphorus. 
   Repeat labs: BMP q 2 hours, capillary blood glucose q 1 hour 
   STAT EKG, Chest X-ray 
   Culture: blood x 2, & urine 
   Nursing: Neurochecks, VS, I&O q 1 hour 
   IV Fluids: 0.9% Sodium Chloride 20 mL/kg/hr for first hour. 

3. **Continuing therapy: after first hour change fluids to ONE of the following:**
   - 0.9% Sodium Chloride 1L/hour, x _______ hours or 500mL/hour x ______ hours
   - 0.45% Sodium Chloride 1L/hour, x _______ hours or 500mL/hour x ______ hours
   **Contact treating physician if further IV orders are needed.**
   - Change base IV to Dextrose 5% in 0.45% Sodium Chloride at ________mL/hour when serum glucose is ≤ 250mg/dL.

4. **Electrolyte Replacement**
   **Potassium Replacement guidelines:** For serum potassium < 5 mEq/L (only replace when urine output is > 50 ml/hr):
   20 mEq KCl in 250ml sodium chloride 0.9% to infuse over 2 hours and repeat until serum potassium is 5 mEq/l or greater.
   **Phosphorus replacement guideline:** replace phosphorus if < 1.5 mg/L:
   21 mM Potassium phosphate in 250 mL normal saline to infuse over 6 hours. Repeat serum phosphorus next morning.

5. **Insulin Orders:**  
   **Notify physician if K <3.3 mEq/L prior to initiating insulin infusion.**
   Place a copy of the Intensive Insulin Infusion Orders on the chart and follow if needed:
6. **Transition:**
   When glucose < 200 mg/dL, serum bicarbonate ≥ 18 mEq/L and anion gap normal
   If NPO, continue IV insulin infusion orders.
   Transition to basal bolus insulin dosing when patient starts to eat.
   Discontinue IV insulin infusion 2 hours after first dose of basal subcutaneous insulin.

7. **Consult:**
   Diabetic Education, Food and Nutrition, Social Services, Case management, Pharmacy.
   ☐ Endocrinologist consult: ________________________________
   ☐ Level 1    ☐ Level 2

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**DOCTOR’S ORDERS**

BOTTOM EDGE OF PATIENT LABEL

REV 11/13; SD40-3