### Hyperglycemia

**History**
- Past medical history
- Medications
- Recent blood glucose check
- Last meal
- Compliance with diet/meds
- Blood sugar log

**Signs and Symptoms**
- Altered mental status
- Combative or irritable
- Diaphoresis
- Seizure
- Abdominal pain
- Nausea or vomiting
- Weakness
- Dehydration
- Deep or rapid breathing

**Differential**
- Alcohol or drug use
- Toxic ingestion
- Trauma or head injury
- Seizure
- Stroke
- Altered mental status

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**Pearls**
- It is safer to assume hypoglycemia than hyperglycemia if doubt exists.
- Do not place IV in lower extremities.
- Quality control checks should be maintained per manufacturer’s recommendation for all glucometers.

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**Treatment Protocol**

1. **Temperature measurement**
2. **Blood glucose analysis**
3. **Cardiac monitor**
4. **12-Lead ECG**
5. **Establish IV/IO**
   - If blood glucose ≥ 350mg/dL without evidence of CHF/fluid overload
   - Normal Saline bolus 500ml IV/IO
   - Maximum 2L
6. **Notify receiving facility.**
7. **Consider Base Hospital for medical direction**

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