Subcutaneous Insulin Prescribing Chart - Overview

• Combines prescription and administration with blood glucose, ketone monitoring and glycaemic management.
• Designed to minimise delays in management decisions and provide clinicians with clear guidelines for:
  - Insulin prescription and administration
  - Glycaemic management
  - Safe supplemental insulin use

The chart includes:

1. Regular, supplemental, once only and telephone orders
2. Monitoring - for blood glucose levels (BGLs) and ketones
3. Glycaemic management guidelines - to support clinicians that may not have access to local guidelines, policies or specialist services

NB: Guidelines are intended as a guide to provide quality patient care. They are not intended, nor should they replace individual clinical judgement.
Regular Subcutaneous Insulin Orders

The subcutaneous insulin prescribing chart is to be used to document all insulin prescription orders, except intravenous (IV) infusions.

1. Up to 3 different insulin orders
2. Doses prescribed daily according to BGL

NB: Daily prescription according to BGLs is best practice, however insulin can be ordered in advance if the patient’s glycaemic status is stable.

All orders must contain:
- Type of insulin
- Date prescribed
- Frequency of administration
- Time of administration or option selected
- Dose to be administered
- Prescriber’s signature, name & contact details

Administration record must contain:
- Time given
- Initials of person that administers
- Initials of person co-signing dose

NB: One of the staff members checking the insulin must be a Registered Nurse

Refer to User Guide for further information
1. Supplemental insulin is prescribed based on a preferred range documented by the prescriber.

2. Administered doses should correspond to BGLs on page 3 of the chart.

All orders must contain:
- Type of insulin
- Date prescribed
- Administration time - before meals or specified
- Dose to be given for each BGL range
- Prescriber’s signature, name & contact details

Administration record must contain:
- Time given
- Dose given
- Initials of person that administers
- Initials of person co-signing dose

NB: One of the staff members checking the insulin must be a Registered Nurse.
**Once Only Subcutaneous Insulin Orders**

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of insulin</th>
<th>Dose</th>
<th>Date/Time of dose</th>
<th>Prescriber</th>
<th>Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/7/13</td>
<td>Novorapid</td>
<td>4 U</td>
<td>9/7/13 02:30</td>
<td>June Bug</td>
<td>XY 8C</td>
</tr>
</tbody>
</table>

All orders must contain:
- Type of insulin
- Date prescribed
- Time of administration
- Dose to be administered
- Date & time dose is to be administered
- Prescribers name, signature & contact details

Administration record must contain:
- Date
- Time given
- Initials of person that administers
- Initials of second person co-checking dose

NB: One of the staff members checking the insulin must be a Registered Nurse.

If repeated doses of once only subcutaneous insulin are required, the prescriber should review the need to prescribe or to adjust the patient’s regular subcutaneous insulin doses.
Telephone Subcutaneous Insulin Orders

If repeated doses telephone orders are required for subcutaneous insulin, the prescriber should review the need to prescribe or to adjust the patient’s regular subcutaneous insulin doses.

All orders must contain:
- Type of insulin
- Date prescribed
- Time of order
- Dose to be administered
- Prescribers name & contact details
- Initials of 2 staff who received order
- Prescribers signature & date of signature

Administration record must contain:
- Date
- Time given
- Initials of person that administers
- Initials of person co-checking dose

NB: one of the staff members checking the insulin must be a Registered Nurse.