

Name: \_\_\_\_\_  
 Room #: \_\_\_\_\_

STAT

**INSULIN SLIDING SCALE ORDERS**

1. All insulin is regular human insulin given subcutaneously unless otherwise specified.
2. If potassium is low (less than 3.5 mEq/dl), call physician.
3. Sliding Scale Insulin Schedule:
  - q 4 hours (2AM - 6AM - 10AM - 2PM - 6PM - 10PM)
  - q 6 hours (6AM - 12PM - 6PM - 12AM)
 The above schedules recommended for patients who are NPO.
   
  
  - Three times daily AC (30 minutes before meals)
 Recommended for patients who are ABLE TO EAT.
4. Check capillary blood glucose on prescribed schedule.
5. If any reading is 70 or below, notify MD.

Blood Glucose Range	Regular Subcutaneous Insulin Dose
BG 150-200	2 units
201-250	4 units
251-300	6 units
301-350	8 units
351-400	10 units
Greater than 400	Call MD

**Warning: Use caution in patients that are NPO or have renal impairment.**

Approved: 6/02  
 Revised: 10/04 (Abbreviations)

**Suggested conversion to daily NPH insulin requirement:** Use 3/4 of total daily regular insulin requirement as the total daily NPH insulin requirement.

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_