

Diabetic Keto-Acidosis in Adults: Management 0–6 Hrs

Incorporating the JBDS Guidelines (2013)

BOX 1: Parameters to diagnose DKA (JBDS, 2013)

Ketonaemia ≥ 3 mmol/L **or** ketonuria $> 2+$ on urinalysis
 Blood glucose > 11 mmol/L **or** known diabetes mellitus
 Bicarbonate < 15 mmol/L **and/or** venous pH < 7.3

BOX 2: Recovery Parameters (JBDS, 2013)

Capillary Ketones < 0.6 mmols/L
 Venous pH > 7.3
 And / or venous bicarbonate > 15 mmols/L

BOX 3: Potassium Replacement Guide (JBDS, 2013)

K level	K replacement mmol/L of solution
> 5.5	Nil
$3.5-5.5$	40mmol/L
< 3.5	Get senior help, may need more K






BOX 4: Treatment Aims (JBDS, 2013)

Either Capillary Ketones falling by ≥ 0.5 mmols/L/hr
 OR Bicarbonate rising by 3mmols/L/hr AND Glucose falling by 3mmols/L/hr

BOX 5:

Basal-bolus insulins may include Lantus, Levemir, Tresiba, Insulatard, Humulin I or Insuman Basal. Prescribe 'Insulin' on main chart and in detail on s.c. Insulin chart please.

DKA: Treatment Aims Chart

Time Completed	CBG 	Capillary OR Urine Ketones 	Venous pH	Venous Bicarbonate 	Venous K* 	U&E 
Initial Assessment 00:00						
Hour 1 Actual 00:00						
Hour 2 Actual 00:00						
Hour 3 Actual 00:00						
Hour 4 Actual 00:00						
Hour 5 Actual 00:00						
Hour 6 Actual 00:00						

Note: If patient is pregnant Bleep On-Call Obstetrician on 074 immediately

*K hourly & commence ECG monitoring if > 5.5 or < 3.5 mmol/L.

Reference:

Joint British Diabetes Societies Inpatient Care Group (2013) *The Management of Diabetic Ketoacidosis in Adults*. 2nd Edition. Revised September 2013. Leicester: National Health Service (NHS) Diabetes.