

Hospital Diabetes Management Proforma

Name Hospital No.....
 Age/ Sex Ht/Wt

1. Diabetes

- 1) Known diabetes (Type 1 / Type 2 / Others) duration
- 2) Diabetes - New diagnosis
- 3) HbA1C

2. Existing treatment of Diabetes mellitus

Name	Dose

DIABETES MANAGEMENT

A. IV Insulin – Starting rate = (Measured sugar – 100)/100 ml/hr

50 units of short acting insulin (.....) in 50ml NS

GLUCOMETER SUGAR (mg%)	INSULIN (ml/hr)	INSULIN (ml/hr)
<100	Please inform	
101 -120	nil	
121-140	0.5	
141-160	1.0	
161-200	1.5	
201-240	3	
>240	Please inform	

B. GIK regimen -

BASAL –

Daytime (8 am till 10 pm) - DNS + KClml+ Insulin.....

Nighttime (10 pm till 8 am) – DNS + KCl.....ml + Insulin

CORRECTIVE – 4 hourly sc Insulin (.....)

GLUCOMETER SUGAR (mg%)	Insulin SC

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Source: <https://www.diabetesEndocrinology.in/>

< 100	Please inform
100-120	
121 -140	
141-160	
161-200	
201-240	
>240	Please inform

C. SC Insulin (Multiple SC Insulin injection Regimen)

TARGET – Premeal 100-140, Postmeal 140-180 mg

	Time	GRBS	Insulin	Dose		
				Advised	Modified to	Modified by
	Fasting					
	2hrs after bf					
	Bef lunch					
	2hrs after lunch					
	Bef dinner					
	Bedtime					
	Other time					

Discharge Data

(Final Diagnosis)

- 1) Discharged / Died
- 2) Duration of Hospital stay
- 3) Discharge medication for diabetes
 - a) tablet
 - b) insulin

4) Any other information -

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