Plan Ahead for Hypoglycemia

Hypoglycemia (Low Blood Glucose) Overview

Hypoglycemia happens when your glucose drops below

70 mg/dL

Serious hypoglycemia requiring immediate treatment happens when your glucose drops below

54 mg/dL

Some people with diabetes are at higher risk for hypoglycemia than others.

My risk factors for hypoglycemia are:

- Recent hypoglycemic events
- Treatment with insulin
- Treatment with sulfonylurea
- Taking multiple medications
- Age ≥75 years
- Female sex
- Heart disease
- Kidney disease
- Liver disease
- Neuropathy
- Retinopathy
- Depression
- Cognitive impairment
- Hypoglycemia unawareness
- Fasting
- Alcohol or substance use

No matter what your risk level is, hypoglycemia can be caused by certain events in all patients with diabetes.

To reduce the risk of hypoglycemia, try to avoid these common causes:

- Using too much insulin or diabetes medication
- Drinking alcohol
- Skipping or delaying meals or snacks
- Exercising without changing your medication doses or eating more
- Not eating enough carbohydrates for your insulin dose
Hypoglycemia Symptoms and Treatments

Some people with hypoglycemia won’t have any symptoms, while others may have severe symptoms. For many patients, the severity of the symptoms will depend on how low their blood glucose is.

But some people have a condition known as hypoglycemia unawareness, which means they may not feel the symptoms of low glucose. Hypoglycemia unawareness can develop over time, so even if you’ve had hypoglycemia symptoms in the past, you may not always have the same symptoms. This is why testing your glucose regularly is so important.

When you have hypoglycemia, your next steps and the actions of those around you will depend on your glucose levels and the duration of your symptoms.
### Symptoms

<table>
<thead>
<tr>
<th>No symptoms, but glucose 55-69 mg/dL</th>
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</thead>
<tbody>
<tr>
<td>• Rapid heart rate</td>
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<tr>
<td>• Shaking</td>
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<tr>
<td>• Sweating</td>
</tr>
<tr>
<td>• Pale skin</td>
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<tr>
<td>• Tiredness</td>
</tr>
<tr>
<td>• Feeling nervous, anxious or irritable</td>
</tr>
<tr>
<td>• Dizziness</td>
</tr>
<tr>
<td>• Hunger</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No symptoms, but glucose &lt;54 mg/dL</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Feeling confused</td>
</tr>
<tr>
<td>• Acting strange</td>
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<tr>
<td>• Slurring</td>
</tr>
<tr>
<td>• Blurry vision</td>
</tr>
<tr>
<td>• Fainting</td>
</tr>
<tr>
<td>• Seizures</td>
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</tbody>
</table>

### Treatment

#### 15-15 rule

1. Have 15 grams of fast-acting carbohydrates. To speed absorption, hold the sugary food in your mouth before swallowing.
2. Wait 15 minutes and check your glucose levels.
3. If your glucose level is still low, repeat steps 1 and 2 until your glucose is in normal range.
4. Once your glucose level is 70 mg/dL or higher, eat a nutritious meal or snack to prevent another hypoglycemic episode.

#### Glucagon treatment

You or someone around you will need to administer your glucagon medication.

Different types of glucagon are given differently. Newer glucagon preparations are easy to use and come in auto-injection pens with buttons to press or nasal sprays. Glucagon emergency kits contain powder that needs to be mixed before it is given.

### Planning Ahead for Hypoglycemia

Everyone with diabetes has an elevated risk for hypoglycemia and should be prepared for a potential hypoglycemic event. This is especially important for people with type 1 diabetes and people with type 2 diabetes who are taking insulin or sulfonylureas.
My Hypoglycemia Plan

To make sure that I am prepared for a hypoglycemic episode, I will take these steps:

- Get information from a diabetes care and education specialist about hypoglycemia
- Ask for a referral for diabetes education (referral information: __________________)
- Wear a medical ID bracelet
- Carry fast-acting carbohydrates
  - Sugar cubes (take 3-4)
  - Hard candies (1-2), jellybeans (3-4), gummies (1-2), or taffy candy (1-2)
  - Glucose tablets (4)
  - Glucose gel (15 grams)
  - Juice (1/3 cup) or regular soda (½ can)
- Carry a nutritious follow-up snack
- Carry glucagon with me at all times
- Replace glucagon kit with newer autoinjector or nasal spray
- Discuss resources to reduce the cost of my glucagon (information: __________________)
- Store at room temperature (for example, not left in hot car)
- Monitor for expiration (replace by: __________________)
- Show friends and families how to use and storage location (see attached care partner form)
- Discuss my eligibility for continuous glucose monitoring (CGM) with my provider
- Monitor my glucose with fingerstick testing or CGM regularly

Next Steps After a Hypoglycemic Episode

Once you’ve treated a hypoglycemic episode, there are some important next steps.

1. Think about potential causes of the event, such as changes in your eating patterns, recent exercise, alcohol use, taking more diabetes medication than prescribed or taking diabetes medications at the wrong time (for example, taking fast-acting insulin at bedtime).
2. Write down what happened in a log, including the potential causes, glucose levels, symptoms and treatment.
3. If you used your glucagon, notify your health care provider and replace the used medication as soon as possible.
4. If you were unable to identify a potential cause, or if you’ve had multiple hypoglycemic episodes, make an appointment with your health care provider to discuss potential medication changes.

Use the below form to provide your friends and family with the information that they need to help provide treatment during a severe hypoglycemic episode. Use the QR code to get additional copies of this form for sharing.
Severe Hypoglycemia Treatment for

If I am experiencing any of the following symptoms, I may have hypoglycemia and need your **immediate** help with glucagon treatment:

<table>
<thead>
<tr>
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<td>• Nervousness, anxiety, or irritability</td>
<td>• Other: ________________</td>
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<tr>
<td><strong>My glucagon looks like:</strong> (color, shape, size, etc.)</td>
<td><strong>I store glucagon in the following locations:</strong></td>
<td></td>
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<tr>
<td></td>
<td>On the go:</td>
<td></td>
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<tr>
<td></td>
<td>In my home:</td>
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<tr>
<td></td>
<td>Other:</td>
<td></td>
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My glucagon is administered by:

- [ ] **Autoinjector pen**
  - To use, remove the cap and press firmly against my skin.

- [ ] **Nasal spray**
  - To use, remove the device from packaging, insert the tip into my nostril and firmly press the plunger.

- [ ] **Injection kit (being discontinued)**
  - To use, remove syringe/vial covers, empty the syringe liquid into the powder vial, draw the liquid with the dissolved powder back into the syringe and inject into my arm.

**Call 911 immediately if I am still unconscious after 15 minutes; if I am awake but still confused or can’t swallow safely; or if you cannot find my glucagon.**

<table>
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<th>Emergency contact name</th>
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<tr>
<td>Emergency contact number</td>
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