



ieMR Advanced

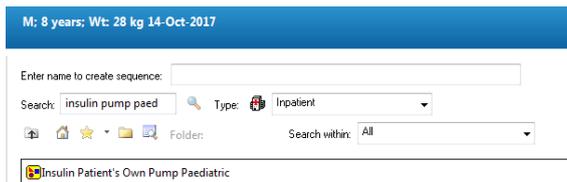
Insulin – patient’s own subcutaneous pump (ordering) – paediatrics

Medication Management

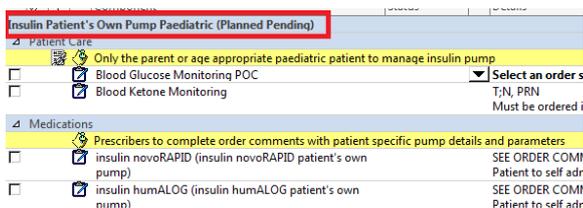
Quick reference guide

When ordering insulin for a patient’s own pump

1. Click **Orders** from the **Menu**.
2. Click **+ Add**.
3. Type *Insulin pump paed* into the search field. Select **Insulin Patient's Own Pump Paediatric**.



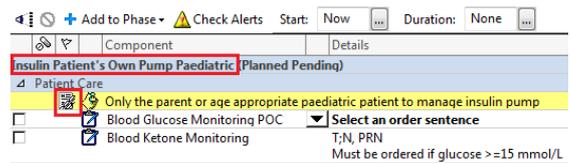
4. Click **Done**.
5. **Insulin Patient's Own Pump Paediatric PowerPlan** will display.



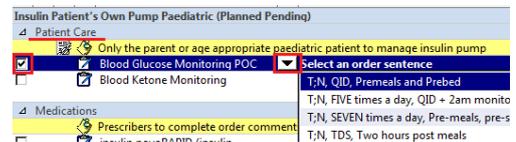
This PowerPlan is divided into sections. Information highlighted in **yellow** provides important points to consider when prescribing.

Patient Care:

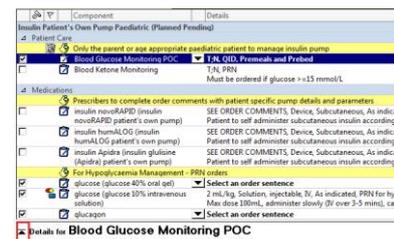
1. Click on the **evidence link** icon. This will open a link to: *CHQ Insulin pump (inpatient) insulin order*.



2. Tick the box next to **Blood Glucose Monitoring POC**. Select the most appropriate order sentence for your patient from the drop down menu.



3. Once selected, details of the order can be viewed (and changed if required) by clicking the arrow next to **Details**.



Tick the box next to **Blood Ketone Monitoring** if required.

Note: Blood Glucose Monitoring should always be ordered and times for testing specified. **Blood Ketone Monitoring** should be ordered if a BGL is ≥ 15 mmol/L or otherwise indicated.

Medications:

4. Tick the box next to the **correct insulin** that the patient is using (Novorapid, Humalog or Apidra). Confirm an accurate medication history has been completed **before** prescribing.



4 Medications		
Prescribers to complete order comments with patient specific pump details and parameters		
<input checked="" type="checkbox"/>	insulin novoRAPID (insulin novoRAPID patient's own pump)	SEE ORDER COMMENTS, Device, Subcutaneous, As indicated, PRN for hyperglycaemia, Indication: Diabetes, Patient to self administer subcutaneous insulin according to following instructions, Prescribers to alter
<input type="checkbox"/>	insulin humALOG (insulin humALOG patient's own pump)	SEE ORDER COMMENTS, Device, Subcutaneous, As indicated, PRN for hyperglycaemia, Indication: Diabetes, Patient to self administer subcutaneous insulin according to following instructions, Prescribers to alter
<input type="checkbox"/>	insulin Apidra (insulin glulisine (Apidra) patient's own pump)	SEE ORDER COMMENTS, Device, Subcutaneous, As indicated, PRN for hyperglycaemia, Indication: Diabetes, Patient to self administer subcutaneous insulin according to following instructions, Prescribers to alter

Note: There is a range of insulin products available which have different release profiles and duration of action. Products may contain more than one type of insulin and often sound similar. All these aspects increase the risk of insulin prescribing error(s). **Prescribers need to ensure the correct insulin is selected. Always seek specialist advice before prescribing if you are unsure.**

5. Double click the insulin order. **Details** will display.
6. Under **Details** the dose is set to **see order comments**.

Note: Prescribers need to complete the dose under **order comments** based on individual patient requirements. Patient specific pump details and parameters need to be checked and confirmed before continuing.

7. Under **Details** click on the **Order Comments** tab. **Complete this section with patient specific pump details and parameters.**

8. Check and complete details under all tabs (**Details, Order Comments, Offset Details and Diagnoses**) as required. Lower **Details** once completed to continue with the PowerPlan.
9. Under **For Hypoglycaemic management-PRN orders** all orders will be ticked by default.
10. For each line, select the most appropriate order sentence for your patient from the drop down menu. Some lines may already have an order sentence assigned to it (e.g: glucose 10% IV solution below).

For Hypoglycaemia Management - PRN orders		
<input checked="" type="checkbox"/>	glucose (glucose 40% oral gel)	Select an order sentence
<input checked="" type="checkbox"/>	glucose (glucose 10% intravenous solution)	2 mL/kg, Solution, injectable, IV, As indicated, Max dose 100mL, administer slowly (IV over 15 minutes)
<input checked="" type="checkbox"/>	glucaqon	Select an order sentence

11. If no order sentences are displayed in the drop down menu, untick **filtered order sentences** and this will display all available order sentences.

For Hypoglycaemia Management - PRN orders		
<input checked="" type="checkbox"/>	glucose (glucose 40% oral gel)	Select an order sentence
<input checked="" type="checkbox"/>	glucose (glucose 10% intravenous solution)	<input type="checkbox"/> Filtered Order Sentences
<input checked="" type="checkbox"/>	glucaqon	15 g =, Paste, Oral, As indicated, PRN for hypoglycaemia, 7.5 g =, Paste, Oral, As indicated, PRN for hypoglycaemia

Consults/Referrals:



12. Tick the box next to consults/referrals that need to be ordered for your patient. This is based on patient requirements, clinical judgement and/or local institutional practice/guidelines.

Consults/Referrals		
All Consults/Referrals must be accompanied by a phone call as per current practice		
<input checked="" type="checkbox"/>	Consult to Dietetics	Routine, Other - specify details, T;N
<input checked="" type="checkbox"/>	Consult to Endocrinology	T;N, Routine, IV Insulin therapy, Endocrinology
<input checked="" type="checkbox"/>	Consult to Diabetes Education	Routine, Insulin Pump, T;N

13. Click  .
14. The dosage calculator may display for medication orders. Check these are correct before clicking **Apply dose**. Refer to *Dosage Calculator QRG* for further information.
15. Once Initiated,  will display next to the prescribed order sentences instead of the ticked box. Check the orders are correct.

Insulin Patient's Own Pump Paediatric (Initiated Pending)			
Patient Care			
Only the parent or age appropriate paediatric patient to manage insulin pump			
	<input checked="" type="checkbox"/>	Blood Glucose Monitoring POC	Order 20-Oct-2017 8:29 AEST, QID
	<input checked="" type="checkbox"/>	Blood Ketone Monitoring	Order 20-Oct-2017 8:29 AEST, PRN Must be ordered if glucose
Medications			
Prescribers to complete order comments with patient specific pump details and part			
	<input checked="" type="checkbox"/>	insulin novoRAPID (insulin novoRAPID patient's own pump)	Order SEE ORDER COMMENTS, D Patient to self administer su
<input type="checkbox"/>	<input checked="" type="checkbox"/>	insulin humALOG (insulin humALOG patient's own pump)	Order SEE ORDER COMMENTS, D Patient to self administer su
<input type="checkbox"/>	<input checked="" type="checkbox"/>	insulin Apidra (insulin glulisine (Apidra) patient's own pump)	Order SEE ORDER COMMENTS, D Patient to self administer su
For Hypoglycaemia Management - PRN orders			
	<input checked="" type="checkbox"/>	glucose (glucose 40% oral gel)	Order 15 g =, Paste, Oral, As indic
	<input checked="" type="checkbox"/>	glucose (glucose 10% intravenous solution)	Order 56 mL, Solution, injectable, Max dose 100mL, administ
	<input checked="" type="checkbox"/>	glucagon	Order 1 mg, Injection, Intramuscu For SEVERE hypoglycaemia
Consults/Referrals			
All Consults/Referrals must be accompanied by a phone call as per current practice			
	<input checked="" type="checkbox"/>	Consult to Dietetics	Order Routine, Other - specify det
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consult to Endocrinology	Order T;N, Routine, IV Insulin ther
	<input checked="" type="checkbox"/>	Consult to Diabetes Education	Order Routine, Insulin Pump, 20-(

16. Click **Orders For Signature**.
17. Check the orders are correct before clicking **Sign**.
18. The Authorizing signature box will display, fill in your username and password to finalise the order.
19. **Refresh**.
20. **Insulin Patient's Own Pump Paediatric** is now initiated. All prescribed orders will

have a grey box with a tick next them and show as ordered.

