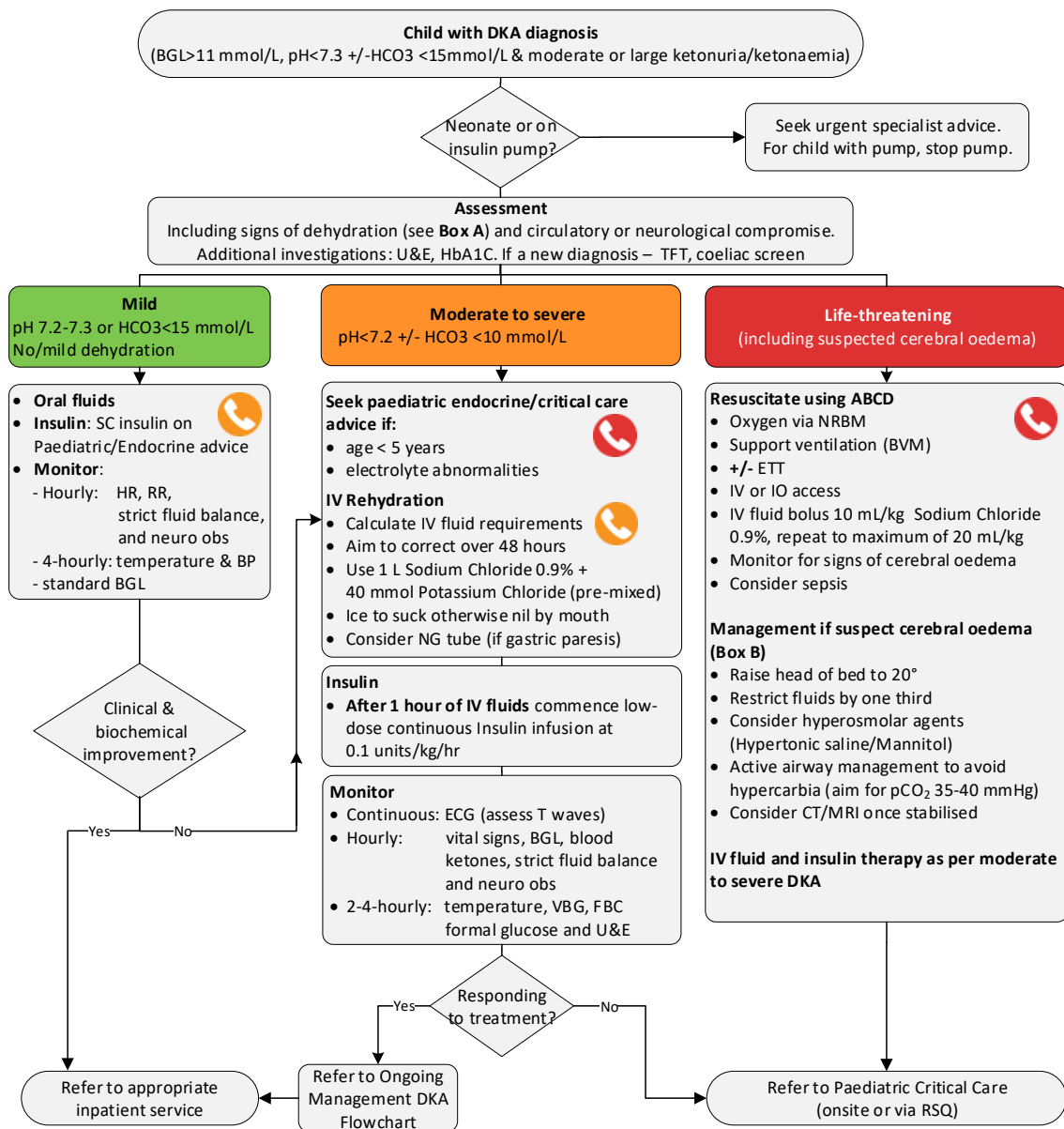


Queensland Paediatric Flowchart

Emergency

DKA – Emergency management in children – Flowchart



! Calculate insulin doses carefully as very serious errors can occur. Never give bolus IV or IM insulin.
 • Miscalculations of added potassium to fluids can be fatal. Outside of critical care, pre-mixed fluid bags are recommended.

Box A: Hydration assessment in DKA
 Volume deficit is often overestimated in DKA which can result in over resuscitation with IV fluids.
 Specific considerations in DKA include:
 • tachypnoea secondary to acidosis can exacerbate dryness of oral mucosa
 • vasoconstriction from acidosis may contribute to the appearance of cool extremities
 • catabolism due to insulin deficiency may result in weight loss

Box B: Signs and symptoms of cerebral oedema

- headache
- inappropriate slowing of heart rate
- recurrence of vomiting
- change in neurological status (restlessness, irritability, increased drowsiness, incontinence)
- specific neurological signs
- rising BP
- decreased oxygen saturation

Seek senior Paediatric/Endocrine advice as per local practice.

Seek urgent Paediatric Endocrine/Critical Care advice (onsite or via Retrieval Services Queensland (RSQ) on 1300 799 127)

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