


Clinical Guideline

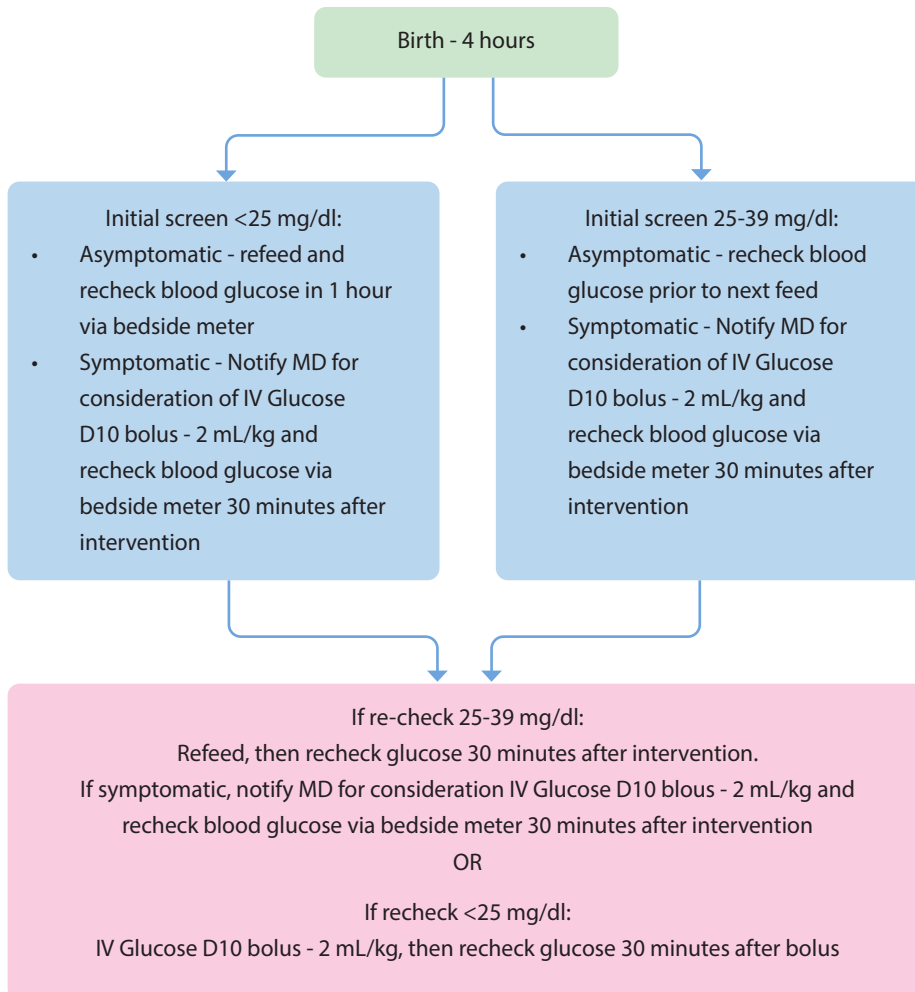
 This guideline should not replace clinical judgment.

Glucose screening protocol: During admission

Newborn Nursery

For the following criteria, obtain blood glucose via bedside meter 30 minutes after first feeding (which should occur within the first hour after birth) or at 2 hours of life if infant is unable to feed:

1. Late Preterm 34—36 6/7 weeks
2. SGA or LGA
3. Infant of a diabetic mother
4. Mother with propranolol or other B-symathometric tocolytic meds (terbutaline, albuterol)
5. Mother withdrawing or positive for opioids or narcotic
6. Infant with any APGAR < 5
7. Infant with congenital heart disease
8. Infant with tremor, irritability, apnea, cyanosis, poor feeding, temp instability (< 36.3 C rectal), poor tone, pallor




For glucose levels >40, monitor clinically for signs of hypoglycemia.

*Continue blood glucose screening via bedside meter until two stable AC results have been obtained (in addition to the initial PC specimen) for high-risk infants such as LPT, SGA, LGA and IDM or any other result <40 mg/dl.

For all glucose levels <40 mg/dl obtained by bedside meter: Send glucose sample to lab for validation and consider interventions based on symptoms.

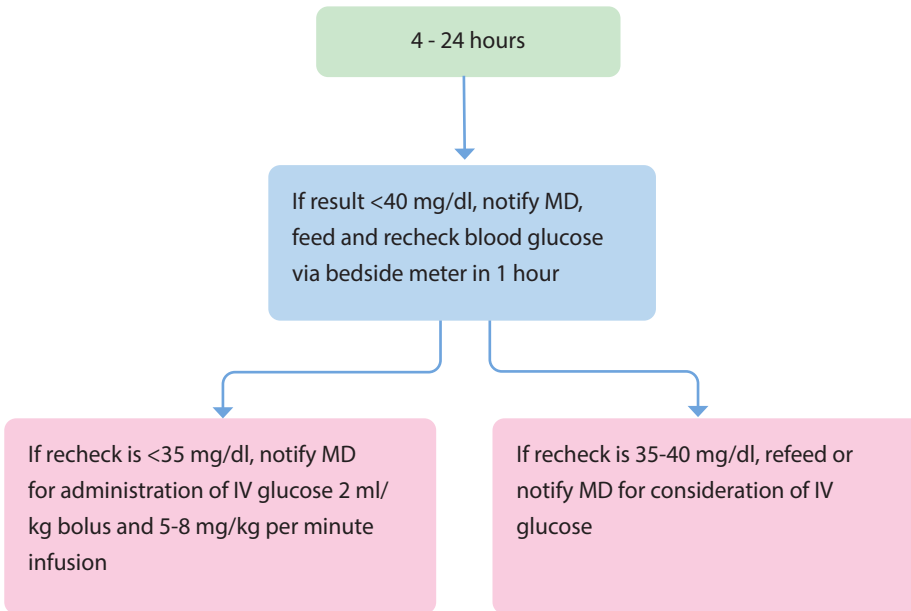
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Glucose screening protocol: Beyond 4 hours of life

Newborn Nursery

Blood glucose should be obtained via bedside meter for infants with the following symptoms: tremor, irritability, apnea, cyanosis, temperature instability (36.3 C rectally or lower), poor feeding, low activity or pallor



For glucose levels >40, monitor clinically for signs of hypoglycemia.

*Continue blood glucose screening via bedside meter until two stable AC results have been obtained (in addition to the initial PC specimen) for high-risk infants such as LPT, SGA, LGA and IDM or any other result <40 mg/dl.

For all glucose levels <40 mg/dl obtained by bedside meter: Send glucose sample to lab for validation and consider interventions based on symptoms.

Hypoglycemia Guideline

Executive Summary

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Approved (June 2020)

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References

Committee on Fetus and Newborn. AAP. Clinical Report: Postnatal Glucose Homeostasis in Late-Preterm and Term Infants. Pediatrics. 2011;127(3):575–579. Reaffirmed June 2015

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Retrieval website: <http://www.chrichmond.org/clinical-guideline-Hypoglycemia>

Example:

Children's Hospital of Richmond at VCU, Kimbrough T, Gee K. Hypoglycemia Guideline. Available from:

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