

**Oral Glucose for mild hypoglycaemia
(GlucoBlast® or Glutose 15®) - adults****SESLHDPR/481****POLICY STATEMENT**

The Registered Nurse (RN) / Registered Midwife (RM) is authorised to instigate nurse/midwife-initiated medication without an authorised prescriber's order under the specific circumstances set out in the **INDICATIONS** section and provided there are no contraindications present.

It is important for nursing and midwifery staff to remain aware that:

- Minor ailments may be symptoms of other more serious diseases or may be adverse reactions to medication already prescribed
- Nurse-initiated medication may interact with the patient's prescribed medication
- The maximum daily recommended dose of the medication must not be exceeded¹

Choice of the oral glucose treatment (GlucoBlast® or Glutose 15®) is dependent on local protocols and what product is available in your work area.

The administering nurse/midwife must record the administration on an approved paper or electronic medication chart, clearly indicating that the medicine was nurse initiated.

If the patient requires the medication on a repeated basis, then a medical officer (MO) must be consulted and a PRN order obtained.

All hypoglycaemic episodes must be escalated immediately via the clinical emergency response system and a medical officer must review the patient.

INDICATIONS

For use in mild hypoglycaemic episodes, if blood glucose level is < 4.0 mmol/L, where the patient is in a conscious state and able to take treatment orally².

CONTRAINDICATIONS

Patient unable to take treatment orally.

PRECAUTIONS

Safe to use in pregnancy and breastfeeding.

HISTORY/ASSESSMENT

Please refer to and follow the local hospital guidelines for the assessment and management of hypoglycaemia.

Determine blood glucose level (BGL) using a blood glucose meter.

Assess if hypoglycaemic (BGL less than 4 mmol/L), conscious, cooperative, and able to take oral treatment.

Escalate immediately via clinical emergency response system if BGL is less than 4 mmol/L and/or the patient has an altered level of consciousness

Treat immediately if patient is symptomatic and indications met.

PROTOCOL/ADMINISTRATION GUIDELINES

Caution: CHECK for allergies and/or contraindications			
Drug	Dose	Route	Frequency
Glucose gel 15 g/32 mL (GlucoBlast®)	Twist tip off and squeeze entire contents of one tube (15g glucose) into mouth and swallow.	Oral	Once only
OR			
Glucose gel 40% (Glutose 15®)			
Each tube of Glucose gel contains 15g of glucose.			

MONITORING - POTENTIAL ADVERSE EFFECTS/INTERACTIONS

- Stay with patient
- Escalate if required or unresponsive
- Repeat BGL every 15 minutes following treatment until ≥ 4 mmol/L, or earlier if clinically indicated as per local hypoglycaemia guidelines
- When patient responds and oral intake is possible, give food to prevent recurrence (e.g., next meal/snack, 1 slice of bread, or 2 biscuits) ².
- Recheck BGL within and every 2 hours until stable

DOCUMENTATION

A record of the administration must be made on the approved paper or electronic medication chart noting that the medication was nurse initiated.

A further record of the medication administered including indication, dose and effect must be included in the patient's health care record.

PRACTICE POINTS

- Response to glucose oral powder/gel should occur within 10 to 15 minutes²
- The cause of the hypoglycaemia should be determined and acted upon to prevent reoccurrence².
- The period of monitoring may need to be extended if the cause of hypoglycaemia is not immediately reversible².

REFERENCES/FURTHER READING

1. [NSW Health Policy Directive Medication Handling PD2022_032](#)
2. [eTG complete](#). Hypoglycaemia in patients with diabetes. Melbourne: Therapeutic Guidelines Ltd. August 2022.

REVISION and APPROVAL HISTORY

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SESLHDPR/481

Date	Version Number	Author and Approval
July 2015	DRAFT	Pharmacy Department, Prince of Wales Hospital
September 2015	1	Stream consultation and revision Approved by SESLHD Drug & QUM Committee
May 2018	DRAFT 2	Reviewed by nursing and pharmacy staff. Minor wording updates made. References updated.
July 2018	2	Approved by SESLHD Quality Use of Medicines Committee
April 2020	DRAFT 3	Updated to include Glutose-15 gel. Removed reference to use in paediatrics as protocol does not align with treatment guidelines for children.
May 2020	3	Approved by SESLHD Quality Use of Medicines Committee
June 2023	DRAFT 4	NSW Medicines Formulary reviewed. Glucodin removed. GlucoBlast added. Reviewed by nursing and pharmacy staff.
September 2023	4	Approved by SESLHD Drug and Therapeutics Committee