

CENTRAL CARE POLICY ADMINISTRATION OF INSULIN

SUBJECT:	<u>ADMINISTRATION OF INSULIN</u>
ANNUAL REVIEW MONTH:	<u>June</u>
RESPONSIBLE FOR REVIEW:	<u>Director of Central Care</u>
LAST REVISION DATE:	<u>August 2010</u>

Purpose: To administer insulin which cannot be taken orally into the body.

Equipment: Prescribed Insulin
Insulin syringe
Alcohol prep or cotton ball and 70% alcohol

Note: For self-administration of insulin, there must be an assessment by the physician that the consumer is capable of self-administration and he/she must be taught self-administration procedures by a registered nurse.

If a consumer is in a group home, and can self-administer the insulin, then the consumer can prepare the insulin and the Houseparent will check both the type of insulin and the amount drawn up prior to administration. If the consumer is unable to self-administer the insulin, two certified staff members can administer the insulin. One staff member will prepare the insulin injection for administration. Before administering the injection the dosage must be checked by the other certified staff member.

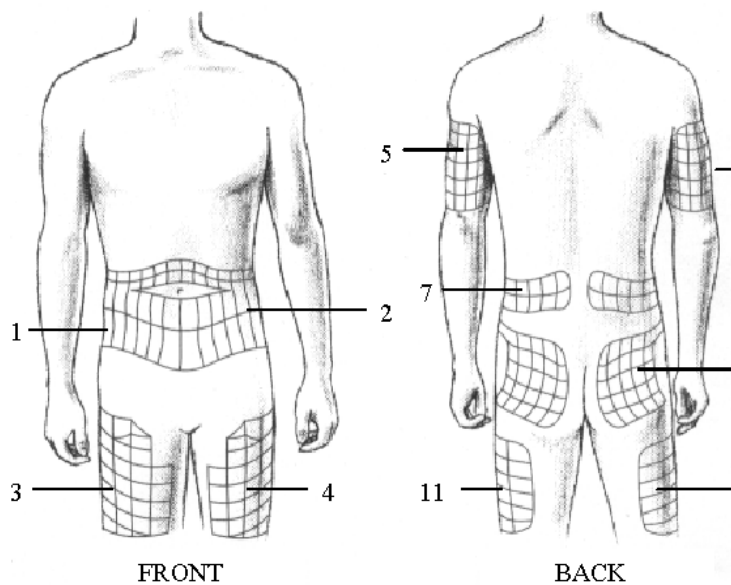
Procedure:

Follow procedure for injections with these specifics noted for insulin:

1. Wash hands and use appropriate protective devices.
2. Multi-dose injectable vials may be used until the manufacturer's expiration date is reached. However, the manufacturer recommends that Lantus Insulin be discarded 28 days after the rubber diaphragm is first pierced whether refrigerated or not. Date and initial multi-dose vial when the seal has been removed and the exposed rubber diaphragm is pierced.
3. Gather supplies before administering insulin.
4. Check insulin bottle and label.
5. Use an insulin syringe.
6. Regular and NPH insulin must be rolled gently between palms to mix.
7. Remove needle cap and using unit scale on syringe draw air into syringe equal to the amount of solution (insulin) to be drawn up.
8. Clean the top of insulin vial with alcohol swab.
9. Insert needle into stopper and expel air into bottle. Using unit scale on syringe corresponding to the number of units to be given, withdraw desired amount of insulin into the syringe.
10. Identify consumer by utilizing the photograph in the MAR Book (If given by nurse).
11. Hold the needle at a 90 degree angle.
12. It has been recommended by the American Diabetes Association that Insulin be

given into the subcutaneous tissue of the upper arms, thighs, buttocks and abdomen. Sites should be rotated within these areas. Rotation of the sites should be done within a site before moving on to the next site. Note that the fastest rate of absorption has been found to be in the subcutaneous tissue of the abdomen. See diagram:

NOTE: Not all sites shown; Example shows rotation of sites in each area.



13. Document insulin administration on the Medication Administration Record.
14. Identify symptoms of hypoglycemia (low blood sugar) which occurs with much or too little insulin.
 - a. Nervousness, weakness, sweating, trembling.
 - b. Fainting, hunger pangs in epigastric region.
 - c. Confusion, aggressive or erratic behavior, change in mood.
 - d. Headache, numbness, or tingling of the tongue or lips.
 - e. High pulse rate.
 - f. Double vision.
 - g. Pallor, chilling sensation.

Have some orange available, candy, or sugar may be used for this measure. If consumer is unconscious, check vital signs and obtain glucometer blood sugar.
Record symptoms and treatment (s) carried out.

* **Note:** Regular Human Insulin may be combined in the same syringe with NPH Human Insulin. When this is necessary, the Regular Human Insulin should be drawn into the syringe first. ***Insulins should be injected immediately after mixing.***

Humalog (Lispro) Insulin should be mixed with long-acting human insulins only with a physician's order. When this is necessary, the Humalog Insulin should be drawn into the syringe first.

Insulins should be injected immediately after mixing.

Lantus (Glargine) Insulin should not be mixed or diluted with any other insulin or solution.

- References: 1. Insulin Patient Package Inserts.

Approved: _____ Date: _____
George Harris, LCSW, Director of Central Care

Approved: _____ Date: _____
Nurse