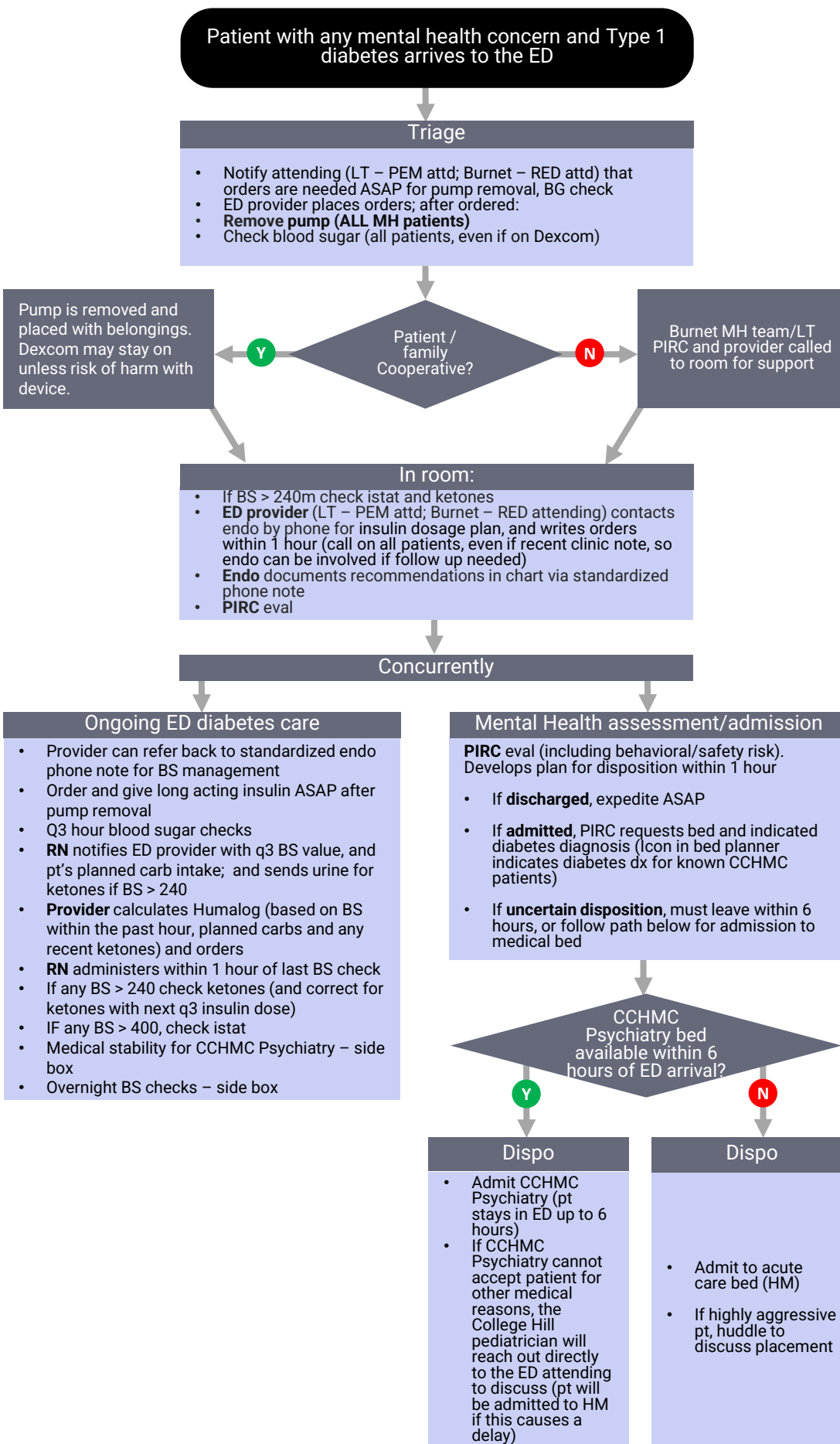


ED Mental Health Patient with Type 1 Diabetes



Medical Readiness for CCHMC Psychiatry

- No DKA
 - If at any point pH < 7.25, admit to endo via usual DKA pathway
- If on a pump at home - pump is removed and subcutaneous insulin plan developed with endocrine
- If blood sugar is > 240, evaluate for DKA and if no DKA, plan is made with endocrine for ongoing management, but should not delay admission to CCHMC Psychiatry.
- Unless in DKA (admit to endo) pt should not be held longer in the ED for BS rechecks before transfer to CCHMC Psychiatry (unless BS currently due or pt symptomatic)

Overnight BS checks*

- May skip X 1 IF: no concern for hyperglycemia, last BS < 240, no recent ketones, not eating, pt already asleep and discussed skipping with ndo
- Generally, only correct middle of the night BS if > 240 or concern for developing hyperglycemia

Uncertain disposition and non-CCHMC admits (Beckett Springs etc.)

- Physical discharge/transfer occurs within 6 hours of arrival to CCHMC ED; if this is not possible, admit to acute care bed

