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Management Of Diabetic Ketoacidosis (DKA) In Pediatrics

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· Anesthesiologist Has Ordered PACU Insulin And Diabetes Management Using Anesthesia Diabetes (Insulin) Perioperative Plan Routine Monitoring · Check BG Upon Arrival To PACU, Then Every 30 Minutes Until Child Wakes From Anesthesia, Then Hourly For 4 Hours After HYPOglycemia Safety · For Glu Feb 1th, 2024

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Or Hyperglycemic Hyperosmolar Nonketoticstate (HHNK) Endogenous Insulin Is Enough To Prevent Lipolysis And Ketogenesisbut Inadequate To Facilitate Glucose Utilization Dehydration >>> Than In DKA Total Body Water Deficit Usually 7-12 LitersAuthor: BenkejCreated Date: 1/28/2019 1:15:50 PM Jan 1th, 2024

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Nasojejunal Tube Was Also Inserted. During His ICU Stay, He Became Febrile With Rise In Inflammatory Markers, Raising Further Suspicion Of Oesophageal Rupture, With Aspira-tion Associated Pneumonia And Hos-pital Acquired Pneumonia As Differ-ential Diagnoses. He Was Treated Empirically With Intravenous Ceftri-axone And Metronidazole. He Jan 17th, 2024

DKA Case Detai L S

P Ati En T S Tate P Ati En T S Tatu S L Ear N Er Acti O N S Tr I G G Er S 1. I N I Ti Al Assessmen T An D I D En Ti Fi Cati O N O F DKA Rhythm: Sinus Tach HR 130 BP 90/60 RR 35 O2 99% On RA T 98.5 GCS 14 Wt 15 Kg Patient Appears Tired But Rousable. Alert And Oriented. Mucous Membranes Are Dry A: Patient B: Kussmal Breathing, Lungs Are Clear Jan 14th, 2024

DKA HHS VetGirl FINAL NO PICS

• CRI Vs. Intermittent IM Protocols • Supplementation Of Glucose • +CAUTION: ↓ K, P+, Blood Glucose, Osmolality Insulin CRI(Regular Insulin) Cat- 1.1u/kg In 240ml 0.9% NaCl Dog- 2.2 U/kg In 240ml 0.9% NaCl Blood Glucose (mg/dL) Insulin CRI (ml/hr \$ >350 10 250-349 7 15 Jan 17th, 2024

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