

Labour and Birth Gestational Diabetes Intrapartum Management

Allergies: <input type="checkbox"/> None known <input type="checkbox"/> Unable to obtain List with reactions: _____	Weight: _____ kg
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• Admit to: _____

Intrapartum blood glucose goal: 4 to 7 mmol/L

Gestational diabetes: Diet controlled

- Blood glucose monitoring q2h
- Diabetic diet as tolerated, unless obstetric reason for NPO.
- If woman needs intravenous for any reason:
 - Start mainline intravenous NS
 - Add secondary intravenous line to mainline and infuse D5W IV at 125 mL/h
 - Turn off mainline NS intravenous once secondary line infusing unless otherwise ordered
- Treat hypoglycemia (less than 4 mmol/L) as per **10-000-6019 Hypoglycemia in Diabetes Adults Flowchart (19 years and older)** and call primary care provider
- Call primary care provider if blood glucose is greater than 7 mmol/L during labour for orders.

Gestational diabetes: Controlled with insulin or oral hypoglycemics

If treated with insulin or oral hypoglycemic agents **and** for induction of labour or Caesarean section the next morning:

For induction or caesarean section the next morning:

- Reduce night time **long acting insulin** by 50%*
- Hold bedtime oral hypoglycemic agents
- During induction of labour, continue normal meal time **short acting insulin** as long as eating meals until ordered NPO
- Blood glucose monitoring:
 - Not in labour: At usual times
 - Early labour: q2h
 - Active labour: q1h

*human isophane insulin (Novolin NPH or Humulin NPH) or **insulin glargine** (Lantus) or **insulin detemir** (Levemir)

If intravenous is needed for any reason:

- Start mainline intravenous of NS
- Add secondary intravenous line to mainline and infuse D5W IV at 125 mL/h
- Turn off mainline NS intravenous once secondary line infusing unless otherwise ordered
- If for **oxytocin**, add **oxytocin** to D5NS. Infuse D5NS and D5W for a total hourly rate of 125 mL/hour .
- Monitor urine for ketones with each void (no greater than 2 hour intervals)
- If moderate ketonuria (4 mmol/L or greater) is present, discontinue D5W. Start D10W at same rate and infuse until ketones clear.

Medications

- Sliding scale **regular insulin** after each glucose meter check
 - Give **regular insulin** 1 unit when blood glucose is 7 to 11 mmol/L
 - Give **regular insulin** 2 units when blood glucose is 11.1 to 14 mmol/L
 - Give **regular insulin** 3 units when blood glucose is greater than or equal to 14.1 mmol/L



**Labour and Birth Gestational
Diabetes Intrapartum Management**

Postpartum management of gestational diabetes with oral hypoglycemics or insulin

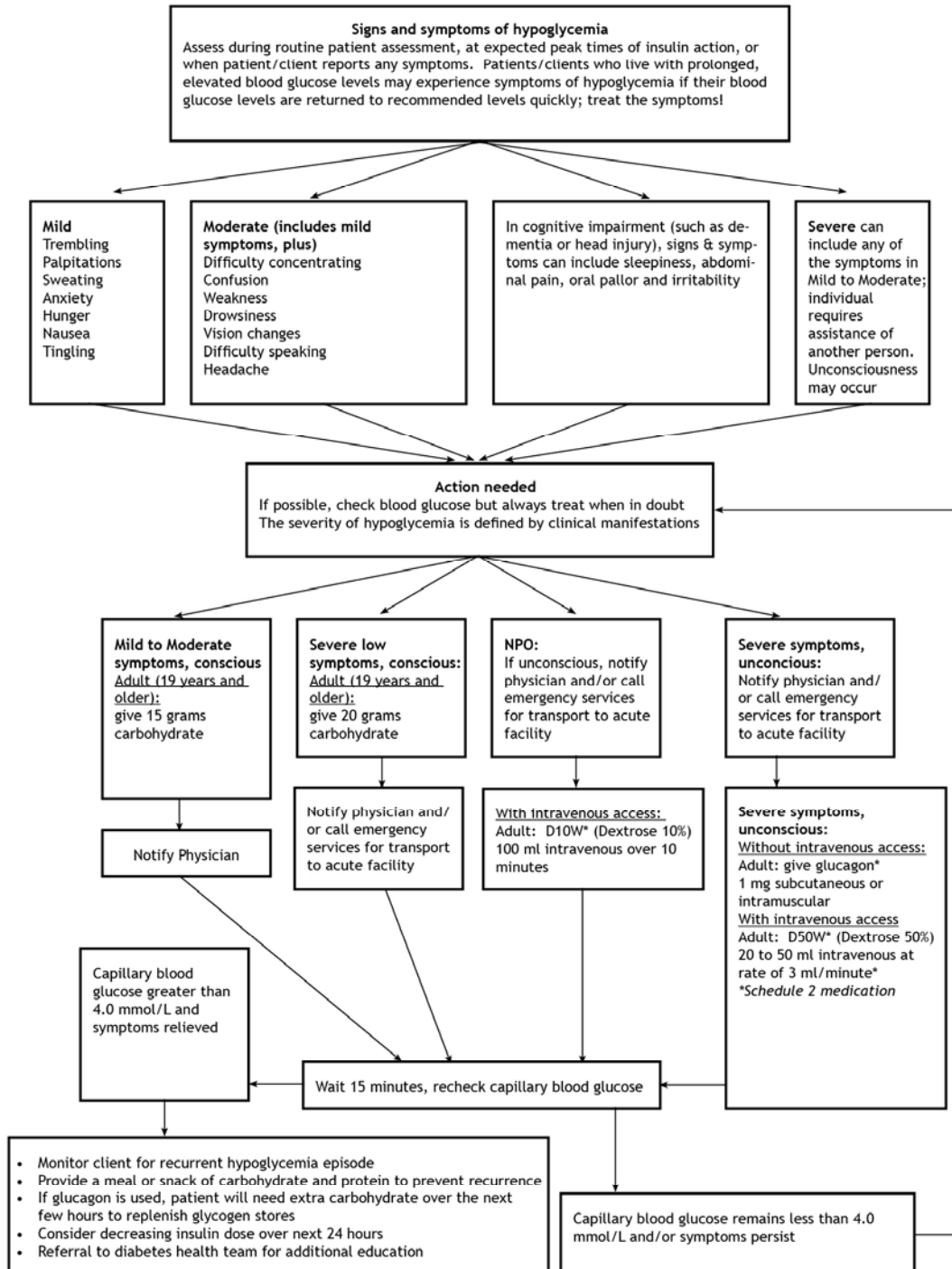
- Discontinue **insulin** after delivery of placenta
- Continue to check blood glucose before meals for 24 hours.
- If glucose greater than 8 mmol/L call primary care provider for orders
 - Diet as tolerated

Postpartum management of diet controlled gestational diabetes

- After delivery, check blood glucose once two hours after birth. If greater than 8 mmol/L, call primary care provider.
 - Diet as tolerated
- Requisition for 6 week postpartum glucose tolerance test

Physician signature: _____ College ID: _____ Date: _____ Time: _____

**Hypoglycemia in the Diagnosed Diabetes Patient
Adult (19 years and older)**



Check I-Portal for more information on this and other Decision Support Tools