Predisposing Factors

• Diet
  • Do not skip meals (especially if your patient is on sulfonylureas or insulin)
  • Fasting

• Not obtaining a yearly flu shot

• Medical treatments (sulfonylureas or insulin)
  • Ex. Too much insulin being injected

• Age (more prevalent in older patients)

• Too much exercise
  • The patient should not exercise if their blood glucose is less than 100 mg/dL.

• Alcohol consumption
  • Especially if the patient is bing drinking where the patient is drinking without eating
**Severity of Symptoms**

<table>
<thead>
<tr>
<th></th>
<th>DKA</th>
<th>HHS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mild</strong> (plasma glucose &gt; 250 mg/dL)</td>
<td>Moderate (plasma glucose &gt; 250 mg/dL)</td>
<td>Severe (plasma glucose &gt; 250 mg/dL)</td>
</tr>
<tr>
<td><strong>Arterial pH</strong></td>
<td>7.25 – 7.30</td>
<td>7.00 – (&lt;7.24)</td>
</tr>
<tr>
<td><strong>Serum bicarb</strong></td>
<td>15-18</td>
<td>10 – (&lt; 15)</td>
</tr>
<tr>
<td><strong>Urine ketone</strong></td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td><strong>Serum ketone</strong></td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td><strong>Effective serum osmolality</strong></td>
<td>Variable</td>
<td>Variable</td>
</tr>
<tr>
<td><strong>Anion gap</strong></td>
<td>&gt; 10</td>
<td>&gt; 12</td>
</tr>
<tr>
<td><strong>Mental status</strong></td>
<td>Alert</td>
<td>Alert/ drowsy</td>
</tr>
</tbody>
</table>

Plasma glucose > 600 mg/dL
Monitoring Parameters

*Check for these every 2-4 hours:*

- Blood glucose levels
  - Help determine when we start on the dextrose solution
- BUN
- Creatinine levels
  - Looking at the kidney function
- Electrolytes
  - Usually will correct itself
  - If it does not correct, then we should give additional electrolytes to correct the imbalance.