



# Guidelines for Ward Capillary Blood Glucose (CBG) Monitoring

For all patients who have Diabetes Mellitus, (except those listed below)

Check capillary blood glucose at the following times:

**BEFORE EACH MEAL**, at **BEDTIME** or if **HYPOGLYCAEMIA** suspected.

Wash patient's hands prior to blood testing.

Document the exact time of the test on the blood glucose recording sheet, whether patient has eaten in the previous 2 hours and if treatment for hypoglycaemia has been given.

Check Ketones if CBG is  $> 16.0$  mmol/L

## Exceptions to the above guidelines

### 1. Type 2 diabetes, DIET controlled:

- Check capillary blood glucose before breakfast and evening meal
- If any reading is  $>8$  mmol/L, test before each meal and at bedtime

### 2. Patients with no history of diabetes - on steroids:

- Check capillary blood glucose 2 hours after evening meal for 48 hours following steroid commencement. If elevated

CBG  $> 8$  mmol/L

↓  
Test before each meal and at bedtime.  
Inform patient's team.

CBG  $\leq 8$  mmol/L

↓  
Test before evening meal and at bedtime. If any subsequent CBG  $> 8$  mmol/L, test before each meal and at bedtime. Inform patient's team.

### 3. Patients with Cystic Fibrosis and no history of diabetes:

- Check random capillary blood glucose on admission

CBG  $> 6$  mmol/L

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Test before each meal, 2 hours after evening meal and at bedtime.  
Inform patient's medical team.

CBG  $\leq 6$  mmol/L

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Test 2 hours after evening meal. If post prandial CBG  $> 6$  mmol/L, test before each meal, 2 hours after evening meal and at bedtime.  
Inform patient's medical team.

- ### 4. For long stay medical patients with stable blood glucose for the first 2 weeks of their admission, the frequency of capillary blood glucose testing can be reduced to 3 – 5 times a week after consultation with the medical team.

\*NB\* These guidelines DO NOT APPLY to patients admitted with Diabetic Ketoacidosis (DKA), Hyperosmolar Hyperglycaemia (HHS previously 'HONK') or patients on GKI / Insulin Infusion / Parenteral Nutrition (PN) - please see separate protocols.

Approved by Insulin Prescription Committee March 2009