



Kansas City Metropolitan Physician Association-Accountable Care Organization, LLC

**Diabetes Mellitus Type 2 Insulin Orders and Sliding Scale**

**Insulin Orders (SC):**

Patient Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Date: \_\_\_\_\_

Physician: \_\_\_\_\_

Goal Premeal Blood Glucose (BG): 70-130 or \_\_\_\_\_ Goal A1C: <7.0% or \_\_\_\_\_

BG Monitoring:

- ☐ Before breakfast
 ☐ Before meals and at bedtime  
☐ 90-120 minutes after meals
 ☐ 2-3 am  
☐ \_\_\_\_\_

	Breakfast	Lunch	Dinner	Bedtime
Short Acting Insulin Orders: 0-15 minutes before meal	_____ Units of <input type="checkbox"/> Humalog <input type="checkbox"/> Novolog <input type="checkbox"/> _____	_____ Units of <input type="checkbox"/> Humalog <input type="checkbox"/> Novolog <input type="checkbox"/> _____	_____ Units of <input type="checkbox"/> Humalog <input type="checkbox"/> Novolog <input type="checkbox"/> _____	
Lantus or Levemir Insulin Orders:	_____ Units			_____ Units

**Premeal Humalog or Novolog or \_\_\_\_\_ Adjustments for Hyperglycemia:**

To be administered in addition to scheduled premeal insulin to correct high premeal blood glucose test results.

<input type="checkbox"/> Low Dose (<40 U/day)		<input type="checkbox"/> Medium Dose (40-80 U/day)		<input type="checkbox"/> High Dose (>80 U/day)		<input type="checkbox"/> Individualized	
Premeal BG	Additional Humalog	Premeal BG	Additional Humalog	Premeal BG	Additional Humalog	Premeal BG	Additional Humalog
150-199	1 unit	150-199	1 unit	150-199	2 unit	150-199	
200-249	2 units	200-249	3 units	200-249	4 units	200-249	
250-299	3 units	250-299	5 units	250-299	7 units	250-299	
300-349	4 units	300-349	7 units	300-349	10 units	300-349	
>349	5 units	>349	8 units	>349	12 units	>349	