



Delegation and/or Medical Directive

Title: Neonatal Hypoglycemia

Policy Number: 06-03

Approval Date: September 2020

Review Date: Annually

Review/Revision Date: September 2021

Sponsoring Person: Chief of Paediatrics
Quinte Midwives

Does this policy include a delegation of a controlled act? Yes No

Orders:	Appendix Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Title: Appendix 6: Neonatal Hypoglycemia Medical Directive Order Set Appendix 7: Prevention of Hypoglycemia in Newborn Inpatients Clinical Protocol
----------------	--

The authorized nurses in Quinte Healthcare Corporation (QHC) may perform the Medical Directive provided the requirements, as listed in the directive, are met.

If the appropriate physician or health care provider with ordering authority is not immediately available to provide the order, the nurse caring for the newborn infant at Quinte Healthcare may draw a blood specimen, complete laboratory testing, and initiate interventions as outlined in the associated clinical protocol.

Recipient Patients:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title:
----------------------------	--

For newborns admitted to QHC at risk for hypoglycemia or if the newborn is symptomatic for hypoglycemia, exhibiting jitteriness only.



Delegation and/or Medical Directive

Approving Physician(s)/ Authorizer(s):	Appendix Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Title: Appendix 1: Designated Physician Authorization Sheet
Ensure a signed copy of approvals is maintained with the Medical Directives on the unit, Medical Directive Manual (Patient Services), and Chief of Staff office.	

Authorized Implementers:	Appendix Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Appendix 2: Authorized Implementer Form Appendix 3: Self - Learning Package Appendix 4: Self Appraisal of Competency Statement for Authorized Staff
All QHC RN's, who have: <ol style="list-style-type: none"> Completed the Self-Learning Package and have reviewed the Medical Directive annually Completed the Self-Appraisal of Competency Statement form and submitted to the manager, clinical educator or designate 	

Indicators:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title:																																											
Newborns at Risk and Requiring Glucose Screening: <ul style="list-style-type: none"> ➤ Prematurity (less than 37 completed gestational weeks) ➤ Asymptomatic infants small for gestational age (SGA) less than 10% (see Table 1) ➤ Asymptomatic infants large for gestational age (LGA) greater than 90% (see Table 1) ➤ Infants of diabetic or gestational diabetic mothers ➤ Maternal use of labetalol during pregnancy 																																												
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="3">GESTATION (completed weeks)</th> <th colspan="4">BIRTHWEIGHTS (G)</th> </tr> <tr> <th colspan="2">10th PERCENTILE</th> <th colspan="2">90th PERCENTILE</th> </tr> <tr> <th>MALE</th> <th>FEMALE</th> <th>MALE</th> <th>FEMALE</th> </tr> </thead> <tbody> <tr> <td>37</td> <td>2552</td> <td>2452</td> <td>3665</td> <td>3543</td> </tr> <tr> <td>38</td> <td>2766</td> <td>2658</td> <td>3877</td> <td>3738</td> </tr> <tr> <td>39</td> <td>2942</td> <td>2825</td> <td>4049</td> <td>3895</td> </tr> <tr> <td>40</td> <td>3079</td> <td>2955</td> <td>4200</td> <td>4034</td> </tr> <tr> <td>41</td> <td>3179</td> <td>3051</td> <td>4328</td> <td>4154</td> </tr> <tr> <td>42</td> <td>3233</td> <td>3114</td> <td>4433</td> <td>4251</td> </tr> </tbody> </table>		GESTATION (completed weeks)	BIRTHWEIGHTS (G)				10 th PERCENTILE		90 th PERCENTILE		MALE	FEMALE	MALE	FEMALE	37	2552	2452	3665	3543	38	2766	2658	3877	3738	39	2942	2825	4049	3895	40	3079	2955	4200	4034	41	3179	3051	4328	4154	42	3233	3114	4433	4251
GESTATION (completed weeks)	BIRTHWEIGHTS (G)																																											
	10 th PERCENTILE		90 th PERCENTILE																																									
	MALE	FEMALE	MALE	FEMALE																																								
37	2552	2452	3665	3543																																								
38	2766	2658	3877	3738																																								
39	2942	2825	4049	3895																																								
40	3079	2955	4200	4034																																								
41	3179	3051	4328	4154																																								
42	3233	3114	4433	4251																																								
Newborns displaying jitteriness suggestive of hypoglycemia will also be screened as a part of this medical directive to ensure prompt treatment of hypoglycemia while waiting for a health care provider assessment.																																												



Delegation and/or Medical Directive

Contraindications:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title:
<ul style="list-style-type: none"> ➤ The newborn is unwell or displays clinical signs of hypoglycemia that are not jitteriness ➤ Parent/legal guardian refuses treatment ➤ Presence of a written order by a physician/health care provider with ordering authority, contravening the implementation of the order found in this medical directive. 	

Consent:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Title:
<p>The patient is registered at QHC as an inpatient. The patient or substitute decision maker has given a verbal consent for the implementation of the Medical Directive.</p>	

Guidelines for Implementing the Medical Directive:	Appendix Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Appendix 3: Self – Learning Package Appendix 5: Implementing a Medical Directive
<p>The authorized nurse at QHC must:</p> <ul style="list-style-type: none"> ➤ A patient-physician relationship will be established in the near future. ➤ Assess patient’s vital signs. ➤ Evaluate the patient’s symptoms (See Appendix 3 – “Self– Learning Package”). ➤ Ensure the patient has no contraindications for the implementation of the Medical Directive. 	

Documentation and Communication:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>Following QHC documentation policy and CNO standards, the nurse will document the appropriate assessments, treatments, and patient responses and outcomes, and ensure the medical directive order set is completed and placed on the patient’s chart.</p>	



Delegation and/or Medical Directive

Review and Quality Monitoring Guidelines	Appendix Attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Appendix 4: Self-Appraisal of Competency Statement for Authorized Staff
---	---

The Designated Instructor (Clinical Educator or designate) will supervise the clinical component every 2 years. Staff identifying any untoward or unintended outcomes arising from implementation of orders under this directive, or any issues identified with it will report these to the manager or clinical educator or designate as soon as possible for appropriate disposition. This does not include untoward or unintended outcomes or issues that are possible clinical sequelae regardless of whether a directive or direct order is used.

Administrative Approvals:	Appendix Attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
----------------------------------	--

Date of Maternal Child Advisory Committee Approval: September 2020

Date of MAC Approval: 2020

Ensure a signed copy of approval is maintained with the medical directive manual coordinator, and with the Chief of Staff office.

Chief of Staff	Chief Nursing Executive
Date	Date

References:

College of Nurses of Ontario (CNO). (2018, January). *Directives*. Retrieved from CNO:
http://www.cno.org/globalassets/docs/prac/41019_medicaldirectives.pdf
 The screening and management of newborns at risk for low blood glucose. (2019, December). *Paediatrics & Child Health*, 24(8), 536-544. Retrived from: <https://www.cps.ca/en/documents/position/newborns-at-risk-for-low-blood-glucose>

Appendices:

- Appendix 1: Designated Physician Authorization Sheet
- Appendix 2: Authorized Implementer Form
- Appendix 3: Self – Learning Package
- Appendix 4: Self Appraisal of Competency Statement for Authorized Staff
- Appendix 5: Implementing a Medical Directive



Appendix 6:
Appendix 7:

Delegation and/or Medical Directive

Neonatal Hypoglycemia Medical Directive Order Set

Prevention of Hypoglycemia in Newborn Inpatients Clinical Protocol