Nursing Care Plan for Hypoglycem	iaw. HursingE. N.
Patient Name:Age:	
Date of Admission:	
Diagnosis: Hypoglycemia Attending Nurse:	

## **Nursing Care Plan for Hypoglycemia PDF**

Assessment	Nursing Diagnosis	Goal/Expected Outcome	Intervention/Planning	Implementation	Rationale	Evaluation
Subjective	Risk for	Blood glucose	Assess blood glucose level	If conscious:-	- Immediate	- Blood glucose
Data:-	<b>Unstable Blood</b>	will return to ≥	immediately using a	Administer <b>oral</b>	glucose intake	increased to 110
III fool diam, and	Glucose Levels	100 mg/dL	glucometer.Administer 15g	glucose (juice,	restores blood	mg/dL
"I feel dizzy and	related to	within 15-30	of fast-acting carbohydrates	glucose tablets).If	sugar levels IV	Symptoms
weak."- "My	excessive insulin	minutes.The	(juice, glucose	unconscious:-	dextrose provides	resolved within
hands are	administration	patient will	tablets). Monitor vital signs	Administer <b>IV</b>	rapid correction	30 minutes
shaking."- "I	or inadequate	verbalize	and level of consciousness.	dextrose (D50W) or	in unconscious	Patient verbalizes
haven't eaten	food intake	symptom relief.		glucagon IM	patients	understanding of
since morning."				Recheck glucose	Frequent	hypoglycemia
Objective Data:-				after 15 minutes and	monitoring	management.
	110			repeat treatment if	prevents	
Blood glucose	2.			needed.		\displaystart \text{\tin}\text{\ti}\\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\texi\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex
level: 50 mg/dL-	0					

Cool, clammy skin- Increased heart rate (HR = 120 bpm)-Confusion and difficulty concentrating			my.		hypoglycemia recurrence.	
Subjective Data:-  "I keep experiencing low blood sugar at night."- "Sometimes I wake up feeling shaky."  Objective Data:- Irregular blood glucose levels throughout the day- Increased risk of nocturnal hypoglycemia	Ineffective Health Management related to lack of knowledge about diabetes self-care	Patient will demonstrate proper glucose self-monitoring techniques and dietary adjustments within one week.	Educate patient on the 'Rule of 15' for treating hypoglycemia. Encourage regular meals/snacks to prevent nocturnal hypoglycemia. Teach selfmonitoring of blood glucose before bedtime.	- Demonstrate correct glucose testing techniques Provide a structured meal plan and medication timing Encourage keeping a glucose source nearby at night.	- Knowledge of hypoglycemia prevention strategies reduces recurrence Proper meal planning ensures stable blood glucose levels Self-monitoring improves early detection and treatment.	- Patient demonstrates correct glucose monitoring No further episodes of nighttime hypoglycemia reported.

## **Patient and Family Education**

- 1. Recognizing Hypoglycemia Symptoms: Teach the patient and caregivers to identify signs like shakiness, sweating, dizziness, and confusion.
- 2. Emergency Treatment: Explain the Rule of 15 Consume 15g of carbs, wait 15 minutes, and recheck blood sugar.

- 3. Preventive Measures: Encourage regular meals, proper insulin dosing, and self-monitoring.
- 4. Carrying Emergency Glucose: Advise keeping glucose tablets or juice available at all times.
- 5. **Follow-Up Care:** Encourage routine **checkups with an endocrinologist** and consultation with a **dietitian**.

## **Interdisciplinary Collaboration**

- Physician/Endocrinologist: Adjust insulin or medication dosages.
- **Dietitian:** Create individualized meal plans to prevent hypoglycemia.
- Pharmacist: Educate about medication interactions and insulin administration.
- **Diabetes Educator:** Teach self-care strategies and lifestyle modifications.