HYPOGLYCEMIC EVENT ANALYSIS TOOL (HEAT)

Event Date and Time ________________ BG Level ____________ Investigating RN ________________

Calorie Intake at Time of Event: □ NPO □ PO □ Tube Feeding □ IV □ TPN with Insulin
□ Patient’s dietary status changed within 24 hours of event
□ Status change was discussed with the provider
□ Patient ate since last meal
   Amount of meal, prior to event, that was consumed ______% □ Unknown

Comments for Reviewer:

Drug Administration
□ Insulin order changed within 24 hours of event
   Time between insulin administration and the meal nearest to event:
   ______ minutes before meal or ______ minutes after meal

Place Patient Label Here

Prescriber Notification (Complete Shaded Section at Time of Event)
□ Documentation of prescriber notification of glucose trend before event (severe hypoglycemia)
□ Documentation of prescriber notification of severe hypoglycemia (blood glucose <54 at time of event)

Causative Factors - choose a maximum of 3 of the most important factors (definitions on back)
Prescribing Related (Dosing not in alignment with patient’s medical condition prior to event)
□ Home regimen continued as inpatient
□ Event while treating elevated potassium
□ Basal heavy regimen
□ High dose sliding scale insulin
□ Sulfonylurea-related hypoglycemia
□ Inpatient regimen not adjusted due to:
   □ Glucose trend not recognized
   □ Significant reduction in steroid dose
   □ Decreased nutritional intake
□ Event related to outpatient or emergency department drug administration

Process Related
□ Insulin administration and food intake not synchronized
□ POC glucose reading not linked to insulin administration
□ POC glucose reading not synchronized with food intake

Administration Related
□ Wrong drug, dose, route, patient, or time
□ Insulin stacking

Monitoring Related
□ Insufficient glucose monitoring

Invalid Alert
□ Erroneous lab value

Was the MD notified of the findings?
□ Yes □ Not available for discussion

Was the RN notified of the findings?
□ Yes □ Not available for discussion

Contributing and Other Factors
□ Diabetic agents received prior to admission
   Diabetes Type:
   □ Type I
   □ Type II
   □ Gestational

Home Diabetic Regimen
□ Insulin
□ Oral agent
**Definition for Causative Factors:**

1. **Basal Heavy Regimen** – Greater than 0.5 Units/KG of basal insulin without any or minimal mealtime insulin OR > 0.3 Units/Kg basal insulin without any or minimal mealtime insulin in patients with renal impairment (CrCl<30 mL/min).
2. **High Dose SSI** – Event due to “high” dose SSI being ordered.
3. **Insulin Stacking** – Rapid acting insulin administered and repeated within 3 hours (or less) OR Regular insulin administered and repeated within 4 hours (or less) resulting in hypoglycemia.
4. **Sulfonylurea-related hypoglycemia** – Sulfonylurea primary cause of or contributed to the event. *Mark especially if sulfonylurea alert fired.*
5. **Event Related to Outpatient or Emergency Department drug administration** - Medication given in ED or prior to admission and is the proximate cause of inpatient hypoglycemia.
6. **Insufficient glucose monitoring** - Improper time gap of ordering or drawing of glucose levels.
7. **Glucose Trend not recognized** - BG level <100 and/or significant change in BG levels where current insulin regimen poses a patient safety risk.
8. **Significant change reduction in steroid dose** - Steroid tapered or discontinued without change in insulin requirements.
9. **Decreased nutritional intake** - Event secondary to lack of insulin adjustment in patient with poor food intake, other enteral nutrition, or NPO.

**TIMELINE:** Start with event and complete for up to 24 hrs. prior to event

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<th>POC/Venous</th>
<th>Scheduled Time</th>
<th>Admin Time</th>
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**Optional Narrative:**

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BJC HealthCare 2014 St. Louis, Missouri

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