

## Continuous Glucose Monitoring (CGM) in People with Diabetes in the Inpatient Setting – Flowchart

Person with diabetes with continuous glucose monitoring (CGM) presents for hospital

### Nurse or midwife to:

- > discuss with person with diabetes (and/or their carer) their preference in continuing CGM in the inpatient setting.
- > [assess the person's individual competency to self-manage CGM in the inpatient setting.](#)
- > [identify any absolute contraindications for use of CGM in the inpatient setting.](#)
- > consult with admitting medical officer and discuss the persons' (and/or carer) preferences, competency assessment outcome and proposed diabetes management in the inpatient setting.
- > initiate referral to diabetes specialist nurse and/or dietitian (if required).

### If no contraindications are identified

#### Medical practitioner to:

- > explain inpatient management which supports the maintenance of CGM.
- > identify limitations of CGM and requirement of capillary blood glucose monitoring with the hospital blood glucose meter.

#### Nurse or midwife to:

- > reinforce inpatient management which supports the maintenance of CGM.
- > reiterate limitations of CGM and requirement of capillary blood glucose monitoring with the hospital blood glucose meter.
- > monitor blood glucose (BG) and blood ketone as per the regional LHN:
  - > IV Insulin Infusion Chart Type 1 Diabetes Chart (MR-INF-A)  
OR
  - > Hyperglycaemia Protocol and Basal Bolus Chart (MR62A)  
OR
  - > Blood Glucose and Blood Ketone Monitoring Chart (MR59H)
- > take action in accordance with the Rapid Detection and Response Instructions.

#### Person with diabetes and/or carers to:

- > [inform staff immediately of hypoglycaemia or hyperglycaemic events, alerts, alarms or CGM failure.](#)

***If the above conditions cannot be met, CGM should be discontinued, until the person and/or carer can resume their responsibilities.***

### If **contraindications** are identified

#### Medical practitioner to:

- > explain contraindication/s, limitations of CGM and requirement of capillary blood glucose monitoring with the hospital blood glucose meter.

#### Nurse or midwife to:

- > reiterate limitations of CGM and requirement of capillary blood glucose monitoring with the hospital blood glucose meter.
- > monitor blood glucose (BG) and blood ketone as per the regional LHN:
  - > IV Insulin Infusion Chart Type 1 Diabetes Chart (MR-INF-A)  
OR
  - > Hyperglycaemia Protocol and Basal Bolus Chart (MR62A)  
OR
  - > Blood Glucose and Blood Ketone Monitoring Chart (MR59H)
- > take action in accordance with the Rapid Detection and Response Instructions.
- > store CGM in a secure location.

### Recommencement of CGM

#### Medical practitioner to:

- > review previously identified contraindications and determine return to CGM.
- > consider consultation with diabetes specialist and/or diabetes specialist nurse).

#### Nurse or midwife to:

- > confirm the person and/or carer to ready to resume their CGM responsibilities.
- > confirm the person and/or carer is confident that they can continue their CGM responsibilities on discharge and if not, discuss concerns with medical practitioner and/or diabetes specialist nurse.

### Discharge

#### Medical practitioner to:

- > discuss discharge plan including referrals (e.g. diabetes specialist, diabetes specialist nurse and/or dietitian) and recommendations for diabetes management with CGM.

#### Nurse or midwife to:

- > confirm discharge plan including referrals (e.g. diabetes specialist, diabetes specialist nurse and/or dietitian) and recommendations for diabetes management with CGM.