

**Illinois EMSC  
Pediatric DKA (Abbreviated)  
Data Dictionary  
Confidential – for QI purposes only**

**AIM Statement:**

To provide safe and effective care for pediatric patients ( $0 \leq 15$  years) presenting to the Emergency Department in DKA (known DM or new onset) as evidenced by:

- Appropriate Assessment
- Appropriate Management
- Appropriate Disposition

**REVIEW THE PATIENT'S ENTIRE ED MEDICAL RECORD TO COLLECT THE NECESSARY DATA (i.e., BOTH MD AND RN NOTES)**

**Inclusion Criteria:**

Each patient must meet the following inclusion criteria:

1. Age: 1 day through 15 years of age
2. Presenting Complaint – signs/symptoms of DKA **OR**
3. Discharge Diagnosis of DKA (either new onset or known DM patient)
  - Criteria: Blood glucose  $> 200$  mg/dL *and* Venous pH  $< 7.30$  *and* Moderate or large ketonuria or ketonemia (blood  $\beta$ -hydroxybutyrate  $> 3$  mmol/L)
  - Suggested ICD9 Codes:
    - 250.1 – 250.13 (Diabetes with ketoacidosis)
    - 250.3 – 250.33 (Diabetes with other coma)
    - 250.9 – 250.93 (Diabetes with unspecified complication)
    - 790.6 (hyperglycemia NOS)
    - 790.29 (Other abnormal glucose)
  - Other suggested methods to find appropriate patients:
    - Patients who were transferred
    - Patients who had IV insulin orders
    - Patients with “abnormal lab values”
    - Patients with elevated blood glucose levels
    - Patients with presenting complaint of nausea and vomiting

**Answer the questions using the following acronyms (unless otherwise directed):**

Y = Yes

N = No

N/A = Not Applicable

**Initial ED Assessment:**

1. Age of patient (in months or years)
2. Did the child have NEW ONSET Diabetes Mellitus?
3. Was a point-of-care testing (POCT) blood glucose level obtained within 15 minutes of patient assessment in triage? *Choose N/A if blood glucose level was already obtained by a prehospital provider.*
4. Was the neurologic status assessed appropriately (e.g., AVPU, GCS)?
5. If currently using an insulin pump, was the patient's pump stopped or disconnected in the ED? *Choose N/A if patient was not on a pump.*
  - Yes (**answer Q.5a**)
  - No (**skip to Q.6**)

5a. Was the pump stopped or disconnected *after the patient was switched to an alternate insulin source?*

**ED Management: (ADA Guideline recommendations are noted in the parentheses)**

6. Did the patient receive an initial IV fluid bolus within the first hour of treatment (10 - 20 mL/Kg bolus of 0.9% NS over hour)?
7. Was a cardiac monitor applied?
8. Were vital signs checked every hour (minimally include: HR, RR, BP, Oxygen saturation)?
9. Was POCT blood glucose level checked every one (1) hour?
10. Was neurologic status assessed every one (1) hour? (e.g., AVPU, GCS)
11. After initial IV fluid bolus, was IV insulin infusion/drip given (0.1unit/Kg/hour)?  
*Choose N/A if patient was already discharged/transferred.*

**Disposition/Discharge:**

12. Were vital signs reassessed before disposition (minimally include: HR, RR, BP, Oxygen saturation)?
13. Was POCT blood glucose level reassessed before disposition?
14. Was neurologic status reassessed before disposition (e.g., AVPU, GCS)?

15. What was the child's disposition from the ED?

- Transferred (T) = transferred to a higher level of care (**answer Q.15a**)
- PICU Admission (P) = admitted to PICU/ICU (*in same hospital*)
- Intermediate Care Admission (I) = admitted to an intermediate care bed (*in same hospital*)
- General Admission (F) = admitted to a general care floor (*in same hospital*)
- Observed (O) = admitted to an observation unit/general floor and/or observed in the ED for  $\leq 23$  hours (*in same hospital*)
- Home (H) = discharged home after a brief period of observation ( $\leq 6$  hours)
- Expired (E) = expired in the ED

15a. If transferred, what level/type of patient transport service was used?

- Speciality/Transport Team (S)
- ALS/ILS (A)
- ALS/ILS (with nurse) (A/n)
- BLS (B)
- BLS (with nurse) (B/n)
- Private vehicle (PV)