

Supplemental Insulin - Prescribing Guideline

This is a guide and does not substitute for clinical judgement – consider each individual patient situation

Aim: To minimise hyperglycaemia by proactively adjusting usual insulin.

How:

- 1. Prescribe** supplemental insulin for all patients (NovoRAPID®, or usual bolus insulin preparation) at meal-times 07:00, 12:00, 17:00, or if NBM prescribe 6 hourly. **NOTE:** more frequent administration risks hypoglycaemia.
- Administer supplemental insulin as prescribed **in addition** to usual insulin doses.
- Each day **ADD UP** all supplemental doses given in previous 24 hours, **then either:**
 - If not usually on insulin: Divide total daily supplemental dose by 2 and prescribe as Protaphane twice daily.
 - If usually on insulin: Add total daily supplemental dose to basal or premix insulin shared over the dose/s for the next 24 hours

Dose: Determined by blood glucose level and patient's insulin sensitivity (*see table below*).

For **insulin profiles action chart** (approximate onset, peak and duration of insulin preparations) [click here](#).

BGL (mmol/L)	Dose of supplemental insulin – tds pre meals		
	Insulin sensitive or NBM e.g. underweight, elderly haemodialysis	Standard	Insulin-resistant e.g. obese on >100 units /day
8.1 - 10	0 units	2 units	4 units
10.1 - 12	2 units	4 units	6 units
12.1 - 16	4 units	6 units	8 units
16.1 - 20	6 units	8 units	12 units
>20	8 units	12 units	16 units