Click on Orders in Navigation bar and you will be launched to Current Orders screen.

Return To Home	Chart	Document	Orders	& Discharge				/ Sign
<ul><li>Orders</li></ul>							SUBMIT	0
CURRENT	ENTER		REG	CONCILE			TRANSFER	
	Add New							
Favorites           Orders         Sets           Search All					F	ilter: All	▼ Pt.Age ✓	Wt.
📝 > Laboratory								
R > Medications								
📩 🗸 Order Sets								
OBS Triage Labour & Delivery								<u>↔</u>

• Click on Enter tab to enter new Insulin Order and then search by typing Insulin or the name of the Insulin e.g. Aspart, Glargine, etc.

E Return To	<b>☆</b> Home					Chart	Document	Orders	Lischarge	
• Ord	ers									
	CURRENT	r	-		ENTER			RE	CONCILE	
					Add	New		Process Ord	ers	
Favorites	▼ Orde	ers Sets	ins	ul						
<u></u> <b>⊖</b> ≡ >	insulin (r	egular) infu	sion -	Paediatric	IV					
<u>R</u> ⊕≡ >	insulin (r	egular) infu	sion 1	L unit/mL I	v					
<u></u> ⊖≡ >	insulin as	spart SUB	UT							
<u>R</u> ⊕≡ >	insulin as	spart/protar	nine 3	30/70 SUBC	UT					
<u>R</u> <b>○</b> ≡ >	insulin de	egludec St	JBCUT	r						
<u>R</u> <b>O</b> ∃ >	insulin de	etemir SU	всит							
<u>R</u> ⊕≡ >	insulin gl	argine SU	всит							

• Select the desired Insulin and the frequency that you will like to order

R       OΞ > insulin (regular) infusion 1 unit/mL	
B SI SUBCUT SUBCUT	
✓ insulin aspart [NovoRapid FlexTouch]	
DOSE unit SUBCUT TIDAC SCH	
✓ insulin aspart [Novorapid]	
DOSE unit SUBCUT TIDAC SCH	
DOSE unit SUBCUT TIDAC SCH	
R         G≡ > insulin aspart/protamine 30/70         SUBCUT	
Image: Register of the second sec	

• Expand the order string by clicking on

R <sub>x</sub>	Ø∃ > insulin aspart SUBCUT				
	∨ insulin aspart [NovoRapid Fl	exTouch]			
1	<ul> <li>insulin aspart [NovoRapid F</li> <li>*DOSE unit SUBCUT TIDAC SC</li> </ul>	lexTouch] н 🔳	<mark>1st</mark> 22/04/2021 16:30	* New	☆
	Label Comments				
	Dose Instruction			•	
	$\checkmark$				

• Required fields will be highlighted in red and marked with an asterisk (\*) which is Dose in this case

D≡ > insulir	n aspart SUBCUT			
<ul> <li>insulin as</li> </ul>	part [NovoRapid FlexTouch]			
<ul> <li>insulin a</li> <li>*DOSE unit</li> </ul>	spart [NovoRapid FlexTouch] : SUBCUT TIDAC SCH 📓		1st         22/04/2021 16:30         STOP DATE         * New	
*Dose			*Start Date Today	•
Units	unit		*Start Time 16:30	•
*Route	SUBCUT	•	Stop Date	•
*Freq	TIDAC	•	Stop Time	
*Sch	SCH	•	Days	
Monograph	View		Total Doses	
ŧ	Additional Admin		Notify Add/View	

• If Physician chooses to enter a scheduled dose, then the number of units can be entered in Give (units) section, for each mmol blood glucose.

j≣ > insulin aspart SUBCU	
Label Comments	
Dose Instruction	· · ·
Special Instructions	
Protocol	insulin sliding scale
Protocol Fill in the fields based on the form Give units every X hours (de	insulin sliding scale
Protocol Fill in the fields based on the form Give units every X hours (de "Give (units)	insulin sliding scale
Protocol Fill in the fields based on the form Give units every X hours (de *Give (units) *for each (mmol blood glucose)	insulin sliding scale
Protocol Fill in the fields based on the form Give units every X hours (de *Give (units) *for each (mmol blood glucose) *over (mmol)	insulin sliding scale

• Once you have edited your order you can review it by clicking on the submit button, then confirm your entry with your PIN.

SAVE	1
Enter PIN	

• To Order IV Insulin or Insulin drip. Select IV Insulin Order set with reminders and reference links.

CURRENT -	ENTER	RECONCILE	TRANSFER
	Add New	Process Orders	
Favorites 💌 Orders Sets 💌 insuli	n		Filter: All 🔻 Pt.Age 🗸
🌠 🕽 🕻 Anti Insulin Antibodies			
🗖 🗗 🗸 CRIT IV insulin 된 💽			Clear All Deselect
This order set is not intended for patien	ts with diabetic ketoacidosis or hyperglycen	nic hyperosmolar non-ketotic state, o	r as a therapy for hyperkalaemia.
✓ Reminders			
Diabetes Canada Clinical Practice Guide	line: In-Hospital Management of Diabetes (	click on link).	
Please review the patient's diet and ens	ure they are on a diabetic option.		
✓ Patient Care			
✓ POC Capillary Blood Glucose			
Q1HRX1,Q2HR	New	22/04/2021 12	:30
✓ IV Solutions			
Insulin dependant diabetics are unable	to move glucose into the cells without the a	dministration of insulin. Administratio	on of dextrose without insulin can induce D
Patients on IV insulin should be on a sir	nultaneously administered IV solution conta	ining glucose for safety while NPO or	not receiving enteral feeds or TPN.
✓ D5W + NS			
dextrose 5% and NaCl 0.9% [D5W+Na	Cl 0.9%] 1,000 ml		
75 mls/hr IV CONTINUOUS SCH			
✓ D5W + NS with KCl 20 mmol/L	-		
KCI 20 mmol in D5W & NaCI 0.9% [KCI	20 mmol/L in D5W & NaCl 0.9%] 1,000 ml		
75 mls/hr IV CONTINUOUS SCH			
✓ D5W + NS with KCl 40 mmol/L	-		
KCI 40 mmol in D5W & NaCl 0.9% [KCl	40 mmol/L in D5W & NaCl 0.9%] 1,000 ml		

Click on the Protocol to view and select the Protocol

CURRENT -	ENTER	RECONCILE		TRANSFER
	Add New	Process Orders	·	
rites 💌 Orders Sets 💌 insulin			Filter: All	▼ Pt.Age ✓ Wt.
🖻 🗸 CRIT IV insulin 된 💽			Clear All	Deselect 🔶 ★
✓ IV Solutions				
75 mls/hr IV CONTINUOUS SCH				
✓ D5W + NS with KCl 40 mmol/L				
KCl 40 mmol in D5W & NaCl 0.9% [KCl 40 m	mol/L in D5W & NaCl 0.9%] 1,000 m	I		
75 mls/hr IV CONTINUOUS SCH				
> Medications				
∨ insulin (regular) infusion 1 unit/mL				
	R ; NovoLIN ge Toronto]	22/04/2021 12:30		New
<ul> <li>Protocol Hypoglycemia Managemen</li> </ul>	t			
As Per Protocol	New	22/04/2021 12	:30	
Reflexed Orders from Protocol Hyport (Hypoglycemia Management)	oglycemia Management (CRIT I	V insulin) 🖸 🚺		Deselect
➤ Notify MRP if Blood Glucose is				
Once				~

CURI	RENT		-		ENTER		RECONCIL				eLea	2
		Edit	Pro	tocol						Can	cel Save	F C
Favorites 👻	Orders	> insulir	n huma	n regular [I	HumuLIN R ; NovoL	IN ge Toron	to] 100 unit IV TITR					RE
🛅 ⊕≣ ∨ CRIT	T IV ins	Start: 2	2/04/20	021 12:30	Stop:							
V IV Solu	tions		*Titr	ation Proto	col	insulin infus	sion non DKA			-		
75 mls/ł	hr IV CON					insulin infu insulin infu	ision A ision B					1
∨ D5W +	NS with				Condition	insulin infu	sion non DKA		Instruction			
🔽 KCI 40	mmol i				PERFUSION INITIA	Search All	Protocols Q					
0.9%]					Initial Blood Gluco	se (BG)	Infusion starting rate	First blood glue	cose			
IV CONTIN	NUOUS 7				10.1 - 13		= 1 unit/hour	1 hour after in	fusion start			
Label Comm	nents				13.1 - 16		= 2 units/hour					
	_				16.1 - 20		= 3 units/hour					tra
> Medicat	tions							][				ror
✓ insulin	(regular				IF THE CURRENT E	G IS:	HIGHER THAN PREVIOUS L	LOWER THAN F	PREVIOUS LEVEL BY LESS T			
🔽 > insul	in huma											
100 unit	IV TITR				Current Blood Gl	ucose (B	Rate Adjustment	Next Point of	Care Testing			
Label Comn	nents				4 and under		Hold Infusion; Treat as per	xxxxxxxxxxx	x			
							Resume infusion at 50% of					
> Protoco	Hypog						BG greater than 10 mmol/L					m
🔽 As Per	Protocol				4.1 - 7.9		Reduce rate by 1 unit/hour	Repeat BG in 2	hours			
					8 - 10		Target (no change in rate)	Repeat BG in 4	hours			
✓ Reflexe	d Orders				10.1 - 12		Increase rate 0.5 unit/hour	Repeat BG in 2	hours			
✓ Hypoglyce	emia Man				12.1 - 15		Increase 1 unit/hour	Repeat BG in 2	hours		•	

• Once you have edited your order you can review it by clicking on the submit button, then confirm your entry with your PIN.

	SAVE	1
Enter PIN	1	