

Diabetes Case Studies
Post Partum
Higher Risk

Patient	Janine is a 32 year old with Type 1 DM, poorly controlled with NPH and Lispro. Last weight at the doctor's office was 295# a week ago. She delivered yesterday after an oxytocin induction for rising blood pressures.
Current Pregnancy	G 2 P 2 at 37 weeks
History of Present Illness	<ul style="list-style-type: none"> • Proteinuria of 2+ and 3+ protein during antenatal visits • Polyhydramnios
Current pertinent medications	<p>Patient's insulin doses have been changed since delivery. The doctor has ordered the following Insulin doses:</p> <ul style="list-style-type: none"> ○ Before breakfast – 10 units Lispro, 20 units NPH ○ Before lunch – 10 units Lispro ○ Before bed – 8 units NPH
Vital signs	<p>Time: 0800</p> <ul style="list-style-type: none"> • T 37 C • HR 83 • RR 16 • BP 134/85
CBG	Fasting CBG this morning is 140
Nursing care	<ul style="list-style-type: none"> • Goal: Maintain blood sugar between 70-120 mg/dL
<p>a) What are your priorities for care?</p> <ul style="list-style-type: none"> • Stabilize blood sugar. <p>b) What is your plan for next steps in care?</p> <ul style="list-style-type: none"> • Administer Lispro and NPH <p>e) What findings or changes would make your worry?</p> <ul style="list-style-type: none"> • Report of feeling sweaty, anxious, especially with breastfeeding • Why? Breastfeeding can reduce a patient's blood sugar levels. Combined with the insulin injection and the recent delivery, her blood sugar might drop lower than expected. <p>f) What findings would make you call the provider immediately?</p> <ul style="list-style-type: none"> • Blood sugar less than 70 – initiate hypoglycemia treatment 	
Newborn Care	<ul style="list-style-type: none"> • Continue hypoglycemia protocol