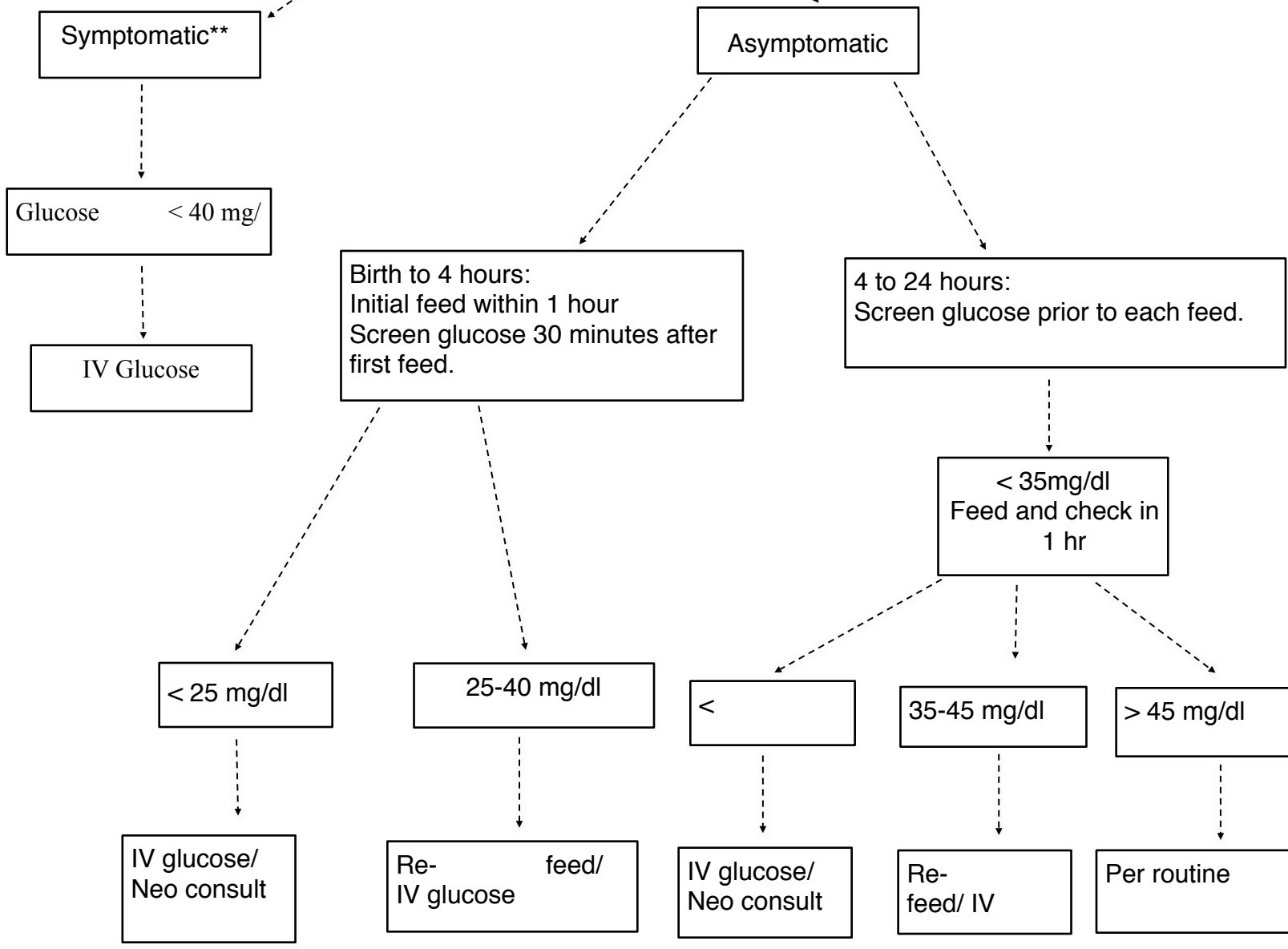


Glucose Management in Late Preterm (34-36 wks) and Term SGA, IDM, LGA infants



*****Symptomatic:**
 Jitteriness, tachypnea, irritability, Tremors, exaggerated Moro reflex, High-pitched cry, Seizures, Lethargy, Floppiness, Cyanosis, Apnea, Poor feeding

IV glucose (D10%)
 Bolus = 2ml/kg
 Maintenance = 60-80 ml/kg/d

- At risk infants should be fed by 1 hour of life and screened 30 minutes later.
- IDM and LGA infants should be screened until 12 hrs of age.
- LPT and SGA infants should be fed every 2-3 hrs and screened before each feed for the first 24 hours.
- After 24 hours, if plasma glucose remains < 45 mg/dl, screening should continue until the infant can maintain normal plasma glucose concentrations through 3 feed-fast periods.
- Glucometer values less than 40 should be verified by a whole blood sample. Treatment should not be delayed while waiting for the whole blood value.