

HYPOGLYCEMIC EVENT ANALYSIS TOOL (HEAT)

Not Part of Medical Record

Event Date and Time _____ BG Level _____ Investigating RN _____

Calorie Intake at Time of Event: ☐ NPO ☐ PO ☐ Tube Feeding ☐ IV ☐ TPN with Insulin

☐ Patient's dietary status changed within 24 hours of event

☐ Status change was discussed with the provider

☐ Patient ate since last meal

Amount of meal, prior to event, that was consumed _____% ☐ Unknown

Comments for Reviewer:

Drug Administration

☐ Insulin order changed within 24 hours of event

Time between insulin administration and the meal nearest to event:

_____ minutes before meal or _____ minutes after meal

Place Patient Label Here

Name

DOB

ID#

Room #

RECOMMENDATION for an intervention to prevent a similar future event:

Prescriber Notification (Complete Shaded Section at Time of Event)

- ☐ Documentation of prescriber notification of glucose trend before event (severe hypoglycemia)
- ☐ Documentation of prescriber notification of severe hypoglycemia (blood glucose < 40) at time of event

Causative Factors - choose a maximum of 3 of the most important factors (definitions on back)

Prescribing Related (Dosing not in alignment with patient's medical condition prior to event)

- ☐ Home regimen continued as inpatient
- ☐ Event while treating elevated potassium
- ☐ Basal heavy regimen
- ☐ High dose sliding scale insulin
- ☐ Sulfonylurea-related hypoglycemia
- ☐ Inpatient regimen not adjusted due to:
 - ☐ Glucose trend not recognized
 - ☐ Significant reduction in steroid dose
 - ☐ Decreased nutritional intake
- ☐ Event related to outpatient or emergency department drug administration

Process Related

- ☐ Insulin administration and food intake not synchronized
- ☐ POC glucose reading not linked to insulin administration
- ☐ POC glucose reading not synchronized with food intake

Administration Related

- ☐ Wrong drug, dose, route, patient, or time
- ☐ Insulin stacking

Monitoring Related

- ☐ Insufficient glucose monitoring

Invalid Alert

- ☐ Erroneous lab value

Was the MD notified of the findings?

- ☐ Yes
- ☐ Not available for discussion

Contributing and Other Factors

- ☐ Diabetic agents received prior to admission

Diabetes Type:

- ☐ Type I
- ☐ Type II
- ☐ Gestational

Home Diabetic Regimen

- ☐ Insulin
- ☐ Oral agent

Was the RN notified of the findings?

- ☐ Yes
- ☐ Not available for discussion

Definition for Causative Factors:

1. **Basal Heavy Regimen** – Greater than 0.5 Units/KG of basal insulin without any or minimal mealtime insulin OR > 0.3 Units/Kg basal insulin without any or minimal mealtime insulin in patients with renal impairment (CrCl<30 mL/min).
2. **High Dose SSI** –Event due to “high” dose SSI being ordered.
3. **Insulin Stacking** – Rapid acting insulin administered and repeated within 3 hours (or less) OR Regular insulin administered and repeated within 4 hours (or less) resulting in hypoglycemia.
4. **Sulfonylurea-related hypoglycemia** – Sulfonylurea primary cause of or contributed to the event. *Mark especially if sulfonylurea alert fired.*
5. **Event Related to Outpatient or Emergency Department drug administration-** Medication given in ED or prior to admission and is the proximate cause of inpatient hypoglycemia.
6. **Insufficient glucose monitoring-** Improper time gap of ordering or drawing of glucose levels.
7. **Glucose Trend not recognized-** BG level <90 and/or significant change in BG levels where current insulin regimen poses a patient safety risk.
8. **Significant change reduction in steroid dose-** Steroid tapered or discontinued without change in insulin requirements.
9. **Decreased nutritional intake-** Event secondary to lack of insulin adjustment in patient with poor food intake, other enteral nutrition, or NPO.

TIMELINE: Start with event and complete for up to 24 hrs. prior to event

Date/time	POC /Venous	Scheduled Time	Admin Time	Agent	Dose ordered	Dose Admin	Correctional?	Notes
	(Event)						Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	
							Yes / No	

Optional Narrative:
