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Gimme Some Sugar!

When we encounter a patient with diabetes, we most often associate intravenous dextrose, or a tall glass of orange juice spiked with 3 teaspoons of sugar with our first line treatment, followed by an RMA. While this methodology can be an appropriate course of treatment, it is important for EMT's and paramedics to be familiar with the pancreatic physiology that accompanies a patient's condition, and the causes of hypoglycemia, and the lesser of the two conditions, hyperglycemia.

Brandon began his emergency medical services career in October, 1993. He has been a New York State instructor since 2006. He is a paramedic, credentialed in the Hudson Valley, Westchester region and nationally. Brandon's pre-hospital experience includes urban, rural, and suburban areas. Brandon is licensed to teach PALS and ACLS, and is adjunct faculty at Rockland Community College. His current employers include emergency psychiatry, Englewood Hospital EMS and Care One EMS of Fishkill.

After attending this session, the learner will be able to:

1. Identify the similarities and differences between hypoglycemia and hyperglycemia.
2. Increase physiological knowledge about disease processes associated with diabetes.
3. Track the course of a food product from point of consumption to point of excretion.

Outline:

- Clearly identify the differences between hyperglycemia and hypoglycemia.
- Identify the cause of a rapid onset with regard to hypoglycemia.
- Identify the prolonged response with regard to hyperglycemia.
- Discuss the islets of langerhans.
- Discuss the differences between polyuria and dysuria
- Review the neurological effects of diabetic emergencies
- Pharmacologic review
- BLS before ALS
- Do's and don'ts of IV therapy