# Drug Therapy Protocols: Glucose gel

<table>
<thead>
<tr>
<th><strong>Policy code</strong></th>
<th>DTP.GLG.0519</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date</strong></td>
<td>May, 2019</td>
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<tr>
<td><strong>Purpose</strong></td>
<td>To ensure a consistent procedural approach to glucose gel administration.</td>
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<td><strong>Scope</strong></td>
<td>Applies to all Queensland Ambulance Service (QAS) clinical staff.</td>
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<td><strong>Health care setting</strong></td>
<td>Pre-hospital assessment and treatment.</td>
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<tr>
<td><strong>Population</strong></td>
<td>Applies to all ages unless specifically mentioned.</td>
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<tr>
<td><strong>Source of funding</strong></td>
<td>Internal – 100%</td>
</tr>
<tr>
<td><strong>Author</strong></td>
<td>Clinical Quality &amp; Patient Safety Unit, QAS</td>
</tr>
<tr>
<td><strong>Review date</strong></td>
<td>May, 2022</td>
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**Glucose gel**

**Drug class**
Hyperglycaemic

**Pharmacology**
Glucose gel is a form of pure glucose that is absorbed quickly in the intestinal tract after ingestion. It is the principal energy source for body cells especially the brain.\(^1\,^2\)

**Metabolism**
Glucose is broken down in most tissues and distributed throughout total body water.\(^1\)

### Indications
- Symptomatic hypoglycaemia (with the ability to self-administer oral glucose)

### Contraindications
- Unconsciousness
- Patients with difficulty swallowing
- Patients < 2 years

### Precautions
- Nil

### Side effects
- Nausea and/or vomiting
- Diarrhoea

### Presentation
- Tube, 15 g glucose (Glutose 15\textsuperscript{TM})

### Onset
\(\approx\) 10 minutes

### Duration
Variable

### Half-life
Not applicable

### Schedule
- Unscheduled.

### Routes of administration
- Per oral (PO)

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**Figure 4.16**

ACP1
ACP2
CCP
AT
P
ACP1
ACP2
CCP

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QUEENSLAND AMBULANCE SERVICE 902

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\(^1\) Reference.

\(^2\) Reference.
Adult dosages

Symptomatic hypoglycaemia (with the ability to self-administer oral glucose)

<table>
<thead>
<tr>
<th>FR</th>
<th>EPTO</th>
<th>AT</th>
<th>ACP1</th>
<th>ACP2</th>
<th>CCP</th>
<th>PO</th>
<th>15 g</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Repeated once at 15 minutes if BGL ≤ 4.0 mmol/L. Total maximum dose 30 g.</td>
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</tbody>
</table>

Paediatric dosages

Symptomatic hypoglycaemia (with the ability to self-administer oral glucose)

<table>
<thead>
<tr>
<th>FR</th>
<th>EPTO</th>
<th>AT</th>
<th>ACP1</th>
<th>ACP2</th>
<th>CCP</th>
<th>PO</th>
<th>≥ 2 years – 15 g</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Repeated once at 15 minutes if BGL ≤ 4.0 mmol/L. Total maximum dose 30 g.</td>
</tr>
</tbody>
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Special notes

- Ambulance officers must only administer medications for the listed indications and dosing range. Any consideration for treatment outside the listed scope of practice requires mandatory approval via the QAS Clinical Consult and Advice Line.
- Patients are to swallow the entire contents of the tube where possible, to maximise the rise in blood glucose levels.