Hypoglycemia < 50 mg/dL is confirmed

Treat with oral feeds and/or IV glucose to keep glucose > 70 mg/dL

Treat with oral feeds and/or IV glucose to keep glucose > 70 mg/dL. Wean off IV if possible.
If glucose < 50 mg/dL after 48-72 hours of life, determine etiology of hypoglycemia
(measure plasma glucose, insulin, lactate, betahydroxybutyrate, growth hormone
and cortisol levels and perform glucagon stimulation test).

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Diagnose with hyperinsulinism

↓

Treat with diazoxide 5-15 mg/kg/day and evaluate after five days.
Monitor for pulmonary hypertension, fluid overload, neutropenia and thrombocytopenia.

↓

Patient responds;
ability to fast 9 hrs
with glucose > 60 mg/dL

↓

Send home and request follow-up with local endocrinologist.

Patient doesn't respond

↓

Persistent hypoglycemia

↓

1. Refer to Cook Children's Hyperinsulinism Center for 18F DOPA PET study. **cookchildrens.org/professionals**
2. Send DNA for hyperinsulinism gene screen on patient and parents. If possible, use a lab with a turnaround time of less than 7 days.

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Diagnosis: Diffuse hyperinsulinism
Surgery or conservative
Average length of stay: 26 days

Diagnosis: Focal hyperinsulinism
Surgery and potential cure
Average length of stay: 20 days

Cook Direct Connect

682-885-1940

To better serve our treating clinicians, we can assist you with:

- Non-emergent transfer requests
- Direct admissions
- Specialist consultations

cookchildrens.org/professionals

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CookChildren's.

4/21*