Reduce the Incidence of Hypoglycemia and Hyperglycemia with the help of Glytec’s eGMS®

Dips and spikes in patient blood glucose can prolong recovery and lead to dangerous complications. Unfortunately, many healthcare providers and hospital leaders accept high rates of hypo- and hyperglycemia as normal.

They don’t have to be. Poor glycemic management is typically driven by three factors:

- Reliance on sliding-scale insulin therapy (which is outdated and ineffective¹)
- Poor administration and avoidable errors²
- Lack of visibility into glycemic management performance³

By replacing outdated¹ and dangerous paper protocols¹, creating workflows that decrease errors⁴ and improve administration and providing data concerning glycemic management performance, Glytec’s FDA-cleared eGlycemic Management System can reliably and consistently reduce the incidence of hypo- and hyperglycemia in your healthcare system⁵.

How eGMS reduces the incidence of hypo-and hyperglycemia

- **EMR integration** reduces risk of transcription errors, stacked doses and other mistakes.
- Specific patient, unit-wide and organizational glycemic management data **improves accountability** and helps hospitals work toward better results.

Our **FDA-cleared algorithm** delivers more personalized and accurate dosing recommendations compared to paper protocols.

- eGMS uses reminders to **increase timeliness** of BG checks by providers and improve care.
- The GlucoSurveillance module of eGMS **identifies patients at risk** due to persistent hyperglycemia and notifies staff.
- The **Glucose Velocity Warning** alerts nurses about sudden drops in patient blood sugar.
Hypo- and hyperglycemia aren’t just bad for patients

Uncontrolled blood glucose is bad for patients, causing complications that can include confusion, seizures, coma and death.

But zoom out and you’ll see that it’s not just individual patients who pay for poor glycemic management. Both hypoglycemia and hyperglycemia are correlated with increases in length of stay, cost of care and readmissions.⁶

In addition, the Centers for Medicare & Medicaid Services (CMS) classifies patient death or serious disability associated with hypoglycemia as a “never event,”⁷ and has proposed a measure for hypoglycemia which is currently going through the approval process.⁸

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**The bottom line:** glycemic management issues have ripple effects throughout the hospital, and resolving these issues can help stakeholders achieve broad quality, safety and financial goals.
Real results from real hospitals

**Grady Hospital**
Atlanta, GA  |  640 beds

Comparing Glucommander IV to usual care in the treatment of 2,897 patients in their ICUs and step-down units, Grady Hospital saw reduced rates of severe hypoglycemia (BGs <40 mg/dL), moderate hypoglycemia (BGs <70 mg/dL) and hyperglycemia (BGs >250 mg/dL).⁹

**AdventHealth Waterman**
Tavares, FL  |  269 beds

AdventHealth successfully used eGMS to reduce the number of preventable hypoglycemia-related adverse drug events.⁴
Real results from real hospitals

Nationwide retrospective analysis
180 U.S. hospitals

In a review of 116,917 patients who received IV insulin therapy guided by eGMS across a 2-year period, eGMS was found to result in a low incidence of hypoglycemia.\(^5\)

Average Incidence of Hypoglycemia and Hyperglycemia

<table>
<thead>
<tr>
<th></th>
<th>Glytec’s eGMS IV Insulin therapy</th>
<th>Your Hospital/Unit’s IV Insulin Therapy</th>
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</thead>
<tbody>
<tr>
<td>Severe hypoglycemia</td>
<td>0.0160%</td>
<td>%</td>
</tr>
<tr>
<td>BGs &lt;40 mg/dL</td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>Moderate hypoglycemia</td>
<td>0.5295%</td>
<td>%</td>
</tr>
<tr>
<td>BGs &lt;70 mg/dL</td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>Hyperglycemia</td>
<td>9.5%</td>
<td>%</td>
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<tr>
<td>BGs &gt;250 mg/dL</td>
<td></td>
<td>%</td>
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If your hospital system doesn’t have hospital-wide, or unit-wide glycemic management metrics, how can you improve what you can’t measure? Glytec’s GlucoMetrics module allows providers at all levels and functional areas to review key blood glucose metrics and measure the progress of glycemic management initiatives.

Let us answer your questions.
Contact Glytec to schedule a demo or discuss next steps.

Get in Touch
References


6. Financial Implications of Poor Glycemic Management & Improvement Strategies for Optimal Outcomes. IHI Annual National Forum on Quality Improvement in Health Care, Dec 2018


The eGlycemic Management System® is a modularized solution for glycemic management across the care continuum that includes Glucommander™. Glucommander™ is a prescription-only software medical device for glycemic management intended to evaluate current as well as cumulative patient blood glucose values coupled with patient information including age, weight and height, and, based on the aggregate of these measurement parameters, whether one or many, recommend an IV dosage of insulin, glucose or saline or a subcutaneous basal and bolus insulin dosing recommendation to adjust and maintain the blood glucose level towards a configurable physician-determined target range. Glucommander™ is indicated for use in adult and pediatric (ages 2-17 years) patients. The measurements and calculations generated are intended to be used by qualified and trained medical personnel in evaluating patient conditions in conjunction with clinical history, symptoms, and other diagnostic measurements, as well as the medical professional’s clinical judgement. No medical decision should be based solely on the recommended guidance provided by this software program.

Glucommander™ is only available for use in the United States.

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