



REGIONAL PEDIATRIC PARENTERAL DRUG MONOGRAPH

GENERIC NAME

insulin



Effective Date: Jan 14- 2015

CLASSIFICATION

OTHER NAMES

PAGE

Revised Date: June 2024

Antidiabetic agent

Humulin R, Novolin regular, Toronto

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ADMINISTRATION POLICY:

IV infusion - May be administered by a nurse
 IV Intermittent - May be administered by a nurse
 IM injection: - May be administered by a nurse
 Subcut: - May be administered by a nurse

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 100 units/mL – 10 mL vial (unopened vials should be refrigerated) *ONLY REGULAR INSULIN MAY BE ADMINISTERED INTRAVENOUSLY*

IV Intermittent: Administer diluted in convenient volume of compatible solution over 15 to 30 minutes

IM injection: Administer undiluted

Subcut: Administer undiluted

IV Infusion: Pump Library:

Drug Library	Dose Rate	Short Name	Care Unit
Yes	units/kg/h	insulinp	pediatric
Drug	Diluent	Final Volume (VTBI)	Final Concentration
100 Units	Premixed bag	100 mL	1 unit/mL

Clinical Advisory: High Alert

Soft Low Dose Limit: 0.01 units/kg/h

Soft High Dose Limit: 0.1 units/kg/h

**If NURSE PREPARED take 1 mL of 100 units/ml Insulin regular add to 100 mL Normal Saline bag. Final concentration: 1 unit/mL (rounded)

DOSAGE:

Diabetic Ketoacidosis: IV Infusion: 0.025 to 0.1 units/kg/hour

IM: 0.25 units/kg/dose followed by 0.1 units/kg/dose every 1

hour or as required

Subcut: 0.1 to 0.25 units/kg/dose every 1 to 2 hours

Diabetes Mellitus: Subcut: Usual starting dose: 0.3 to 0.5 units/kg/24 hours

Maintenance range: 0.5 to 1 unit/kg/24 hours

Neonatal Hyperglycemia: IV intermittent: 0.05 to 0.1 units/kg/dose

IV infusion: 0.01 to 0.05 units/kg/hour to a maximum of 0.1 units/kg/h

(Dosage continued)





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DOSAGE (cont'd):

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Hyperkalemia: No fixed dose for all situations exist. Monitor serum glucose for several hours

following administration.

Initial dose: dextrose 0.5 to 1 gram/kg followed with regular insulin 0.1

to 0.25 units/kg IV over 5 to 30 minutes

Range: regular insulin 0.5 to 2 units/gram of dextrose

Maximum concentration: IV bolus, IM, Subcut: 100 units/mL

IV Infusion: 10 units/mL

STABILITY/COMPATIBILITY:

Stability: Open vials stable for 28 days at room temperature or refrigerated. Place an expiry

date on all open vials of insulin.

Stability of Final Admixture: 24 hours at room temperature

Compatibility: Compatible with normal saline, dextrose concentrations between D5W to D50W,

dextrose-saline combinations, Lactated Ringer

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

Most of the adverse effects of insulin are symptoms of hypoglycemia.

Hypersensitivity: anaphylactic reactions

CNS: fatigue, mental confusion

Metab: hypoglycemia with blurred vision, sweating, tremor, hunger, sweaty palms, palpitations, cold sensation,

hypokalemia

Local: local inflammatory reactions, atrophy of subcutaneous fat tissue at the site of injection, pain on injection,

urticaria, redness

CAUTION

• do not change brand or manufacturer of insulin product without plan to monitor blood glucose

CONTRAINDICATIONS:

• allergic reaction to insulin or any component of the product

ADDITIONAL NOTES AND NURSING CONSIDERATIONS: