

## Insulin Adjustments and Scope of Practice

The use of medical directives and order sets for insulin dose adjustment by diabetes educators is common practice due to the dynamic process of establishing individual insulin requirements and the need for frequent contact with a member of the diabetes care team.

### What are Orders and Medical Directives?

An order can be a **direct order** or a **medical directive**. Both are prescriptions for a procedure, treatment, drug or intervention.

**Direct orders** apply to an individual client. **Medical directives** apply to more than one individual and are given in advance by physicians/Nurse Practitioners (NPs) to enable the implementers to perform the ordered procedures based on their knowledge, skill and judgment.

For initial insulin injection, a direct order is required as it is a specific order for an individual patient upon assessment by a physician or NP.

For subsequent insulin adjustments, direct orders or medical directives may be used.

Direct orders specifying the 5 “Rs” (right medication, right dosage, right time, right route and right patient) may be used, but may be limiting when striving to achieve tight glycemic control in the patient.

Medical directives allow the educator to adjust insulin based on their knowledge, skill judgement, allowing for more flexibility in adjusting insulin. A medical directive, regardless of how generic its contents, is an order for which the physician/NP has ultimate responsibility. The following steps should be in place for an organization to use medical directives:

- Consider a yearly process to review and update your directive(s) or order sets. Review should occur as best practices are revised.
- Diabetes Educators who are authorized as implementers must engage in a process of self-assessment and ensure competence on an ongoing basis. Managers are responsible for ensuring competency is maintained.
- Support and resources need to be in place in order for the educator(s) to demonstrate continued competency in insulin dose adjustment.

Depending on the diabetes team, it may be challenging to engage in a review and approval process with a large number of potential physician/authorizers. A pre-printed order for insulin initiation and dose titration may be useful in these cases.

**Can dietitians adjust insulin?** A dietitian, with the appropriate competence, is acting within his or her scope of practice when teaching a client how to adjust his/her insulin for changes in activity, food intake and in response to self-blood glucose monitoring. The distinction in working with people who have diabetes is differentiating between **specifying the dose** versus **teaching self-management**.

South East DRCC website, Medical Directives; [www.sedrcc.ca](http://www.sedrcc.ca)

College of Nurse of Ontario Practice guideline: Directives June 2009

Federation of Health Regulatory Colleges of Ontario, An interprofessional guide on the Use of Orders, Directives and Delegation for Regulated Health Professionals in Ontario. 2007

Your Professional Practice Questions, Fall 2002, College of Dietitians of Ontario