Is Admission BGL ≥ 1.5mmol/L?

- **YES**
  - Feed (60ml/kg/day)
  - Repeat BGL
  - BGL ≥ 2.6
    - Feed 3 hourly (60 ml/kg)
    - Consider PNW if 3 consecutive BGL ≥ 2.6 & sucking feeds.
    - Complement BF
  - BGL 1.5 to 2.5
    - Feed 2 hourly
    - Increase to 90ml/kg/day
  - BGL≥ 2.6mmol/L
    - Change to 3 hourly feeds after 24hrs if BGL ≥ 2.6 mmol/L
    - Complement BF’s

- **NO**
  - Any BGL < 1.5
    - Insert IV: 10% glucose (60-90ml/kg/day).
    - BGL < 1.5
      - Give bolus: 10% glucose (2-3 ml/kg)
    - BGL < 2.6mmol/L
      - Consider IM Glucagon if no IV access
    - BGL≥ 2.6mmol/

- **Special Care Nursery**
  - Management of infants with Risk Factors for or Diagnosis of Hypoglycaemia

- **IM Glucagon if no IV access**
  - Consider IM Glucagon if no IV access

- **Repeat BGL**
  - Repeat BGL

- **Discontinue BGL monitoring when 3 consecutive BGL ≥ 2.6 & on full enteral feeds**

- **Recommence BGL monitoring if indicated with change in feeding regime or clinical condition.**

- **If BGL ≥ 2.6, repeat before next feed or 3 hourly if infant nil orally**
- **If BGL < 2.6 repeat in 1 hour or as ordered by Paediatric team.**
- **Measure BGL prior to feed if feed due**
- **Discontinue BGL monitoring when 3 consecutive BGL ≥ 2.6 & on full enteral feeds**
- **Recommence BGL monitoring if indicated with change in feeding regime or clinical condition.**