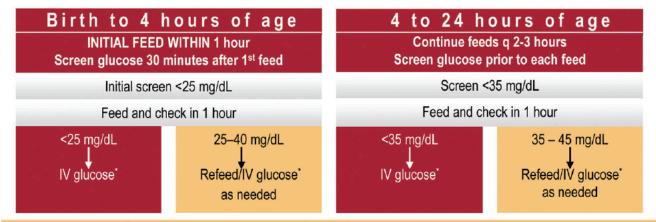
Screening and Management of Postnatal Glucose Homeostasis in Late Preterm and Term SGA, IDM/LGA Infants

[(LPT) Infants 34 - 3667 weeks and SGA (screen 0-24 hrs); IDM and LGA ≥34 weeks (screen 0-12 hrs)]

Symptomatic and <40 mg/dL → IV glucose

ASYMPTOMATIC



Target glucose screen ≥45 mg/dL prior to routine feeds

Symptoms of hypoglycemia include: Irritability, tremors, jitteriness, exaggerated Moro reflex, high-pitched cry, seizures, lethargy, floppiness, cyanosis, apnea, poor feeding.

FIGURE 1

Screening for and management of postnatal glucose homeostasis in late-preterm (LPT 34-36% weeks) and term small-for-gestational age (SGA) infants and infants who were born to mothers with diabetes (IDM)/large-for-gestational age (LGA) infants. LPT and SGA (screen 0-24 hours), IDM and LGA ≥ 34 weeks (screen 0-12 hours). IV indicates intravenous.

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^{*} Glucose dose = 200 mg/kg (dextrose 10% at 2 mL/kg) and/or IV infusion at 5–8 mg/kg per min (80–100 mL/kg per d). Achieve plasma glucose level of 40-50 mg/dL.