

# SANTA ANA POLICE DEPARTMENT

DAVID VALENTIN · CHIEF OF POLICE

## TRAINING BULLETIN

*"Education promotes professional and responsive law enforcement"*

### Training on Diabetic Emergencies

#### Purpose

The purpose of this training bulletin is to help you become familiar with the cause, symptoms, and solution to **Diabetic Emergencies**. This knowledge can both save a life and protect you from civil liability.

#### Introduction

There are 250,000 diabetics in Orange County. Those are just the ones that have been diagnosed. Insulin is the substance made by the pancreas that allows us to metabolize the sugar in the food we eat. Some diabetics do not produce enough insulin, so they take pills to stimulate the pancreas into making more. Other diabetics do not produce any insulin, so they must take shots of insulin to survive. Maintaining a proper blood sugar level is imperative. The two areas of concern are when the blood sugar level gets very high or very low. Hyperglycemia (*high blood sugar*) can take hours or days to become an emergency. Hypoglycemia (*low blood sugar*) can come on suddenly, in a matter of minutes. The condition of more urgency is low blood sugar or insulin shock. If these conditions go uncorrected the person can suffer a heart attack, kidney or liver failure, dehydration, brain damage, coma, loss of a limb due to inadequate circulation and death.

There have been several instances recently of officers coming into contact with persons suffering from a **Diabetic Emergency**. The following are two of those cases.

#### I. Examples

##### A. 390 Down Call

Officers received a call of a drunk down on the sidewalk. Upon arrival, they found a male Hispanic 40 years old, down, unable to stand or sit. His speech was slurred, he was disoriented and unable to accurately answer questions. He appeared to be "*just another drunk*". There were some things about him that did not seem quite right. He was well dressed and well groomed. He was trying to eat something from a Styrofoam container, and he did not like it when it was taken away from him. As he rolled on his side, Sweet and Low packets fell out of his pocket. The officer asked him if he had any medical problems and he said yes, although he was unable to say what was wrong. They then found a medic alert necklace on him, stating that he was diabetic. When asked if he had eaten and taken his medicine, he said he had taken

his medicine in the morning, but had not eaten all day. This was about 8 P.M. Some of the neighbors brought out a Coke and some maple syrup. He took 4 tablespoons of the syrup and drank the bottle of coke. Within 5-10 minutes, he was able to stand and answer questions.

## B. 929 In a Vehicle

Two officers responded and found a man passed out behind the wheel of a car that was parked legally. The doors were locked and he did not respond when they knocked on the window. They could have decided to just "*let him sleep it off*", but luckily they did not. They called a tow truck to Slim Jim the door. Upon contacting the man they found him unresponsive to noise and to pain stimulus. The officers thought the man had overdosed. When the paramedics arrived they determined he was in severe insulin shock.

In both of these cases, the officers involved acted properly. If the officers had made other decisions, these people could have died or suffered severe complications.

## II. Recognition

The symptoms can closely mimic those of intoxication, (*i.e., loss of coordination, slurred speech, inability to concentrate and answer questions properly*). They can be resistant to help and may become combative. Their breath may have a fruity smell, similar to alcohol. They may experience changes in skin temperature, cold sweats, headache and vomiting.

How to differentiate:

1. Ask if they are diabetic.
  - a. If yes, ask if they take medication and what kind.

i. Insulin or Pills?

ii. When and how much did they take?

{Insulin is measured in units, not cc's. Types of insulin are NPH, Lente, Regular and Humulin, they might be taken in combination. If you think the person may be an IV drug user, keep in mind that diabetics inject insulin subcutaneously (*in the fatty tissue*) in the upper arm, stomach, and thigh, not directly into the vein. They should not have track marks or abscesses over veins.}

- b. When and what did they eat?
2. Check for Medicalert necklace, bracelet, or a wallet cards. (*Remember, not all diabetics carry these.*)
3. Keep in mind that diabetics may also have been drinking may be in need of medical assistance. Excessive alcohol consumption by a diabetic can cause their blood sugar level to become unbalanced.

## III. Action

1. Call Paramedics. *(They can instantly test the blood sugar level.)*
2. If the person is suffering from low blood sugar and is conscious and able to feed themselves, give them some type of fast acting sugar such as honey, orange juice, soda pop, candy or what ever is available. *(If the person has a lowered level of consciousness, he might choke on food or drink.) Giving sugar to a person with hyperglycemia will not significantly harm him, however; a person with hypoglycemia could deteriorate and die without it.*

## Summary

We commonly encounter people who are intoxicated and we are very familiar with the symptoms. We all need to be aware of the possibility that the person we have is actually a diabetic who needs medical attention and not intoxicated. The person may be driving a car and appear to be DUI. You may encounter him at his home, work or somewhere in between. If this person does not get the medical attention he needs, he may not be the only one to suffer. You may be subject to civil liability for failure to properly handle the situation.

**Acknowledgment:** This Training Bulletin was prepared by Officer Colleen Taylor, with special thanks to Senior Office Assistant Lupe Lanham and Fire Fighter Paramedic Dennis Marinello, SAFD, 1-97.

**Reviewed By:** Cpl. C. Taylor

**Revision Date:** February 2005