





- Do not omit insulin if due. May need revision of the dose- discuss with diabetes team
- Continue regular monitoring CBG for the next 24-48 hours at least. (at least 4 times per day)

Supplemental figure 2: Initial management of hypoglycaemia

CBG – capillary blood glucose, ABCDE- airway, breathing, circulation, disability, exposure, IV-intravenous, IM- intramuscular

Gold Score

How well can you detect onset of hypoglycaemia											
Always	1	2	3	4	5	6	7	Never			

A score of 4 or above suggests impaired hypoglycaemia awareness.

Clarke Score

1. Do you fee	el hypoglycaemia symp	toms when your bl	ood glucose is low	7	
Always (1)	Sometimes (2)	Never			
Have you l	ost some of the sympto	oms that used to occ	cur when your blo	od sugar was lo	ow?
Yes (1)	No (0)				
	six months how often I				ere you might
have been	confused, disoriented of	or lethargic and wer	e unable to treat y	ourself?	
Never (0)	Once or twice (1)	Every other	Once a month	More than	
		month (2)	(3)	once a	
				month (4)	
3. In the past	year how often have ye	ou had severe hypo	glycaemia where	you were uncor	nscious or had
a seizure of	r needed glucagon or in		?		
Never (0)	1-3 times (1)	4-7 times (2)	8-11 times (3)	>12 times	
				(4)	
4. How often	in the last month have	you had readings <	< 3.9 mmol/L with	symptoms?	
Never (0)	1-3 times (1)	1/week (2)	2-3/week (3)	4-5/week	Daily (5)
				(4)	
5. How often	in the last month have	you had readings <	< 3.9 mmol/L with	out symptoms	
Never (0)	1-3 times (2)	1/week (4)	2-3/week (6)	4-5/week	Daily (10)
				(8)	
6. How low d	loes your blood sugar g	go before you feel s	ymptoms?		
3.3 - 3.8 mmol/L	2.8 – 3.3 mmol/L	2.2 - 2.7	<2.2 mmol/L		
(1)	(2)	mmol/L (3)	(4)		
7. To what ex	tent can you tell low b	lood sugars by you	r symptoms?		
Never (4)	Rarely (3)	Sometimes (2)	Often (1)	Always (0)	

Supplemental figure 3: Assessment of hypoglycaemia awareness - Gold and Clarke scores