Person—severe hypoglycaemia indicator, code N

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Person—severe hypoglycaemia indicator, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Hypoglycaemia - severe
METEOR identifier:	302825
Registration status:	Health!, Standard 21/09/2005
Definition:	Whether a person has had **severe hypoglycaemia**, as represented by a code.

Data element concept attributes

Identifying and definitional attributes

Data element concept:	Person—severe hypoglycaemia indicator
METEOR identifier:	304019
Registration status:	Health!, Standard 21/09/2005
Definition:	Whether the individual has had **severe hypoglycaemia**.
Context:	Public health, health care and clinical settings
Object class:	Person
Property:	Severe hypoglycaemia indicator

Value domain attributes

Identifying and definitional attributes

Value domain:	Yes/no/not stated/inadequately described code N
METEOR identifier:	301747
Registration status:	Health!, Standard 21/09/2005 Housing assistance, Standard 10/02/2006 Community Services (retired), Standard 14/02/2006 Early Childhood, Standard 21/05/2010 Homelessness, Standard 23/08/2010 Independent Hospital Pricing Authority, Standard 01/11/2012 Disability, Standard 07/10/2014 Indigenous, Standard 13/03/2015 Children and Families, Standard 22/11/2016
Definition:	A code set representing 'yes', 'no' and 'not stated/inadequately described'.

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	1	Yes
	2	No

Supplementary values:	9	Not stated/inadequately described

Collection and usage attributes

Guide for use:

CODE 9 Not stated/inadequately described

This code is not for use in primary data collections.

Data element attributes

Collection and usage attributes

Guide for use:

CODE 1 Yes
Record if the person has a history of severe hypoglycaemia.

CODE 2 No
Record if the person has no history of severe hypoglycaemia.

Collection methods:

Ask the individual if he/she has had a severe hypoglycaemia requiring assistance. Alternatively obtain the relevant information from appropriate documentation.

Comments:

The medications used in the treatment of diabetes may cause the blood glucose value to fall below the normal range and this is called hypoglycaemia.

Source and reference attributes

Submitting organisation:

National diabetes data working group

Origin:

National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary.

Reference documents:

Definition corresponds with the Diabetes Control and Complications Trial (DCCT): DCCT New England Journal of Medicine, 329(14), September 30, 1993. Report of the Health Care Committee Expert Panel on Diabetes; Commonwealth of Australia 1991; ISBN 0644143207.

Relational attributes

Related metadata references:

Supersedes Person—severe hypoglycaemia history, status code N
Health!, Superseded 21/09/2005

Implementation in Data Set Specifications:

Diabetes (clinical) NBPDS
Health!, Standard 21/09/2005

DSS specific information:

Most hypoglycaemic reactions, however, do not cause long term problems, but the risks of permanent injury to the brain are greater in children under the age of 5 years, the elderly with associated cerebrovascular disease and patients with other medical conditions such as cirrhosis and coeliac disease. The serious consequences of hypoglycaemia relate to its effects on the brain. Rarely hypoglycaemia may cause death.

It is important to know how to recognise and react when someone is unconscious from hypoglycaemia. These people should be placed on their side and the airway checked so that breathing is unhampered and nothing should be given by mouth as food may enter the breathing passages. Treatment needs to be given by injection - either glucagon (a hormone which raises the blood glucose by mobilising liver stores) or glucose itself. Glucagon should be given by injection (usually intramuscular) at a dose of 0.5 units (or mg) in children under the age of 5 years and 1.0 units (mg) for all older age groups.

All diabetic patients at risk of developing hypoglycaemia should have glucagon at home. Their families need to be shown how to administer it in times of severe hypoglycaemia.