

Diabetic Ketoacidosis (DKA)

NHS.UK DKA Guidance (Jun 2023) | JBDS DKA Guidelines (Mar 2023) | Diabetes UK (Nov 2024)

■ 999: DKA Symptoms Present

- Blood ketones above 3 mmol/L plus vomiting, abdominal pain, fruity breath, confusion, or laboured breathing
- Drowsy, confused, or unresponsive at any ketone level
- DKA symptoms in a person with no known diabetes diagnosis, particularly a child or young adult
- Do not advise driving. Ask them to bring their medicines.

■ URGENT: Same-Day Clinical Assessment

- Blood ketones 1.6 to 3 mmol/L at any level of wellbeing
- Ketones above 3 mmol/L without clear symptoms: same-day specialist contact
- On SGLT2 inhibitor with any DKA symptoms, regardless of blood glucose level
- Glucose persistently high, not responding to insulin, or vomiting repeatedly

SGLT2 inhibitors (empagliflozin, dapagliflozin, canagliflozin, ertugliflozin) can cause DKA at normal glucose. Never dismiss symptoms based on the glucose reading.

KETONES: Quick Assessment Framework

K	Ketones checked?	Blood or urine? Blood ketones are preferred; urine ketones lag behind by several hours.
E	Eating and drinking?	Able to keep fluids down? Missed meals? Following sick-day rules?
T	Thirst and toilet?	Excessive thirst and polyuria suggest high glucose or new-onset diabetes.
O	On SGLT2 inhibitor?	DKA can occur at normal glucose. Act on symptoms, not the glucose reading.
N	Nausea or vomiting?	Vomiting repeatedly? Unable to retain fluids? Accelerates deterioration.
E	Exhausted or confused?	Any drowsiness, confusion, or altered consciousness: call 999 immediately.
S	Send if red flags present	999 if symptoms + ketones above 3 mmol/L. Same-day diabetes team or NHS 111 if ketones 1.6 to 3 mmol/L.

✓ SELF-CARE: Ketones 0.6 to 1.5, Feeling Well

- Do NOT stop insulin, even if not eating
- Increase sugar-free fluid intake and retest every 2 hours
- Contact diabetes team for advice on insulin dose adjustment
- Escalate immediately if vomiting starts or ketones rise above 1.5 mmol/L