

**Lamont, Jennifer**

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**From:** McAloon, Jarlath [Jarlath.McAloon@  
**Sent:** 31 January 2013 16:22  
**To:** Lamont, Jennifer; Jenkins, Mark; Dr Mike Smith - SHSCT; Dr Patrick Stewart - WHSCT; Dr Paul Logan - NHSCT; Dr Peter Crean - BHSCT; Livingston, Heather; Ms Rhona Fair - BHSCT; Professor Mike Shields - QUB ; Rodney Peyton Perkins, Roisin (DHSSPS); Campbell, Karen (DHSSPS)  
**Cc:**  
**Subject:** RE: Proposed Revision to Wallchart Guidance on Hyponatraemia in Children

Jennifer,  
I'm happy with that suggested wording change.  
Currently the guidance in respect of "ILL CHILDREN" makes reference to glucose and not plasma glucose so I don't think the proposed change causes any internal inconsistency.  
Jarlath

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**From:** Lamont, Jennifer [Jennifer.Lamont@  
**Sent:** 31 January 2013 14:55  
**To:** McAloon, Jarlath; Jenkins, Mark; Dr Mike Smith - SHSCT; Dr Patrick Stewart - WHSCT; Dr Paul Logan - NHSCT; Dr Peter Crean - BHSCT; Livingston, Heather; Ms Rhona Fair - BHSCT; Professor Mike Shields - QUB ; Rodney Peyton  
**Cc:** Perkins, Roisin (DHSSPS); Campbell, Karen (DHSSPS)  
**Subject:** Proposed Revision to Wallchart Guidance on Hyponatraemia in Children

Colleagues, in response to the recent GAIN audits of compliance with guidelines on the treatment of hyponatraemia in children, it has been noted that there was low compliance with the criteria on glucose testing. It has been suggested that this may be because the wallchart guidance states that plasma glucose testing must be undertaken which excludes point of care testing.

We suggest amending the references to "plasma glucose testing" to "glucose testing" in order to capture the point of care testing and would be grateful for your view as a member of the group that developed the guidance as to whether or not this is acceptable.

We are aware that should the result of a point of care test fall into the margins of agreed tolerances, then plasma glucose testing should be carried out for a more accurate reading. However, as this would seem to be a general testing/pathology issue rather than something specific to the hyponatraemia guideline itself it seems unnecessary to caveat the wallchart to cover this issue.

At this point, we are not looking for any other suggested revisions to the wallchart, but would be grateful if you would consider the amendment to the reference to "plasma glucose" and advise by Tuesday 5 February if you are content. Once the amendment is agreed, we will arrange for a re-print of the wallchart and re-issue it to Trusts.

Many thanks,

Jennifer Lamont  
Standards and Guidelines Quality Unit

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