

A group of six healthcare professionals, including nurses and a doctor, are standing in a bright hospital hallway. They are all smiling and appear to be in a collaborative conversation. The group consists of three women and three men, dressed in blue and teal scrubs, with one man in a white lab coat. The background shows a clean, modern hospital environment with large windows and doors.

glytec[®]

eGlycemic Management System[®]

Revolutionizing glycemic management by uniting teams around patient safety.

Glytec's eGMS centers on Glucommander[®], the only cloud-based, FDA-cleared software used by clinicians to personalize IV and SubQ insulin dosing support for patients with and without diabetes across the continuum of care.



eGlycemic Management System (eGMS) is an **EHR-integrated, HITRUST Certified, cloud-based software platform** that supports **safe and effective glycemetic management and insulin dosing.**

eGMS offers **personalized insulin dosing decision support at the point of care.** Unlike paper protocols, sliding scale methods and digital insulin calculators, eGMS optimizes insulin therapy with **Glucommander[®], evidence-based, FDA-cleared software.** Glucommander's algorithm and guided workflows leverage real-time and historical data to personalize insulin dosing by learning each patient's insulin sensitivity and anticipating future need.

The result? Patients experiencing glycemetic management challenges **get into target range faster¹, stay within tighter parameters²** and experience **fewer insulin-related adverse drug events³** than patients treated with other protocols.

In addition to dosing support, eGMS offers tools for doctors, nurses, pharmacists, CDCESs, hospital leadership and others to **optimize glycemic management**. These tools include:

- Advanced glycemic management analytics
- Continuous surveillance of blood glucose levels across the entire patient population
- Dynamically adjusted timing for BG checks with automated reminders
- Dashboards to support coordination of care

Glucommander provides insulin dosing decision support and is FDA-cleared for use with adult and pediatric patients ages 2 and above. Glucommander is available in 3 different treatment modules that support patients and providers across the continuum of care.

Healthcare facilities can decide to implement one or more Glucommander treatment modules based on the units and care settings at their facilities:

Glucommander Treatment Modules

INPATIENT CARE

Glucommander IV	Glucommander SubQ	Glucommander Outpatient
<p>EXAMPLE TREATMENT SETTINGS</p> <ul style="list-style-type: none"> ■ Emergency Room ■ Intensive Care ■ Step Down Units ■ Operating Room 	<p>EXAMPLE TREATMENT SETTINGS</p> <ul style="list-style-type: none"> ■ Intensive Care ■ Step Down Units ■ Floor Units 	<p>EXAMPLE TREATMENT SETTINGS</p> <ul style="list-style-type: none"> ■ Ambulatory Care Settings
<p>FEATURES</p> <p>Supports IV Insulin Regimens</p> <p>Transition to SubQ</p>	<p>FEATURES</p> <p>Supports Basal/Bolus Regimens</p> <p>Hospital to Home Discharge Recommendations</p>	<p>FEATURES</p> <p>Supports Adaptive</p> <p>Long-term Insulin Dosing</p>

Includes the full suite of eGMS Modules to support insulin dosing support:
GlucoSurveillance, GlucoView, GlucoMetrics

The glycemic management status quo is unsustainable.

Insulin dosing in the inpatient setting has remained largely unchanged for half a century. Simplified protocols seek to ease provider burden but can't provide personalized care. Meanwhile, more complex protocols that are dependent on manual calculations are prone to dangerous errors.

What these status quo methodologies have in common is that **they're not safe and they're not the standard of care.**⁴

Sliding scale and other one-size-fits-all protocols are **outdated and dangerous**, resulting in higher rates of hyperglycemia and hypoglycemia than Glytec's personalized, algorithm-driven solution.² Reliance on protocols that don't dynamically adjust based on patient needs is **strongly discouraged** by the American Diabetes Association.⁴

In addition, traditional paper protocols and most digital insulin dosing calculators provide **no data** for further analysis and **lack safety guardrails** to prevent errors in treatment.

Considered alongside the increasing prevalence of diabetes in the U.S.³ and the outsized impact^{5,6} patients with glycemic issues have on the healthcare system, reliance on the status quo **is a recipe for disaster.**

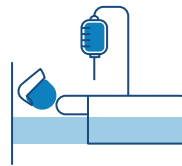
And it's not just people with diabetes who require insulin in the hospital; stress hyperglycemia is often found with patients who are undergoing surgery or who are critically ill⁷. These patients are often not given insulin therapy that has been proven to improve their outcomes because status quo methodologies don't have a way of identifying them.

Glycemic management in the U.S.:



1 in 3

Americans has **glycemic control issues** (diabetes or prediabetes).⁵



38%

Of inpatients **require insulin therapy** during their hospital stay.⁷



2.3x

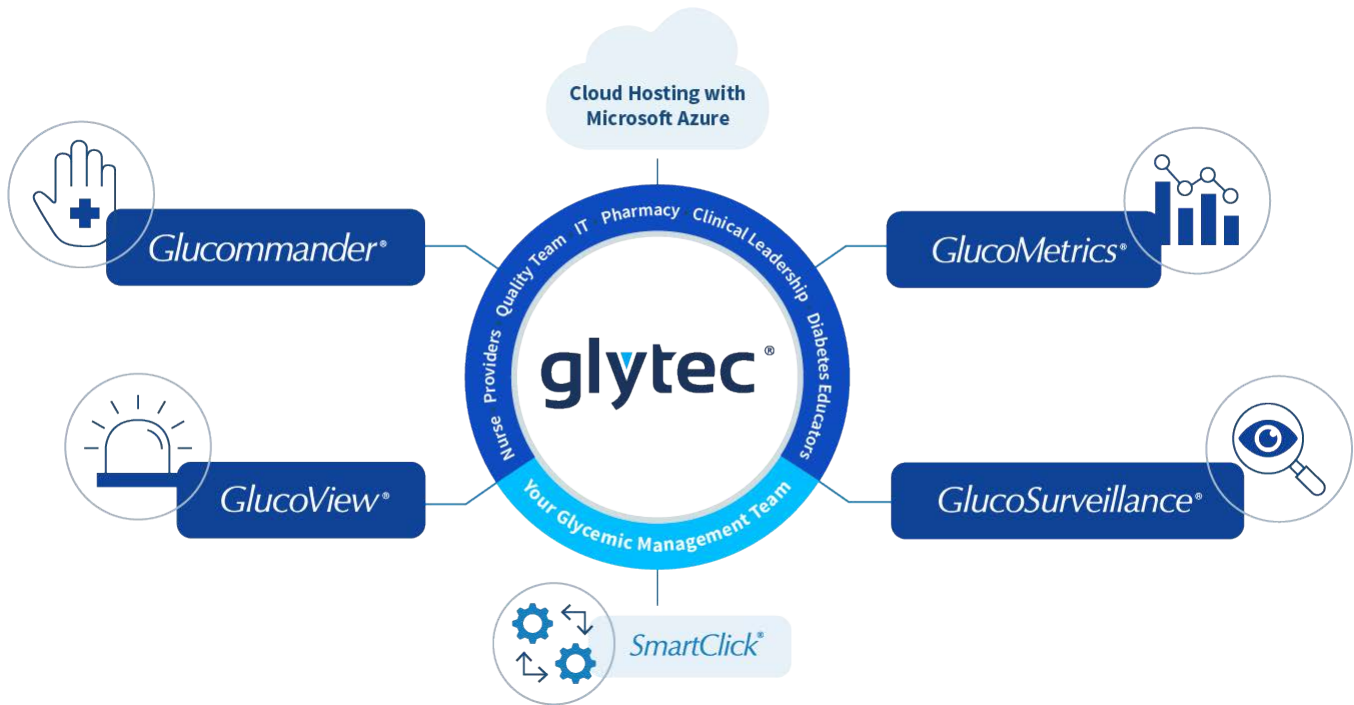
Americans with diabetes have **2.3x greater health care costs** than those without.⁶



16.3%

Insulin is involved in **16.3% of medication errors reports for high-alert medications**, more than any other medication type.⁸

Glycemic management reimaged









Ineffective glycemic management has consequences that reach far beyond the patient bed, and stakeholders throughout the hospital have a role to play in ensuring the safe and effective treatment of patients with glycemic issues.

eGMS is a **holistic solution for improving glycemic management throughout the healthcare system**. Our cloud-based, EHR-integrated technology unites doctors, nurses, pharmacists, quality teams, hospital leadership and others around a common goal: **better, safer care**.

By equipping all stakeholders with the tools and data they need to make better decisions, eGMS **has been repeatedly proven to enhance patient safety, improve quality of care and decrease costs compared to the status quo**.

Real results from real hospitals:

- 
99.8% reduction in frequency of severe hypoglycemia⁹
- 
3.2 days reduction in average length of stay²
- 
36-68% reduction in 30-day readmissions for AMI, CHF and CABG patients¹⁰
- 
62.6% reduction in preventable hypoglycemia-related adverse drug events³
- 
\$2,934 saved per hypoglycemic event prevented¹¹
- 
Up to 72 minutes per nurse per patient saved for patients using IV insulin¹²

Glucommander: Insulin dosing decision support

Our algorithm-driven insulin dosing software is the heart of eGMS. Glucommander is FDA-cleared and indicated for use in IV, SubQ and outpatient settings.

The screenshot displays the Glucommander interface for patient BRADDIX, CHAD. The top navigation bar includes 'Current Patients', 'Add Patient', 'Learning Center', 'Reports', 'Admin', and 'Logout'. The patient's name and a 'Back' button are visible. The main interface is divided into three sections: 'PATIENT DETAILS', 'DOSING INFORMATION', and 'ORDER SET'. The 'ORDER SET' section shows a large digital clock at 52:18 and buttons for 'Enter BG' and 'Start Meal'. Below this is a 'Trend' section with a 'Blood Glucose Trend' graph showing a downward trend from 600 mg/dL to 141 mg/dL. A table below the graph shows the 'IV History' with columns for Date, BG Value, Insulin Rate, Meal Carbs, Nurse, Hypo Treatment, and Next BG Due.

Date	BG Value	Insulin Rate	Meal Carbs	Nurse	Hypo Treatment	Next BG Due
07/08/2023 14:06	141 mg/dL	1.3 units/hr	N/A	Admin User	N/A	07/08/2023 15:06
07/08/2023 13:06	158 mg/dL	1.5 units/hr	N/A	Admin User	N/A	07/08/2023 14:06
07/08/2023 12:05	215 mg/dL	2.4 units/hr	N/A	Admin User	N/A	07/08/2023 13:05
07/08/2023 11:04	290 mg/dL	3.6 units/hr	N/A	Admin User	N/A	07/08/2023 12:04

Glucommander dynamically adjusts the next BG check based on patient's BG values and trends.

Glucommander's algorithm personalizes dosing recommendations for each unique patient using real-time and historical data.

Glucommander targets the mid-point of the patient's target range and is designed to bring patients into range safely and efficiently.

Glucommander: IV Workflow example

Provider Determines Patient Requires IV Insulin Therapy



CDCES reviews GlucoSurveillance® to identify patients at risk for glycemic issues who could benefit from insulin therapy



Provider chooses an insulin order set

eGMS provides a new approach to insulin orders, with population-based options that standardize treatment based on common scenarios



Nurse opens Glucommander directly from the EHR

with SmartClick® single sign on, nurses open Glucommander from within the EHR without needing to sign in again



Pharmacy verifies the order, dispenses insulin

Initial order populates in Glucommander

Process repeated until patient is ready to transition off IV insulin

Patient blood glucose entered

BG values are pulled in automatically from the lab integration if recent, or entered manually

Glucommander provides recommended dose

Nurse adjusts insulin pump

Glucommander sets timer for next adjustment

Nurse gets reminder for next BG check

Time elapses



Nurses use the GlucoView® dashboard to see glycemic status indicators for all patients in the unit and coordinate care



CMO and quality teams review GlucoMetrics® to track KPIs and make high-level decisions

IN THE BACKGROUND

- Glucommander's non-linear algorithm learns and adjusts dose recommendations based on individual patient data
- Glucommander automatically tracks glucose velocity to determine timing and dose of next adjustment

Safety guardrails

Glucommander includes an array of safety features to guide best practice insulin dosing methodology and improve patient safety and outcomes. These guardrails supplement clinicians' decision-making by leveraging available data to draw their attention to potentially dangerous situations.

- Glucose velocity warning:** Alerts nurses about sudden drops in patient blood glucose and prompts a BG recheck sooner to ensure that patients achieve target range safely. This feature is designed to prevent hypoglycemia and side effects like cerebral edema that are caused by rapid decrease in blood glucose.
- Anion gap analysis:** Alerts nurses to high anion gaps to prevent premature discontinuation of treatment before resolution of DKA.
- Meter Max™ feature:** Allows nurses to leverage the algorithm's ability to recommend insulin doses when blood glucose values are above the glucose meter limit without waiting for lab values. Designed to prevent large drops in BG values so the patient achieves target range as soon as safely possible.

Blood Glucose Entry Screen

ADAMS, MARGARET
Cancel

Enter Current BG Value

Enter BG: mg/dL Meter MIN Meter MAX

Re-Enter BG: mg/dL

Review Messages

Blood Glucose is decreasing rapidly. ⌵

Please confirm alerts.

Meter Max Feature

Glucose Velocity Warning

Patient Detail Screen

BRADDIX, CHAD
Back Transition to SubQ Discontinue IV Print Lock Screen

PATIENT DETAILS Edit	DOSING INFORMATION		ORDER SET Edit
<p>NAME: ✓ Braddix, Chad</p> <p>ACCOUNT NUMBER: A230708141... DOB: 05/23/1962</p> <p>HEIGHT: 71.7 in. WEIGHT: 110 kg</p> <p>BMI: 33 A1C: 10.3</p> <p>FACILITY: Default Facility</p>	<p>CURRENT INSULIN 1.3 units/hr</p> <p>SUBQ TRANSITION TDD Current 30 units/day</p> <p>TARGET RANGE 120-160 mg/dL</p>	<p>LAST BG 141 mg/dL</p> <p>ANION GAP 17.6 mmol/L</p> <p>MULTIPLIER Initial: 0.01 Last: 0.01563</p>	<div style="text-align: center; font-size: 2em; font-weight: bold; margin-bottom: 10px;">52:18</div> <div style="display: flex; justify-content: space-around;"> Enter BG Start Meal </div>

Anion Gap Analysis

Integrations & Access

Accurate data is critical to calculating a personalized, safe and effective insulin dose. Glytec's HITRUST-certified platform utilizes secure integrations with health systems' EHRs to capture relevant data that already exists and to close the data loop with minimal data entry, which improves patient safety and reduces workflow friction for clinicians.

- **SmartClick:** Enables single sign-on and access to eGMS from within the EHR
- **ADT:** Imports patient information like demographics, height and weight
- **Lab Results:** Imports lab results like A1C, blood glucose and anion gap
- **Order:** Glucomander automatically receives initial parameters as ordered by the provider and displays this information when the nurse starts treatment
- **Charting:** Charts Glucomander data on the EHR flowsheet to display all patient care history in a single location without needing to double document
- **Medication Administration Confirmation:** Once a medication is charted on the MAR, the interface sends dose confirmation back to Glucomander to close the data loop without manual effort

START ORDER SET

NAME: CALLAHAN, DANIEL ✓

ACCOUNT NUMBER: 2106031021... DOB: 10/19/1990

HOSPITAL: Heart Hospital UNIT: ICU

GENDER: Male A1C:

HEIGHT: 186 cm WEIGHT: 105 kg

Edit

IV Order Set Details

Order ID: DC210603102122 Clear Form

Ordered: 06/03/2021 10:07

Initial Multiplier: 0.01

Target Range: 120-160 mg/dL

Caution: Provider order is required.

Please refer to drug "Instructions for Use" for information regarding manufacturer's indications, warnings, precautions and contraindication.

Cancel Save

When the point-of-care nurse starts a patient with Glucomander orders, the interface opens in a window within the EHR via SmartClick's single sign on capability. Patient data from ADT and the lab integration is automatically imported without any data entry.

The provider's initial order parameters are pre-populated.

GlucoView®: Glycemic status and alerts

eGMS includes a dashboard of glycemic status indicators for all patients in a unit, supporting team nursing and coordination of care (especially during shift changes).

The screenshot shows the GlucoView interface for 'CURRENT PATIENTS' at 'General Hospital'. It displays a list of 'IV Insulin Infusion Patients (7)'. The patients are categorized by unit: MEDSURG and PEDIATRIC. Each patient row shows their last blood glucose (BG) reading, last insulin rate, target range, next BG due time, and any alerts. The next BG due times are highlighted in large, bold text.

Unit	LAST BG	LAST INSULIN RATE	TARGET RANGE	NEXT BG DUE	Alerts	Next BG Due:
MEDSURG	141 mg/dl ↓ (Weiss, Lori)	1.3 units/hr	120-160 mg/dl	09/04/2020 at 18:34	(1 Minute Late)	BG DUE!
MEDSURG	132 mg/dl ▲ (Weiss, Lori)	1.4 units/hr	120-160 mg/dl	09/04/2020 at 18:40		4:36
MEDSURG	127 mg/dl ▲ (Weiss, Lori)	1.3 units/hr	120-160 mg/dl	09/04/2020 at 18:41	Converting to SubQ Insulin	5:53
PEDIATRIC	121 mg/dl ▲ (Weiss, Lori)	0.9 units/hr	100-140 mg/dl	09/04/2020 at 18:42		7:07
MEDSURG	120 mg/dl ↓ (Weiss, Lori)	1.5 units/hr	100-140 mg/dl	09/04/2020 at 18:43	Converting to SubQ Insulin	8:07

GlucoView allows nursing teams to see Next BG Due for all patients in one view, so they can proactively plan and prioritize patient care.

GlucoSurveillance®: At-risk patient identification

eGMS interfaces with the hospital's laboratory information system to continuously analyze the blood glucose values of *all patients* for whom data is available (not just those with Glucomander orders) to proactively identify patients with hyperglycemia.

The GlucoSurveillance dashboard notifies the designated clinician about patients with hyperglycemia who are at risk for adverse effects. Using GlucoSurveillance, providers can treat patients needing insulin therapy sooner, which improves patient safety.

CURRENT PATIENTS				
All Facilities		All Units		Search Patients
IV Insulin Infusion Patients (7)			SubQ Insulin Injection Patients (6)	
 ALERT: Click to view patients that have experienced at least 2 BGs > 180 mg/dl over the past 24 hrs.				
Name	Room	MRN	DOB	Last BG
FIFTY, DEE	318	M9900001012	03/18/1949	484 mg/dl
MISSION, READ	041	M9900000712	07/05/1941	329 mg/dl
SWEETIE, IMA	007	M9900000112	06/27/1948	217 mg/dl

GlucoSurveillance can be used by individual providers to monitor their patients, but is also a tool used by CDCES teams or designated clinical leads to identify and recommend treatment.

Glucometrics®:

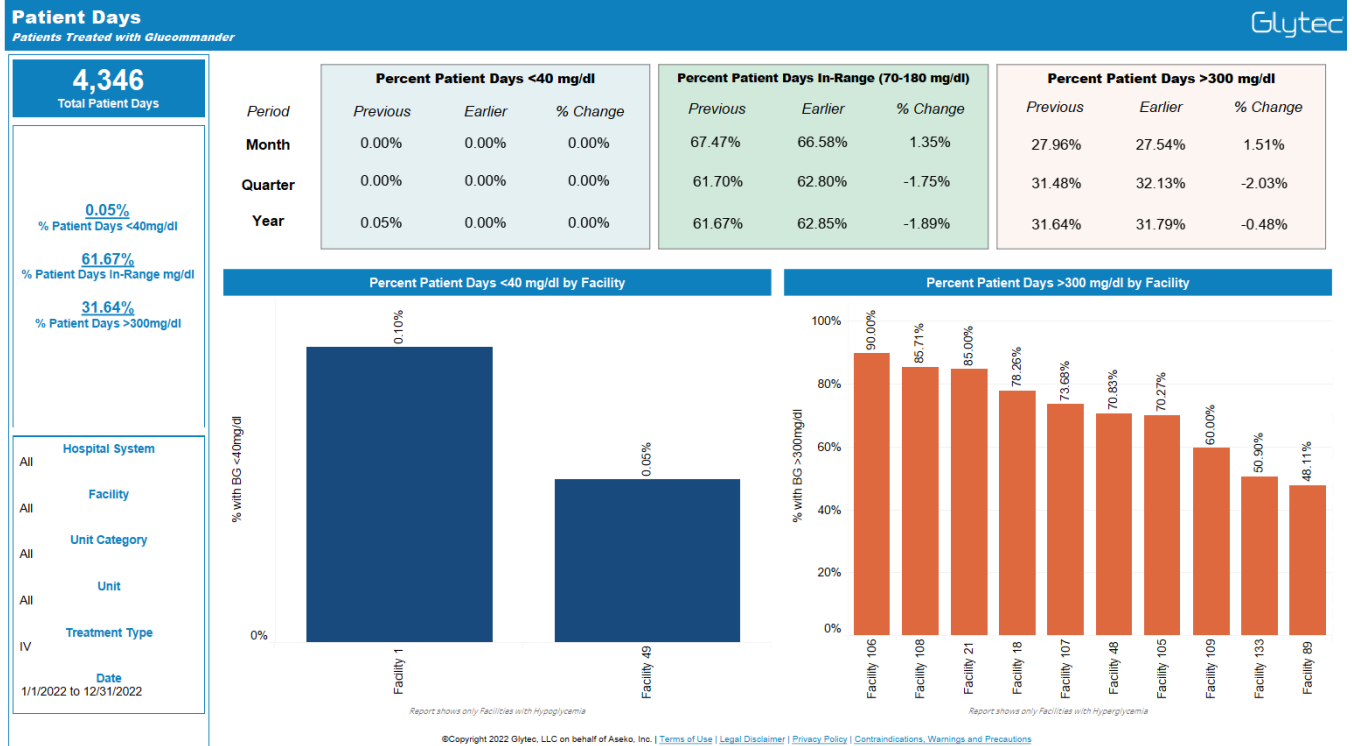
Glucose data analytics and reporting

Glucometrics and Glytec's other reporting capabilities give providers, nurses, glycemic management committees and executive leadership 24/7/365 self-serve access to the outcome and process metrics that matter most to them. And it's easy.

Glucometrics comes complete with pre-configured dashboards that make analytics such as incidence of hyperglycemia and hypoglycemia easy to track, internal benchmarks easy to set, and quality improvement (QI) projects easy to start. And our team is with you every step of the way.

Working with your Clinical Customer Success Manager, you can customize your dashboards to show your favorite views, learn how to share them easily across your teams, and create email subscriptions so key insights are always top of mind.

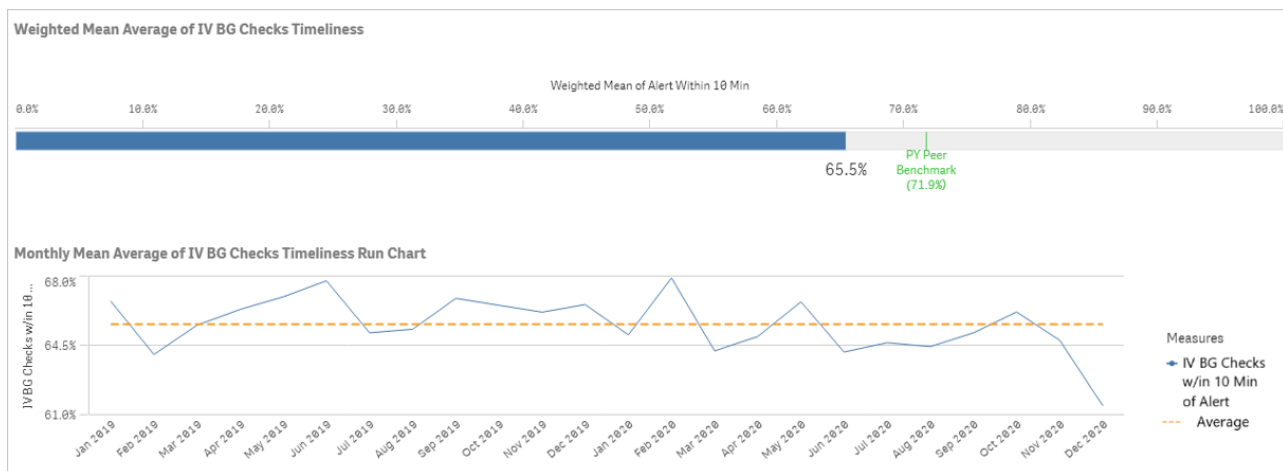
System-level metrics: View glucose management analytics from across the healthcare system in one location as measures of either blood glucose value, patient day, or patient stay.



Filters allow you to easily compare based on any combination of time period, treatment type, facility, unit category, and unit.

Percent Patient Days Glycemic Outcomes by Unit Category							
Category	Less Than 40	Less Than 54	Less Than 70	In Range	Greater Than 180	Greater Than 250	Greater Than 300
ED	0.00%	0.00%	0.00%	7.74%	97.31%	91.40%	83.66%
Floor	0.00%	0.00%	0.00%	100.00%	100.00%	50.00%	50.00%
ICU	0.06%	0.70%	3.85%	68.52%	60.43%	32.18%	22.91%
OB	0.00%	2.13%	14.89%	87.23%	35.11%	11.70%	5.32%
Periop	0.00%	0.00%	0.00%	63.64%	27.27%	9.09%	0.00%
Procedural	0.00%	0.00%	0.00%	28.57%	42.86%	0.00%	0.00%
Stepdown	0.00%	0.00%	1.82%	43.64%	84.55%	50.30%	35.76%

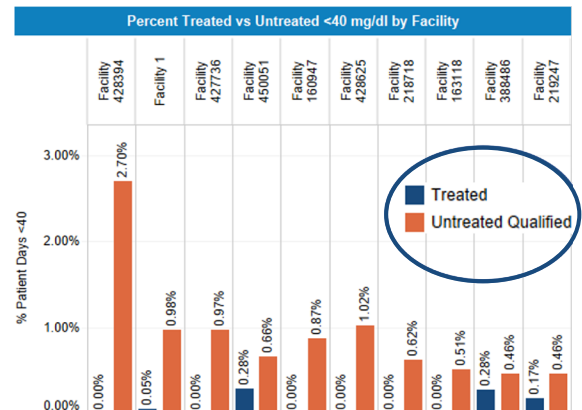
Dynamic Data Visualizations Bring Key Analytics into Focus



View hypoglycemia and hyperglycemia as balancing measures in one chart, track in-range percentages over time, and immediately see where instances of severe hypoglycemia and hyperglycemia are occurring without needing to configure reports or manage spreadsheets.

Track Adherence to Glycemic Management Best Practice

The Blood Glucose Check Timeliness dashboard shows which facilities, units and unit categories are most often checking Glucomannder IV patients within the recommended 10 minutes of the time BGs are due, and the Treated vs. Untreated dashboard compares outcomes of patients on Glucomannder vs. those with persistent hyperglycemia who aren't.



A proven process for change management

Glytec's streamlined post-purchase process ensures all stakeholders have exactly what they need to achieve great results. Our cloud-based technology enables remote implementation and upgrades and reduces reliance on your technical resources to maintain the software. Glytec is the only insulin dosing decision support provider that is HITRUST certified, reflecting our ability to meet the highest standards for protecting healthcare partners' sensitive data and information.

Highlights:



Quick turnaround
(as little as 8 weeks)



100% remote implementation
and update capabilities



Standardized technical process
to minimize IT lift and provide
assistance and resources for
implementation



Training modules and
resources delivered via your
own e-learning system



Unlimited 24/7/365 clinical
and technical support



No additional cost for
training and support

eGMS is EHR agnostic - we've completed hundreds of implementations that integrate with Epic and Cerner, as well as many other EHR platforms. Our team can provide more details about integrating with your specific EHR during a consultation.


**Implement in
as little as
8 weeks.**

eGMS has been implemented at over 300 hospitals, including:



Take the first step toward revolutionizing how your team approaches glycemic management and overall patient safety.

Contact Glytec to schedule a demo or discuss options.

 (864) 370-3297

 glytecsystems.com

 info@glytecsystems.com

The eGlycemic Management System® is a modularized solution for glycemic management across the care continuum that includes Glucommander®. Glucommander® is a prescription-only software medical device for glycemic management intended to evaluate current as well as cumulative patient blood glucose values coupled with patient information including age, weight and height, and, based on the aggregate of these measurement parameters, whether one or many, recommend an IV dosage of insulin, glucose or saline or a subcutaneous basal and bolus insulin dosing recommendation to adjust and maintain the blood glucose level towards a configurable physician- determined target range. Glucommander® is indicated for use in adult and pediatric (ages 2-17 years) patients. The measurements and calculations generated are intended to be used by qualified and trained medical personnel in evaluating patient conditions in conjunction with clinical history, symptoms, and other diagnostic measurements, as well as the medical professional's clinical judgment. No medical decision should be based solely on the recommended guidance provided by this software program.

Glucommander® is only available for use in the United States.

This content is only intended for use in the United States.

Customer service: (888) 458-2683

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