

Risk category	Clinical situation	Potential implications ²⁻⁷	Evidence level ²²
Low risk Evidence supports SGLT2i prescribing	First-line (metformin intolerant)		A + B + E
	Second-line to metformin		A + B + E
	Third-line (add-on to second-line therapies)		A + B + E
	Combination with basal insulin or multiple daily injections of insulin ⁴		A + B + E
	Established CVD		A + B + E
	No history of LLA		A
	No history of PAD		A
	Microalbuminuria		A
	eGFR ≥60 mL/min/1.73m ^{2†}		A + B + E
	Overweight or obese		A + B + E
	Vulnerable to the effects of hypoglycaemia		A
Moderate risk Prescribe SGLT2i with caution	History of PAD	LLA risk	A + C
	Osteoporosis	LLA/bone fracture risk	A + B + E
	Frail/elderly	LLA/bone fracture/falls risk	A + B
	History of foot ulceration	LLA risk	A
	History of fractures	Bone fracture risk	A + C
	GLP-1 receptor agonist combination		A + additional evidence required to support decision
	Ketogenic diet	DKA risk	E
	High HbA1c levels (86 mmol/mol or 10%) [♦]	DKA risk	A + B + E
	Steroid therapy	DKA risk/outside of licensed indication	E
	Cognitive impairment		E
High risk Do not prescribe SGLT2i	BMI <25	DKA risk	E
	Previous LLA	LLA risk	A + C
	Existing diabetic foot ulcers	LLA risk	A
	DKA (or previous episode of DKA)	DKA risk	E + conflicting evidence
	Eating disorders	DKA risk	E
	Rapid progression to insulin (within 1 year)	DKA risk	E
	Latent autoimmune diabetes	DKA risk	A + E
	Excessive alcohol intake	DKA risk/outside of licensed indication	A + E
	Diabetes due to pancreatic disease	DKA risk/outside of licensed indication	A + E
	Stage 3 CKD/eGFR <60 mL/min/1.73m ^{2†}	Outside of licensed indication	
	Receiving loop diuretics**	Not recommended for use with SGLT2is	
	Type 1 diabetes (diagnosed or suspected)	Outside of licensed indication	
	Genetic diabetes	Outside of licensed indication	
	Acute illness [‡]	Outside of licensed indication	
	Pregnancy (or suspected pregnancy), planning pregnancy or breastfeeding	Outside of licensed indication	
	Recent major surgery	Outside of licensed indication	