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| **NAME:** |  | **GRADE:** |  | **DIV/HR:** |  | **DATE OF BIRTH:** |  |
| **SCHOOL:** |  | **SCHOOL ADDRESS:** | | |  | | |

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| **THIS PERSON HAS A LIFE-THREATING DIABETES CONDITION** | | | **TREATMENT FOR STUDENTS NEEDING ASSISTANCE**  **(anyone can give sugar to a student):** | | | |
| **PHOTO** | | **Level of Support:**  **Requires checking that task is done**  **(child is proficient in task):**  Blood glucose testing  Carb counting/adding  Administers insulin  Eating on time if on NPH insulin  Act based on BG result  **Requires reminding to complete:**  Blood glucose testing  Carb counting/adding  Insulin administration  Eating on time if on NPH insulin  Act based on BG result  **Student is completely independent.** | |  |  | | --- | --- | | **Location of fast acting sugar:**  1. If student able to swallow, give one of the following fast acting sugars: | | | **10 grams**        glucose tablets  1/2 cup of juice or regular soft drink  2 teaspoons of honey  10 skittles  10 mL (2 tsps) or 2 packets of table sugar dissolved in water  Other (ONLY if 10 grams are labelled on package): | **OR 15 grams**        glucose tablets  3/4 cup of juice or regular soft drink  1 tablespoon of honey  15 skittles  15 mL (1 tbsp) or 3 packets of table sugar dissolved in water  Other (ONLY if 15 grams are labelled  on package): | | 2. Contact designated emergency school staff person  3. Blood glucose should be retested in 15 minutes. Retreat as above if symptoms do not improve or if blood glucose remains below 4 mmol/L  4. Do not leave student unattended until blood glucose 4 mmol/L or above  5. Give an extra snack such as cheese and crackers if next planned meal/snack is not for 45 minutes. | | | | | |
| **EMERGENCY CONTACY INFO:** | | | |
| **THE FOLLOWING SYMPTOMS REQUIRE ATTENTION:** | | **NAME:** | **RELATIONSHIP:** | **CELL PHONE:** | **OTHER PHONE:** |
| Shaky, sweaty  Hungry  Pale  Dizzy  Irritable  Tired/sleepy  Other: | Blurry vision  Confused  Poor coordination  Difficulty speaking  Headache  Difficulty concentrating |  |  |  |  |
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| **MEDICAL ALERT – GIVING GLUCAGON FOR SEVERE LOW BLOOD GLUCOSE** | | |
| **SYMPTOMS** | | **PLAN OF ACTION** |
| * Unconsciousness * Having a seizure (or jerky movements) * So uncooperative that you cannot give juice or sugar by mouth | | * Place on left side and maintain airway * Call 911, then notify parents * Manage a seizure: protect head, clear area of hard or sharp objects, guide arms and legs but do not forcibly restrain, do not put anything in mouth * Administer glucagon |
| **Medication** | **Dose & Route** | **Directions** |
| Glucagon (GlucaGen or Lilly Glucagon)  Frequency: Emergency treatment for severe low blood glucose | 0.5 mg = 0.5 ml. (for students 5 years of age and under)  OR 1.0 mg =1.0 mL (for students 6 years of age and over)  Give by injection: Intramuscular | * Remove cap * Inject liquid from syringe into dry powder bottle * Roll bottle gently to dissolve powder * Draw fluid dose back into the syringe * Inject into outer mid-thigh (may go through clothing) * Once student is alert, give juice or fast acting sugar |

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| **MEAL PLANNING:** The maintenance of a proper balance of food, insulin and physical activity is important to achieving good blood glucose control in students with diabetes. | |
| In circumstances when treats or classroom food is provided but not labelled, the student is to:  Call the parent for instructions  Manage independently | |
| **BLOOD GLUCOSE TESTING:** Students must be allowed to check blood glucose level and respond to the results in the classroom, at every school location or at any school activity. If preferred by the student, a private location to do blood glucose monitoring must be provided, unless low blood sugar is suspected. | |
| Frequency of Testing:  midmorning  lunchtime  midafternoon  before sport or exercise  with symptoms of hyper/hypoglycemia  before leaving school  Location of equipment:  with student  in classroom  in office  other:  Time of day when low blood glucose is most likely to occur:  Instructions if student takes school bus home: | |
| **PHYSICAL ACTIVITY:** Physical exercise can lower the blood glucose level. A source of fast-acting sugar should be within reach of the student at all times (see page 2 for more details). Blood glucose monitoring is often performed prior to exercise. Extra carbohydrates may need to be eaten based on the blood glucose level and the expected intensity of the exercise. | |
| Comments: | |
| **INSULIN:** All students with type 1 diabetes use insulin. Some students require insulin during the school day, most commonly before meals. | |
| Is insulin required at school on a daily basis?  Yes  No  Insulin delivery system:  Pump  Pen  Needle and syringe (at home or student fully independent)  Frequency of insulin administration: | Location of insulin:  with student  in classroom  in office  other:  \*Insulin should never be stored in a locked cupboard. |

*The undersigned parent/guardian authorizes any adult to administer emergency medication following the instructions outlined above to the above named student in the event of an asthma attack. This protocol has been recommended by the student’s Doctor/Nurse Practitioner. It is the parent/guardian's responsibility to advise the school about any changes to this plan.*

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Parent/Guardian Date Doctor/NP Signature Date