



**Health Services Division
Diabetes Emergency Care Plan**

Students Name: _____ Date of Birth: _____

Diabetes mellitus is a metabolic disorder characterized by hyperglycemia (high blood sugar). The treatment for diabetes is a combination of insulin therapy, exercise, and regulation of diet. The most urgent situation for which the school must be prepared is hypoglycemia (low blood sugar).

Hypoglycemia is most likely to occur in a person taking insulin after physical education or before a meal.

If you see this . . .	Do this . . .
<p><u>Early signs of Hypoglycemia:</u> Hunger, paleness, sweating, “jitters”, headache, weak, cold, clammy, fatigue, or mood changes (*crabbiness), spacey and quiet. *CHECK BLOOD SUGAR UNLESS CHILD IS UNRESPONSIVE.</p> <ul style="list-style-type: none"> *Diabetes Medical Management Plan (DMMP) 	<p>Stay with student , keep student calm/quiet <u>Steps to take during an diabetic episode: For alert student</u></p> <ol style="list-style-type: none"> 1. Call for School Nurse EXT _____ or escort student to clinic. 2. Have student test glucose or test glucose if trained. 3. If below target glucose in DMMP (usually 80), give the student concentrated sugar immediately. Give 15 grams of fast-acting glucose like: glucose tablets, glucose gel, fruit juice or regular soda (4 ounces), sugar dissolved in a small amount of water. 4. Retest in 10-15minutes. Over target blood glucose Stop treating, follow treatment with an extra snack per medical provider’s orders Below target blood glucose repeat step 3. 5. If no improvement call Parent/Guardian and advise medical evaluation
<p><u>Signs of Advanced Hypoglycemia:</u> Disorientation, dizziness, uncooperativeness (even combativeness), seizures, and unresponsive/unconsciousness.</p> <p>*If unresponsive/unconscious, or seizing presume the student is having low blood glucose and CALL 911 immediately.</p> <p>*If student is unresponsive (breathing or pulse absent) initiate CPR.</p>	<ol style="list-style-type: none"> 1. Turn student on their side and administer I.M. Glucagon, if prescribed and trained. Student should remain in this recovery position until fully awake. *If glucagon is administered student may vomit. 2. Glucose gel tube can be administered inside cheek and massaged from outside while waiting or during administration of glucagon. Glucagon/Glucose gel could be used if student has documented low blood sugar and is vomiting or unable to swallow. *Be alert for choking 3. When the student regains consciousness, feed them a high sugar liquid (sugar dissolve in water, honey and water, 4-6 ounces fruit juice, 6 ounces regular soda). Have student take small sips as they may be nauseated and vomit. 4. Once a student can safely swallow clear liquids without vomiting provide a longer-acting source of sugar (carbohydrate with protein). 5. Monitor student for another episode of hypoglycemia 6. Call Parent/Guardian and notify Administration

<p>Signs of Hyperglycemia</p> <p>Decreased alertness, deep, rapid breathing, dry skin and mouth, flushed face, frequent urination, fruity smelling breath, headache, muscle stiffness or aches, nausea/vomiting, stomach pain</p> <p>*Diabetic Ketoacidosis is a life-threatening condition that affects people with diabetes</p>	<p><u>Stay with student , keep student quiet</u></p> <ol style="list-style-type: none"> 1. Call School Nurse at EXT _____ and state student's name. 2. Follow student's diabetic management plan 3. Let student test for ketones 4. Help interpret ketone results if indicated. 5. Encourage water and moderate exercise. ONLY if ketones are negative. 6. Call Parent/Guardian 7. Call 911 if ketones are in large range with positive results, student is without insulin and Parent/Guardians are unable to reach 8. Notify Administration
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Emergency Medication Name	Amount	In Clinic or On Student
1. _____	_____	_____
2. _____	_____	_____

Comments or special instructions:

Parent/Guardian Name: _____ Phone _____

School Nurse/Licensure/Initials	Student's Grade / Date / Nurse's Initials			

