



Individual Diabetic Management Care Plan

Students Name		Date of Birth	
Parent/Guardian Name		Mobile Number	Relationship
Parent/Guardian Name		Mobile Number	Relationship
Emergency Contact		Mobile Number	Relationship
Diabetes Team Contact Name		Telephone	Facility
Type 1 or Type 2 diabetes		Age diagnosed	
Glucose monitoring in school: (how/when)			
Hypoglycaemia: (symptoms/treatment)			
Hyperglycaemia: (symptoms/treatment)			
<p>School held medication <i>(please attach doctor's prescription and medical report)</i></p> <p>Parents need to provide supplies to the school clinic (if prescribed). No student should be carrying medication without the prior knowledge of the school nurse. These may include:</p> <ul style="list-style-type: none"> • Blood glucose meter with lancet device • Glucose testing strips • Insulin pen with needles, insulin cartridge, line change equipment for a pump • Glucagon emergency medication in original container <i>(this will be stored in the school clinic in an accessible place to be used in emergencies only)</i> • Hypo kit: fast acting source of glucose, sugary drinks, carbohydrate snack • Spare batteries • Additional items _____ 			

Should _____ suffer a diabetic emergency with no school nurse present, I give permission for any of the adults working with them to administer the prescribed glucogel and glucagon if necessary. This will be done in their capacity as a responsible adult rather than a qualified medical practitioner. First aiders will have been given instruction by the school nurse prior to any trip/activities. I agree that the school and its employees shall not be liable for any claims that I may have arising from the administration of this medicine to my child at school or on trips/activities.

Parent's Full Name (please print)	Parent's Signature	Date
Nurse's Full Name (please print)	Nurse's Signature	Date



Never send a child with suspected low/high blood sugar anywhere alone

Causes of hypoglycaemia (low blood sugar below 70mg or 3.9 mmols/dl)

- Too much insulin
- Missed or delayed meal
- Intense or unscheduled exercise

Mild symptoms	Moderate symptoms	Severe symptoms
<ul style="list-style-type: none"> ▪ Hunger ▪ Shakiness ▪ Weakness ▪ Pale and sweating ▪ Dizziness and/or drowsiness ▪ Personality change/irritability ▪ Inability to concentrate 	<ul style="list-style-type: none"> ▪ Headache ▪ Poor coordination ▪ Blurred vision ▪ Slurred speech ▪ Confusion 	<ul style="list-style-type: none"> ▪ Loss of consciousness ▪ Seizure ▪ Inability to swallow



Action - Mild/Moderate

Action - Severe

- Inform school nurse/first aider
- Check blood sugar
- Student may/may not treat self (dependent on age and ability)
- Provide quick sugar source (15g carbohydrate)
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- Wait 10-15 minutes and **recheck blood sugar**
- Repeat food if symptoms persist or blood glucose is less than
-
- Follow with a snack of carbohydrate and protein
-

- Inform school nurse/first aider
- Administer glucogel sublingual if conscious
- Position on side
- Administer glucagon as prescribed
- Dose -----
- Call 999
- Inform parents/carer

Causes of hyperglycaemia (high blood sugar above 350 mg or 19.4 mmols/dl)

- | | |
|---|---|
| <ul style="list-style-type: none"> ▪ Too little insulin ▪ Pump malfunction ▪ Illness | <ul style="list-style-type: none"> ▪ Food intake not covered by insulin ▪ Decreased physical activity ▪ Severe physical/emotional stress |
|---|---|

Signs and symptoms

- | | |
|---|--|
| <ul style="list-style-type: none"> ▪ Increased thirst and/or dry mouth ▪ Frequent/increased urination ▪ Nausea/vomiting ▪ Fatigue | <ul style="list-style-type: none"> ▪ Abdominal pain ▪ Blurred vision ▪ Heavy breathing/shortness of breath ▪ Fruity breath |
|---|--|



Action/Treatment

- Inform school nurse/first aider
- Check blood sugar
- If using a pump, ensure it is connected and functioning properly
- Inform parent/carer
- Administer supplemental insulin dose
- Give extra water
- Recheck blood glucose every **two hours** to ensure it is reducing
- Restrict physical activity if blood glucose is high
- Arrange for transfer to hospital if no improvement (i.e. clinically unwell and blood glucose is not decreasing)