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| **Emergency Action Plan:** **Glucose Monitoring Treatment** | PHOTO: |
| **STUDENT:** |  | **DOB:** | **GRADE/TEACHER:** |

**✜TREATMENT PLAN: Low Blood Glucose (Hypoglycemia): Below       mg/dl**

Causes: •Too much insulin •Too much exercise •High excitement/anxiety •Too few carbohydrates eaten for the amount of insulin given

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| **If you see this:** | **Follow this: ACTION PLAN** |
| ***Signs of Mild Low Blood Glucose*****(STUDENT IS ALERT)*** + Headache
	+ Sweating, pale
	+ Shakiness, dizziness
	+ Tired, falling asleep in class
	+ Inability to concentrate
	+ Poor coordination
	+ Other:
 | 1. Responsible person accompany student to health room or check blood glucose on site
2. Check blood glucose
3. If less than **mg/dl,** give one of the following sources of glucose: (~15gms for fast-acting sugar (student < 5 y.o. give 7.5gms)

 *(Checked are student’s preferred source of glucose but if not available any of these may be used)* [ ]  2-4 glucose tablets [ ]  6-9 Sweettarts® candies [ ]  2-4 oz. Orange or other 100% juice [ ]  8 oz of milk [ ]  4-6 oz. sugar soda (not sugar-free) [ ]  Other:      4. After 10-15 minutes, **re-check** blood glucose 1. Repeat giving glucose & re-check if necessary until blood glucose is > mg/dl.

*Do not give insulin for the carbs used to bring up glucose level* [ ]  Follow with a 15gm complex carb snack (do not give insulin for these carbs)  **OR** if lunch time – Send to lunch (give insulin per orders). *Notify parent/guardian & school nurse*Comments:       |
| ***Signs of Moderate Low Blood Glucose*****(Student has decreased alertness)*** + Severe confusion
	+ Disorientation
	+ May be combative
 | 1. Check blood glucose
2. Keeping head elevated, give one of the following forms of glucose:
* 1 tube Cake Mate® gel or instant glucose applied between cheek and gum
1. After 10-15 minutes, check blood glucose again
2. Re-treat if necessary, until blood glucose is **>       mg/dl,** Follow with 15gm complex carb snack (do not give insulin for these carbs)
3. Suspend/disconnect pump. *Notify parent/guardian & school nurse*

Comments:       |
| ***Signs of Severe Low Blood Glucose**** Not able to or unwilling to swallow
* Unconsciousness
* Seizure

**GIVE NOTHING BY MOUTH!** | 1. **Call 911, activate Emergency response,** place student on their side, **CHECK BG**
2. If personnel are authorized give **Glucagon,** prescribed dose: **mg(s)** Intramuscular
3. Suspend/disconnect pump & send pump to hospital with parent/EMS
4. Remain with student until help arrives . *Notify parent/guardian and school nurse*

Comments:       |

**✜Treatment Plan: High Blood Glucose (Hyperglycemia) Blood Glucose above       mg/dl**

Causes:: •Illness •Underestimated carbohydrates and bolus •Hormonal Changes •Increased stress/anxiety •Insulin pump not delivering insulin

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| ***Signs of High Blood Glucose*****(STUDENT IS ALERT)****Symptoms could include:*** Extreme Thirst
* Headache
* Abdominal Pain
* Nausea
* Increased Urination
* Lethargic
* Other:

***Note:*** * If on a pump, insulin may need to be given by injection – Contact school nurse & parent.
* *Allow to carry water bottle & use rest room unrestricted.*
 | * + - 1. Provide blood glucose correction as indicated in Provider Orders or per pump. ***Recheck in 2 hours.***
			2. When hyperglycemia occurs other than at lunchtime – contact school nurse & parent to determine correction procedure per provider orders or one-time orders.
			3. *Encourage to* drink water or DIET pop (caffeine free): *1 ounce water/year of age/per hour*
			4. *Notify parents and school nurse if* ***BG > 300mg or*       *as indicated on provider orders.***

***Contact the school nurse for Exercise Restrictions and School Attendance per Standards.**** + - 1. ✓Check urine/blood ketones if BG is over **300mg/dl X2 or** *as indicated on provider orders.* & it has been > than 2 hours since last insulin dose. Recheck blood glucose in 2 hours following correction. Contact school nurse & parent with results.
			2. ✓ Check urine ketones or [ ]  blood ketones, if glucose **> 350mg/dl** or when ill, nausea, stomachache, lethargic, and/or vomiting. Contact school nurse & parent with results.
			3. If BG **>300mg/dl** & urine ketones are **moderate to large or if blood ketones are greater than 1.0** mmol, **call parent & school nurse immediately! No exercise.** Recommend: Student to be released to parent/guardian for treatment/monitoring at home
			4. **For PUMP users:** If BG > 350 mg/dl & ketones are positive,insulin to be given by injection by School Nurse or delegated staff (can use pump calculator to determine bolus) and set change by parent/guardian or independent student.  If ketones negative, give an insulin bolus via pump and retest in 1-2 hours. Then if the BG continues to be > 350mg/dl, the correction bolus should be given by injection (can use pump calculator to determine bolus) and set change (to be changed by parent/guardian or independent student). Notify parents of BG results, ketone levels and actions.
			5. If student’s BG level is **>350 mg/dl & symptomatic** (illness, nausea, vomiting) - notify school nurse & parent. Student must go home to be treated/monitored by adult.

Comments:       |
| ***Parent Signature:*** |  | Date: |  |
| ***School Nurse Signature:*** |  | Date: |  |