

School Medical Management Plan for Student with Diabetes

Diabetes type 1 Diabetes type 2 Date of diagnosis: _____

Required blood sugar testing at school:

May student perform own blood glucose test (Exception: may need assistance if blood sugar is low) Yes No

Trained personnel must perform blood glucose test Yes No

Trained personnel: _____

Times to test blood glucose: (It is preferred that student be allowed to check the blood sugar in the classroom)

symptoms of hypoglycemia symptoms of hyperglycemia before breakfast before snack before lunch

before getting on the bus/home before/after exercise.

The blood glucose does not need to be checked prior to gym or recess if it occurs after snack, breakfast, or lunch.

If blood glucose is below 80 or above 300 refer to Quick Reference Guide

Exercise and Sports

A fast-acting carbohydrate such as 4 ounces of juice or 4 glucose tablets should be available at the site of exercise or sports.

Restrictions on activity: Student should not exercise if blood glucose level is **below 100mg/dl** (without taking a snack) or **above 300mg/dl** with **moderate to large urine ketones present.**

For students on insulin

Lunchtime Dose: Humalog/Novolog/Apidra (circle type used) Pens Syringes Pump

Set dose _____ units use attached chart (provided by parents)

Flexible dose: Insulin/carb ratio: _____ Correction factor: _____ Target blood sugar: _____

Parents are authorized to adjust the insulin dosage? Yes No

*Insulin doses for children are constantly changing due to growth spurts, etc. - Parents are instructed how to do this.
(Does not require a physician's order - Parents will inform school of dosing changes.)*

Can student determine correct amount of insulin? Yes No/Needs assistance or supervision

Can student draw correct dose of Insulin? Yes No/Needs assistance or supervision

Can student give own injections? Yes No/Needs assistance or supervision

For students on a Pump

Type of Pump: _____ Type of Infusion Set: _____

The student wears a device the size of a cell phone filled with insulin. **This device must be with the student at all times.**

Student's Pump Abilities/Skills:

Bolus correct amount for carbohydrate consumed? Yes No/Needs assistance or supervision

Calculate and administer corrective bolus? Yes No/Needs assistance or supervision

Calculate and set temporary basal rate? Yes No/Needs assistance or supervision

Disconnect/reconnect pump at infusion set? Yes No/Needs assistance or supervision

Prepare reservoir and tubing? Yes No/Needs assistance or supervision

Insert/replace infusion set? Yes No/Needs assistance or supervision

Location of Glucagon: _____

Additional Recommendations (School supplies: Insulin, Syringes, Pen Needles, Pump supplies, Glucometer, Test Strips, Glucagon, Ketone Strips) _____