GENOA CENTRAL SCHOOL DISTRICT

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Student Name:_____ Date of Birth:_____

Most Recent A1C and Date:_____

BLOOD GLUCOSE MONITORING

Meter Type:_____ **Testing Independently: ☐ Yes ☐ No**

Testing Times: **☐ Before meals** **☐ Two hours after insulin dosing**

☐ Before snacks **☐ Before PE** **☐ After PE**

☐ Suspected hypoglycemia/hyperglycemia

MEDICATION

Insulin Type: _____ **Delivery Device:** **☐ Insulin pump ☐ Injection**

1. **Meal/carbohydrate Bolus:**_____Units of insulin per ____ grams of carbohydrate at Breakfast.
2. **Meal/carbohydrate Bolus:**_____Units of insulin per ____ grams of carbohydrate at Lunch.

Administer at: ☐ Meals ☐Snacks (if over _____ grams carbohydrate)

Correction Bolus: _____Units of insulin for every _____ mg/dl above _____ mg/dl administer @ Meals

IF GLUCOMETER READS "HI", USE 600 MG/DL FOR CORRECTION

DIETARY; CARBOHYDRATES MUST BE COUNTED FOR ALL MEALS AND SNACKS

*****The following is an example of mealtime dosing od insulin*****

Meal bolus: 1 unit per 15 gram carbohydrates

Correction bolus: 1 unit for every 50 mg/dl over 150mg/dl

Carbs eaten: 72 **Blood Glucose:** 245

72/15=4.8 units 245-150=95/50=1.9 units

Add together and round:

4.8 + 1.9= 6.7 units give 7 units

Basal Insulin: _____units Lantus _____ @ Home ____ @ School

☐ pump

MN

☐am/pm ☐ units/hour

☐am/pm ☐ units/hour

☐am/pm ☐ units/hour

☐am/pm ☐ units/hour

Name:_____ Date of Birth:_____

Hypoglycemia (blood glucose < 70 mg/dl)

Hypoglycemia (low blood sugar) is a potential medical emergency at school. Causes of hypoglycemia include:

- Getting too much insulin resulting from a miscalculation of insulin dose or miscounted carbohydrate amount
- Increased exercise without eating extra carbohydrates

Signs of hypoglycemia can vary from student to student. It also depends on how low the blood sugar is. The following are general signs of a low blood sugar:

headache	weakness
sweating	confusion
shakiness/tremors	personality changes
irritability	rapid heart rate

If hypoglycemia is suspected in a student they should never be allowed to walk alone to health office for treatment. The student should be escorted to the office for treatment.

Treatment of Hypoglycemia

If blood sugar under 70 mg/dl:

1. Give 15 grams fast-acting carbohydrate (4 oz juice, 3 glucose tablets, 2 rolls smarties, 1 tube glucose gel/cake icing gel).
2. Wait 15 minutes and recheck blood sugar.
3. If blood sugar not above 70 mg/dl, retreat with 15 grams and recheck in 15 minutes.
4. After blood sugar above 70 mg/dl, give small snack (15 grams of carbohydrate plus protein) if it will be more than 30 minutes until a regularly scheduled meal/snack.
5. If low blood sugar occurs at meal time, you must get the blood sugar above 70 mg/dl before giving the meal. No correction dose will be required regardless of the blood sugar reading, but the carbohydrate/meal bolus will need to be given for the meal eaten.

   if on an insulin pump and less than 50 mg/dl, initiate a temporary basal of 5% for thirty minutes and give 30 grams of fast-acting carbohydrate. Recheck blood sugar in 15 minutes, if not above 70 mg/dl, follow orders above.

With severe hypoglycemia the student may become unconscious or have seizures requiring glucagon. Glucagon is a hormone that stimulates the liver to release stored glucose resulting in a rise in blood sugar level. It is not given if the student is able to eat or drink. The most common side effects from this medication are headaches, nausea, and vomiting.

1. Mix contents of syringe and vial as follows:
   - Inject all of sterile diluent into vial
   - Roll vial in hands until all powder is dissolved
2. Give ____ mg of solution IM or SubQ.

   *** Please remember you cannot overdose using this injection***

Name:_____ Date of Birth:_____

Hyperglycemia (high blood sugar)

Hyperglycemia is not necessarily a medical emergency. Some degree of high blood sugar is not necessarily a sign of noncompliance or poorly controlled diabetes. Causes of hyperglycemia include:

- Not getting enough insulin resulting from a miscalculated insulin dose or carbohydrate count
- Missing an insulin dose
- Decreased amount of physical activity normally engaged in
- Being ill
- Mental or emotional stress

Signs of hyperglycemia can vary from student to student but can include:

increased thirst	headache/blurry vision
increased urination	behavior changes
increased hunger	nausea
inability to concentrate	

Treatment of Hyperglycemia

For blood sugar greater than 240 mg/dl:

1. Check urine for ketones.
2. Free access to water or carbohydrate free fluids.
3. Free access to the restroom
4. Give correction dose of insulin. (If elevated at meal time)
5. Recheck blood sugar in 2 hours. If still elevated, contact parent/guardian for further instructions.

Ketones

Ketones are the result of the body breaking down fat and muscle for energy when there is not enough insulin on board to facilitate getting glucose from the blood stream into the cells. Ketone strips should be stored out of direct light and should be replaced after the bottle has been opened for 60 days. The foil-wrapped strips are good until the expiration date printed on the packaging. Ketones will turn the strip a light pink to a very dark purple. The following rules apply when checking ketones:

1. Ketones should be checked any time the blood sugar is greater than 240mg/dl or if the student is ill or vomiting
2. If ketones are negative, recheck in 2 hours.
3. If ketones are trace – small, give 8 oz carbohydrate free fluid every hour. Recheck ketones in 4 hours.
4. If moderate – large ketones are present, contact parent/guardian immediately for further instructions. In general the student will need to be closely monitored and this can be best done one-on-one by the parent/guardian.
5. No exercise is allowed if ketones are present or the blood sugar is greater than 400 mg/dl.

Name:_____ Date of Birth:_____

Special Considerations

School Parties

Students with diabetes may participate in school parties with the following considerations:

- If the carbohydrates in foods eaten at the party are greater than their meal bolus, an extra insulin injection will be required. (See meal/carbohydrate bolus)
- The student will need a carbohydrate-free drink available

PE/Gym class

Participation in PE/gym class is allowed for the student with diabetes as long as the blood sugar is less than 400 mg/dl and there are no ketones present in the urine. Exercise uses blood sugar and helps sugar enter the cells to be used as energy. An extra snack may be required for PE/gym class unless it is something done daily and is already figured into your diabetes management. General guidelines include:

TYPE OF EXERCISE	IF BLOOD SUGAR IS:	ADDED SNACK:
*low to moderate intensity * short duration of 30 minutes or less (examples: walking, riding bicycle, or outside play)	Less than 100 100 or above	15 gm carbohydrate An extra snack is not necessary
* moderate intensity * duration of around 1 hour (examples: tennis, swimming, jogging, riding a bicycle, or dancing)	less than 100 100-180 180-240	30 gm carbohydrate before exercise, plus 15gm for each consecutive hour 15 gm carbohydrate An extra snack is not necessary

Field Trips

It's important to remember students with diabetes must be able to manage their blood sugars while away from the main school campus and possibly away from the school nurse. To insure this they need access to their glucometer, insulin and all related supplies. There must be at least one person attending the field trip who can perform/assist in carbohydrate counting, blood sugar monitoring, and insulin injections. They must also be able to recognize and treat low and high blood sugars.

Name:_____ Date of Birth:_____

ADDITIONAL INSTRUCTIONS:

THIS PHYSICIAN ORDER IS VALID FOR 1 CALENDAR YEAR FROM DATE OF SIGNATURE.

This physician order has been reviewed and approved by:

_____ _____

Signature of Physician Date

_____

Printed name of physician

Physician Office:_____

Address:_____

Phone:_____Fax:_____

*****Any changes to these orders will be addressed in an addendum order requested by the parent/ guardian or the school nurse*****