

Pittsburgh Public School District
Child Diabetic Plan (ages _____ to _____)

Student's Name	D.O.B.	Age	Grade
School Year	(This plan needs updated yearly)		

1. Student should check the blood sugar before lunch at _____ a.m. / p.m. and whenever they feel symptomatic.
2. YES / NO (circle) - Student needs a staff member to oversee blood sugar checks.
3. YES / NO (circle) - Student is allowed to carry diabetic supplies and snacks at all times.
4. YES / NO (circle) - Student requires staff oversight on field trips.
5. YES / NO (circle) - Please record the time and blood sugar results.
6. YES / NO (circle) - Student requires insulin injections during school. (Enclose specific guidelines.)
 - a. YES / NO (circle) - Student requires a school staff member to give the insulin.
 - b. YES / NO (circle) - Student can calculate, measure and give required insulin.
7. Student uses an insulin pump: YES / NO - (Specific orders are required.)
 - a. YES / NO (circle) - Student needs supervision with carb counting and bolus calculation.
 - b. YES / NO (circle) - Student needs help with giving boluses or operating the pump.
 - c. YES / NO - Recommendations of BS checks and response to BS <70: _____

8. School lunch should be modified to substitute fruit for desserts, and student should drink milk, water, or diet drinks. Student should have a snack at ~ _____ a.m. or ~ _____ p.m. On field trips etc., every effort should be made to ensure the student gets snacks and lunch on time.
9. If student is acting irritable or tired, they should be accompanied to the office to test blood sugar.
10. If blood sugar is <70:
 and snack/lunch is <30 minutes away - give 4 oz of juice and student should eat snack/lunch and recheck if symptomatic.
 If snack/lunch is more than 30 minutes away - give 4 oz of juice and 4 peanut butter crackers and blood sugar should be rechecked if still symptomatic.
 Parent wants to be called. YES / NO
11. If blood sugar is >300 drink one - two 8 oz glasses of water. Bathroom privileges should be provided as needed. Ketones should be checked - YES / NO. If Ketones are moderate to high, what action should be taken?

 Parent wants to be called. YES / NO
 Is Insulin required for high BS? YES / NO If yes, please elaborate _____

12. YES / NO (circle) - Student should be observed at lunch and parent/guardian called if lunch is not eaten.
13. Parents are responsible for providing snacks, diabetic supplies, meters, and fast acting sugars like cake icing, glucose gel or dissolvable tablets.
14. YES / NO (circle) - Student should test BS Before or After (circle) Gym.
 Please list any gym or competitive sports restrictions or limitations: _____

15. Are there restrictions or limitations for classroom snacks and parties? YES / NO - If yes, please list and provide:

16. On Field trips student should take diabetic supplies, glucometer, and a source of fast acting sugar in case of a low blood sugar reaction.
17. Has student ever been given Glucagon? YES / NO - What were the circumstances, and were there any side effects from the glucagon? _____

Student's Name	D.O.B.	School Year
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Symptoms (Child Diabetic Plan)

Hypoglycemia (low blood sugar) sudden onset: This is a medical emergency.

Causes: Too much insulin and not enough food.

General symptoms, The 6 S's: Starving, sleepy, shaky, sweaty, spacey, stubborn, also tired, dizzy and irritable.

Please list specific red flag statements, symptoms or behaviors that the student says or exhibits when he/she becomes hypoglycemic or "low":

If student gets these symptoms, fast acting sugar should be given after the blood sugar is checked. Student should not be left alone. Fast acting sugar should not be withheld if BS cannot be checked.

If the BS is < 70 give fast acting sugar. (Fast acting sugar: 3 glucose tablets, ½ tube cake mate gel, ½ cup apple or grape juice or regular soda)

If student is conscious but unable to drink an entire glass of juice, cake icing, or glucose gel can be squirted into the space between the cheek and gum and then massaged into the mouth by rubbing on the outside of the cheek and jaw. This will raise the blood sugar up within 3-10 minutes.

In the rare event, that student becomes unconscious or has a seizure, Call 911, place student on their side, and notify the school nurse and parent/guardian.

If necessary, 1 mg of Glucagon will be given by the paramedics, the nurse, or parent.

Hyperglycemia (high blood sugar) Slow onset. Causes: Too much food and too little insulin.

Student exhibits these symptoms when he/she is hyperglycemic or "high":

If student exhibits these symptoms, test the blood sugar and follow the directions on page 1.

Emergency Phone Numbers: (CHECK THE ONE TO BE CALLED FIRST)

<input type="checkbox"/>	Parent/Guardian	Cell Phone	Work Phone
	Home Phone		
<input type="checkbox"/>	Emergency Contact Name	Phone	

I agree to the above plan, and agree that school health personnel and my child's physician or staff may discuss this plan if there are questions.

Parent/Guardian	Date	Physician	Date
School Principal	Date	School Nurse	Date