

School Diabetes Management Orders School Year 2009-2010

Date: _____

Student Name: _____ Date of Birth: _____

Diagnosis: Type 1 Diabetes Type 2 Diabetes Other: _____

Blood Glucose (BG) Monitoring

Target BG range is: 70 – 150 mg/dL 80 – 180 mg/dL other: 120

Student:

- May check own BG
- May check BG with supervision
- Must have school personnel check BG

Usual time to check BG:*

- Prior to meals and/or snacks
- Prior to exercise
- After exercise
- Other: _____

* Additional BG checks are needed if the student has signs or symptoms of a low blood sugar (less than 80 mg/dl) such as headache, shakiness, and/or extreme hunger.

For Hypoglycemia (< 70 mg/dL or < 80 mg/dL)

- Give student 4 ounces of juice or 15 grams of fast-acting carbohydrate
- Repeat BG check in 15 minutes
- Repeat the above steps if BG remains less than < 70 mg/dL or < 80 mg/dL
- If the student becomes unconscious or is otherwise unable to take anything by mouth (e.g. vomiting): administer glucagon via subcutaneous injection and call 911.
- This student will require mg of glucagon, equal to units on an insulin syringe.

** Side effects of glucagon may include nausea and vomiting. Place student on side if unconscious. In addition, if student wears a pump, please suspend or disconnect insulin pump. *Resume pump when student's BG is > 120 mg/dL.*

For Hyperglycemia (> 250 mg/dL or > 300 mg/dL)

- If blood glucose is greater than 300 mg/dL two times within 3 hours *and* correction dose was given, urine must be tested for ketones.
- Please allow this student to have unrestricted bathroom privileges and request blood sugar check if bathroom use is excessive; elevated blood glucoses can cause frequent urination.
- Drinking a non-carbohydrate containing fluid such as water is encouraged.

** For a student with a pump: please contact student's parents whenever the blood glucose is > 300 mg/dL twice in a row. Infusion set may need to be changed.

Insulin Orders

Student:

Uses Novolog

Uses Humalog

Other: _____

Insulin is administered via:

Syringe

Pen

Pump: _____

Student **can** draw up insulin & administer own insulin **without** supervision

Student **can** draw up insulin & administer own insulin **with** supervision

Trained adult must draw up & administer insulin

Carb coverage

For snack: unit of insulin covers grams of carbohydrate

For lunch: unit of insulin covers grams of carbohydrate

Other: _____

+ PLUS +

Correction dose (when pre-meal blood glucose > target blood glucose)

1 unit of insulin lowers blood glucose mg/dL above target of mg/dL.

* A correction dose should **only** be given at lunch or snack if 3 hours have passed from when the last insulin dose was given.

Example

Carb coverage *plus* Correction dose:

Current BG = 220 Lunch carbs = 60

Correction factor = 100 Target BG = 120

Insulin/carb ratio = 1 unit of insulin covers 20 grams of carbohydrate

Carb coverage $\frac{60g}{20} = 3 \text{ units}$ PLUS Correction dose $\frac{220 - 120}{100} = 1 \text{ unit}$

Total dose: 3 + 1 = 4 units

Physician's Statement for Requested 504 Accommodations

1. Medical Diagnosis:
Type 1 Diabetes

2. Describe the nature of the concern:
RN supervision, Monday — Friday in school
Provides a clean & safe environment

3. Potential impact affecting the student's educational performance:
Hyperglycemia & Hypoglycemia may interfere with student's concentration

Below are academic related accommodations to be provided in accordance with the provisions of *Diabetes Resource Manual for School Personal (ADA)*.

Academic-Related Accommodations:

- 1. The student's teacher and all staff members providing instruction to her shall be trained in the recognition and treatment of hypoglycemia and hyperglycemia.**
2. The student's teacher will work with the student and parents to coordinate a meal and snack schedule to coincide with the schedule of her classmates, to the closest extent possible. The teacher will notify the parents at least 48 hours in advance of any expected changes that may affect the student's meals and snack times or exercise routine.
3. The teacher will permit the student to eat a snack in the classroom, or anywhere on the school grounds, at a time designated by the student's parents as well as treating hypoglycemia.
4. The student shall have immediate availability and access to treatment of hypoglycemia without the necessity for her to be without direct supervision by a knowledgeable adult and without the necessity for her to travel to the health clinic.
5. The student shall be permitted to carry on her person at all times: glucose tabs, glucose gel, glucagon, insulin pump, snacks, glucometer and incidental supplies.
6. A snack box, glucometer and incidental supplies shall be maintained in the student's classroom and should have access to them for both routine testing and testing for hypoglycemia and hyperglycemia.
7. The student's medical supplies and snacks, including insulin and glucagon, must be maintained in the school's health office, and need to be available when the student is on field trips or other off-site events.
8. The student must have unrestricted bathroom privileges and access to drinking water.
9. The student shall be permitted to participate fully in all extracurricular activities, including sports, field trips, enrichment programs, with the access to the health accommodations contained in the student's Health Care Plan.
10. A trained teacher or other designated trained staff shall accompany the student on field trips and provide accommodations in accordance with these provisions. The student's supplies and snacks must travel with the student during off-site activities such as field trips.

11. The student must have flexible scheduling and extended time for testing, as needed.
12. Substitute teachers and substitute health aides must be made aware of the student's diabetes and be prepared and capable of providing compliance with the provisions herein.
13. School staff members, the student's teacher, school administrators and other designated individuals must be provided with diabetes education and training prior to the beginning of each school year by a certified diabetes educator, pediatric endocrinologist and/or parent.
14. The student's bus driver shall be trained in the administration of glucagon, the signs, symptoms and treatment of both hypoglycemia and hyperglycemia. The student must be permitted to carry diabetic supplies, including an edible snack, and shall not be prohibited from eating snack or otherwise treating a low blood sugar.
15. The student shall not be penalized for absences required medical appointments and/or illnesses.
16. The student shall have access to school medical personnel upon request.
17. The school shall maintain records of the student's blood glucose levels and treatments.
18. School must communicate with parents daily regarding the student's blood glucose levels and treatments.
19. A designated school staff member shall monitor the student's lunch table in order to assess carbohydrate intake for pump/insulin injection users and allow adequate time or extra time, if needed, for lunch by the student.

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