

STUDENT'S NAME: _____

- Student's usual LOW blood glucose symptoms:**
- _ Shaky or jittery
 - _ Uncoordinated
 - _ Sweaty
 - _ Irritable, nervous
 - _ Hungry
 - _ Argumentative
 - _ Pale
 - _ Combative
 - _ Headache
 - _ Changed personality
 - _ Blurry vision
 - _ Changed behavior
 - _ Sleepy
 - _ Unable to concentrate
 - _ Dizzy
 - _ Weak, lethargic

ALGORITHMS FOR BLOOD GLUCOSE RESULTS

CHECK BLOOD GLUCOSE

- Student's usual HIGH blood glucose symptoms:**
- | | |
|-----------------------------------|--|
| <i>Hyperglycemia</i> | <i>Emergency levels</i> |
| _ Increased thirst, dry mouth | _ Extreme thirst |
| _ Frequent or increased urination | _ Nausea, vomiting |
| _ Change in appetite, nausea | _ Severe abdominal pain |
| _ Blurry vision | _ Fruity breath |
| _ Fatigue | _ Heavy breathing, shortness of breath |
| Other | _ Increasing sleepiness, lethargy |

BELOW 70

70 – 90

91-125

126-300

ABOVE 300

1. Give 15 gm fast-acting carbohydrate without insulin coverage.
2. Observe for 15 minutes then retest blood glucose.
 - a. If less than 70, repeat 15 gm carbohydrate and retest in 15 min.
 - b. If over 70 and not eating a meal within an hour, give carbohydrate and protein snack without insulin coverage.
3. Notify school nurse and parent if no improvement
4. Student should not exercise.

1. If prior to exercise or immediately following strenuous activity and **NO** meal/snack is planned within 30 minutes, give 15 gm carbohydrate and protein snack.
2. If **NOT** exercise-related and student is *symptomatic*, observe and recheck in 15 minutes.
3. If **NOT** exercise-related and is **NOT** symptomatic, return to class.

Student may eat before exercising or recess.

No action needed.

- STUDENT TREATED BY INJECTION**
1. Use correction scale or formula at lunch or every 2-3 hours
 2. Check ketones if symptoms or if blood glucose > 300 twice in a row:
 - a. If ketones are *absent or small*, encourage exercise and water
 - b. If ketones *moderate or large*:
 - No exercise; give water
 - Add units of insulin per orders
 3. Notify school nurse and parent
 4. **Provide free, unrestricted access to water and the restroom.**

- STUDENT TREATED BY PUMP**
1. If 2-3 hours since last bolus, treat with correction bolus *via pump*. Re-check in 2-3 hrs. Trouble shoot pump function.
 - Check for redness at site, tubing for kinks or air bubble, insulin supply
 2. If blood glucose still ≥ 300 mg/dl and not explained, check ketones:
 - a. If ketones are *absent or small*, encourage exercise and water
 - b. If ketones *moderate or large*:
 - Give insulin correction dose per orders **via syringe**.
 - No exercise; encourage water
 3. Change infusion set or continue insulin injections every 2-3 hours via syringe.
 4. Notify school nurse and parent
 5. **Provide free, unrestricted access to water and the restroom.**

- CALL 911 if student becomes unconscious, has seizures, or is unable to swallow**
- o Turn student on side to ensure open airway
 - o Give glucagon as ordered. Keep student in recovery position on side.
 - o If on insulin pump, either place it in 'suspend' or stop mode, disconnect it at the pigtail or clip, or cut tubing. If pump was removed, send it with EMS to the hospital.
 - o Notify school nurse, parent and HCP
 - o Wait 15 minutes; if no response, repeat glucagon.
 - o If responsive, offer juice. Wait 15 minutes and give protein & carbohydrate snack.

- 15 GM FAST-ACTING CARBOHYDRATE =**
- ½ c. juice
 - 3-4 glucose tablets
 - Tube of glucose gel
 - ½ c. regular (not diet) soda
 - 6-7 small sugar candies (to chew)
 - 1 c. skim milk
- Do not give chocolate**

CALL 911 if the student vomits, becomes lethargic and/or has labored breathing. Notify school nurse, parent and HCP.

EXERCISE AND SPORTS

- ✓ Assure has quick access to water for hydration, fast-acting carbohydrates, snacks and monitoring equipment.
- ✓ Student should not exercise if blood glucose level is below 70 mg/dl or if has moderate to large ketones.

Never send a child with suspected low blood glucose anywhere alone.