



# diabetes information for schools

## medical alert

### medical alert information card

# DIABETES

Place  
photograph  
here

Year: \_\_\_\_\_

Student's name: \_\_\_\_\_

Age: \_\_\_\_\_

Grade: \_\_\_\_\_

Class Teacher: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Phone Number: (work) \_\_\_\_\_ (home) \_\_\_\_\_

Alternative contact name: \_\_\_\_\_

Phone Number: (work) \_\_\_\_\_ (home) \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Phone Number: (surgery) \_\_\_\_\_ (hospital) \_\_\_\_\_



Australian  
Diabetes  
Council



**International  
Diabetes  
Federation**

A joint initiative of Australian Diabetes Council and International Diabetes Federation

# diabetes information for schools

## management healthcare plan

### management healthcare plan for students with type 1 diabetes

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Age: \_\_\_\_\_

Year: \_\_\_\_\_

Contact Details: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

#### Hypoglycaemia – “Hypo” (Low Blood Glucose Level – BGL)

##### Treatment for hypoglycaemia:

- Easily absorbed carbohydrate e.g. fruit juice.
- Followed by snack or meal e.g. apple or sandwich or glass of milk.
- Repeat treatment if necessary.
- A hypo kit should be close to the child at all times.

##### Mild – moderate hypo

- Recognise and adequately treat symptoms of hypoglycaemia immediately.
- Treat as hypoglycaemia when BGL is under 4 mmol/l.
- A blood glucose test may show a result less than 4mmol/l in the absence of hypo symptoms.

- The child will need to sit quietly immediately following the hypo and may not be able to resume class work straightaway.
- Child should not be left alone.
- Child may not be able to concentrate on school work for several hours following the hypo.

##### Severe hypo

- Recognise when child is unable to swallow and instigate first aid:
  - Coma position.
  - Keep airway clear.
  - Stay with child.
  - Call ambulance.
  - Call parent.



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## Physical activity

- Be aware that physical activity lowers the BGL.
- Be aware that prior to and possibly during physical activity the child should have a "top up" snack.
- Parents should provide extra hypo kits and snacks for physical activity, excursions, camps, etc.
- If a child is using an insulin pump they may need to detach the actual pump for contact sports and swimming and re-attach following the activity.

## Meals:

- Child should eat carbohydrate food regularly every 2-3 hours.
- Child should eat all snacks/meals provided.
- Child should not exchange meals with another child.

## High BGLs

- If BGL is above 15mmol/L:
  - Encourage child to drink water.
  - Allow extra toilet breaks.
  - Check BGL in 2 hours. If still elevated, contact parent.
  - If child is vomiting - contact parents. If parents are unavailable, contact ambulance and state 'diabetes emergency'.

## Sharps disposal

- Care should be taken to place sharps in an appropriate container either provided by the school or by the student with their diabetes equipment.

## Infection control

- Teacher and/or teachers aides must wear gloves when performing blood glucose monitoring.

## Current situation: Blood glucose testing

- It is best for the child to test their BGL in class because:
  - Hypos commonly occur during class time.
  - The child will miss class work if sent to the office.
  - It removes the mystique for the other children and gets them used to the child's diabetes management.
  - This may reduce teasing and bullying.
- Number per day (one to two – discuss with parent.  
NB not all children require blood glucose testing while at school).

Time(s): \_\_\_\_\_

Place: \_\_\_\_\_

## Insulin injections or insulin pump

- Negotiation between parent/carer and school staff in regards to insulin injections/pumps is essential for good diabetes management at school. Young children (primary school age) require more supervision than adolescents. Schools have a duty of care to provide this supervision.
- The insulin pump is worn at all times, but can be detached when needed e.g. during sport or swimming.
- Method:
  - pen
  - syringe/needle
  - insulin pump

Time(s): \_\_\_\_\_

Place: \_\_\_\_\_

Emergency phone number 000  
Australian Diabetes Council  
Kids and Teens Careline  
1 300 136 588



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