Meade County Schools School Health Services

Diabetes Primary Care Provider Authorization

FORM MUST BE SIGNED BY HEALTH CARE PROVIDER AND PARENT/GUARDIAN

Name:		Date of Birth:			
				<u>*</u>	
Diagnosis: ☐ Type 1 Diabetic	□Type 2 Diabetic	Management:	□ GOOD	□ FAIR	□ POOR
Diet: Specify type of diet and routing	ne snack schedule:				
	PARENTS MUST PRO				
Exercise:	nrestricted F	Restricted (Specify):			
v v	ıgar?	☐ kept with child ☐ Before lunch ☐ As needed to d	d □k	□ NO ept in nurse's office ycemia or hyperglyce	
2. Can this child adn		lin if needed at schoor other needed info	rmation about	sugar). Follow direction	
				a Para are g	
Signature of Physician		Date			
TO SEED DOOR NOT SEE TO					
Address				Telephone No.	
Signature of Parent/Guardian		Теlернопе No.			Date
***					. •
Emergency Contact		Telephone No.		Relati	onship

HYPOGLYCEMIA (LOW BLOOD SUGAR)

SIGNS & SYMPTOMS •hunger staring becoming very quiet dizzy crying •headache clammy sweat nervous •unable to think clearly shaky weak blurry vision restless combative ·unusually sleepy ·pale pounding heart confused or disoriented stumbling around ·change in personality (mean/hateful) LOW BLOOD SUGAR FOR THIS CHILD REQUIRING THE FOLLOWING INTERVENTIONS IS

1. Give 15 grams of simple sugar.

Samples of a simple sugar are one of the following:

- 1/2-cup reg. Soft drink
- •15 skittles
- •small tube of cake icing gel

1/2 cup juice

- •12 Sweet Tarts
- •3-5 small sugar cubes

- 3-4 glucose tabs
- 2-3 rolls of Smarties
- 2-3 packs of table sugar
- 2. Follow immediately with a 15-gram snack of complex carbohydrate or lunch.

Samples of a 15-gram complex carbohydrate snack are one of the following:

- •4 peanut butter or cheese crackers 1/2 sandwich •1 small bag pretzels, chips, etc.
- 3. If no improvement in symptoms within 15 minutes, give another simple sugar choice.
- 4. Recheck the blood glucose 30 minutes after initial treatment. Call parent if the blood glucose does not rise above 80.
- 5. Allow 30-60 minutes for a complete recovery before resuming normal school activity (tests, PE, class work). It is not necessary to send the student home once the blood glucose is above 80.

HYPERGLYCEMIA (HIGH BLOOD SUGAR)

SIGNS & SYMPTOMS:

- dry mouth
- increased urination
- sores or infections that will not heal

thirstyhungry

- •tired
- sleepy
- dry itchy skin
- headache

*If symptoms persist can lead to nausea, vomiting, stomach pain, fruity smelling breath HIGH BLOOD SUGAR FOR THIS CHILD REQUIRING THE FOLLOWING INTERVENTIONS IS

1. Encourage extra liquids without sugar such as water. No extra juice or milk.

- 2. Allow frequent trips to the restroom and check s for ketones if strips available. Notify parent if ketones present.
- 3. If the blood glucose is greater than 300, do not participate in P.E. or sports.
- 4. Student does not need to be sent home unless vomiting, ketones, other acute illness, or for blood glucose that remains 400 or above 60 minutes after initial treatment.

EMERGENCY PLAN OF ACTION

- 1. If student becomes unresponsive, notify school personnel trained in Glucagon administration, and CPR first aid to come and administer glucagon to the student and initiate CPR if needed prior to EMS arrival.
- Call EMS 911.
- 3. Contact Parent/Guardian or emergency contact immediately.
- 4. If student needs to be transported via EMS, an adult must always accompany the student.