Monitor Blood Sugar  Blood sugar should be checked:
1. Before meals (breakfast/lunch/supper) and as needed for signs/symptoms of low and/or high blood sugar
2. If the child utilizes a Continuous Glucose Sensor – treatment must be based on glucometer results not continuous
glucose sensor.

Hypoglycemia  Student should be accompanied to office/clinic if symptomatic or BS less than 70mg/dl.
Symptoms include: shaky, weak, severe hunger, sweaty, pale, poor concentration and/or dizziness.
1. Check blood sugar – if blood sugar meter not available, treat symptoms.
2. Blood sugar below 80mg/dl (4 year old and younger) or 70mg/dl (5 years old and older) treat with 15 gram
   carbohydrate (CHO) which is usually provided by parents/guardian.  Examples of 15 grams of CHO include 4 ounces
   of juice or 6 ounces of regular soda or 3-4 sugar tablets.  Recheck blood sugar in 15 minutes and repeat as needed
   until blood sugar is above 70/80mg/dl.  A snack of 15 grams may be provided if next meal is more than one hour away
   following a low blood sugar.
3. If low blood sugar occurs at lunch time, give 15 grams of fast acting carbohydrates (see description above) without
   insulin and then allow student to go to lunch.  Do not count in the 15 grams of carbohydrates in the total carbs when
   calculating food insulin.
4. If unable to drink juice: Administer 15 grams of glucose gel, cake icing or syrup.  Recheck blood sugar and repeat as
   necessary until blood sugar is above 70/80mg/dl.  A snack of 15 grams may be provided if next meal is more than one
   hour away following a low blood sugar.
5. If unconscious or following a seizure, administer Glucagon 1 mg (subcutaneously or intramuscularly) if trained staff
   available, call 911, diabetes staff and parent/guardian.

Hyperglycemia: Symptoms include: frequent thirst, frequent urination and/or nausea.  This student does not need to check ketones.
1. Check urine ketones if blood sugar is over 250mg/dl or with symptoms of illness/vomiting.
2. If trace, small urinary ketones or 0.6 to 1.4 mmol/L on blood ketones, students should follow their usual meal plan and
   drink water 1 ounce for each year of age per hour. (Example: 6 year old = 6 ounces of water hourly until ketones are
   negative).  Blood sugar and ketones do not need to be rechecked for at least 2 hours unless the student’s condition
   changes.  If the student has ketones in their urine, they should not participate in activities such as PE, but they may
   attend class if they are feeling ok.  Student may remain at school unless vomiting or having difficulty breathing.
3. If moderate to large urinary ketones or greater than 1.5mmol/L on blood ketones are present, the student will need a
   “ketone dose” of insulin.  The ketone dose of Humalog/Novolog/Apidra is ________ units.  The Ketone dose
   should be given instead of the child’s usual correction dose.  The student will also need one ounce of water for
   each year of age (15 year old = 15 ounces of water hourly until ketones are negative).  Refer to the Ketone/SickDay
   Guidelines for further instruction.  Please contact the diabetes team at Cook Children’s Medical Center following
   the administration of the second ketone dose.  Student may remain at school with urine ketones unless vomiting
   or difficulty breathing.

Medication – Scheduled Insulin Needed At School

1. Carbohydrate ratio: __________ unit(s) of Humalog/Novolog/Apidra insulin per ________ grams of
   carbohydrate with ALL FOOD.  Insulin is to be administered before (preferred) or immediately after eating.
   Parents are permitted to change the insulin to carbohydrate ratio  YES  NO

2. Correction factor: ________ unit of Humalog/Novolog/Apidra for every ______mg/dl of blood sugar above ________.

   Blood sugar 150-199mg/dl  Give____ units  Blood sugar 200-249mg/dl  Give____ units
   Blood sugar 250-299mg/dl  Give____ units/check ketones  Blood sugar 300-349mg/dl  Give____ units/check ketones
   Blood sugar 350-399mg/dl  Give____ units/check ketones  Blood sugar 400-449mg/dl  Give____ units/check ketones
   Blood sugar 450-499mg/dl  Give____ units/check ketones  Blood sugar > 500mg/dl Give____ units/check ketones
   Blood sugar correction is to be given only at breakfast and/or lunch provided it has been four hours since last dose of
   Humalog/Novolog/Apidra.  Correction insulin is NOT given at snack time.

3. Additional medication:

School Hotline 1-866-266-7936
Level of Care

According to the American Diabetes Association Position Statement, *Diabetes Care in the School and Daycare Setting*, children and youth should be allowed to provide their own diabetes care at school to the extent that is appropriate based on the student’s development, experience and ability. The extent of the student’s ability to participate in diabetes care should be agreed upon by the school personnel, the parent/guardian, and the health care team. The Cook Children’s diabetes team feels that the student would benefit from:

- Independent management (requires annual meeting with school nurse/personnel)
- Assistance from staff
- Complete care from staff

*We recommend a meeting with school nurse/personnel annually to discuss and review this diabetes management plan.*

---

**NPH / Consistent Carbohydrate Meal Plan**

If patient is on an NPH insulin plan, a correction dose of insulin may be required at lunch. See page 1 for dose

The following carbohydrate meal plan is required:

<table>
<thead>
<tr>
<th>Meal</th>
<th>Grams</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td></td>
</tr>
<tr>
<td>Snack</td>
<td></td>
</tr>
<tr>
<td>Lunch</td>
<td></td>
</tr>
<tr>
<td>Snack</td>
<td></td>
</tr>
</tbody>
</table>

---

**Nutrition**

Parents are responsible for knowing their child’s meal plan and for communicating information to the school staff as needed. Children may need supervision to make certain they eat the correct amount of carbohydrates at meals.

---

**Signatures**

My signature below provides authorization for the above written order and the release of the information contained in this Diabetes Medical Management Plan to all staff members and other adults who have custodial care of my child and who may need to know this information to maintain my child’s health and safety. This order is for a maximum of one school year. Texas state law (HB-984) requires public schools to provide trained unlicensed diabetes care assistant (UDCA) to assist with diabetes management during the school day if a licensed health care professional is not available. The UDCA’s involvement and participation in care should be addressed by parents and school personnel.

<table>
<thead>
<tr>
<th>Role</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Nurse</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Cook Children’s Diabetes Team**

A member of the diabetes team is always available to assist the student and school staff with any questions or concerns. **Please call the dedicated school hotline at 1-866-266-7936. This line is for school personnel only.** You may also call the clinic at 682-885-7960 or the after hour’s emergency line at 682-885-4000.

Paul Thornton, MD          Cindy K. Bair, RN, MSN, CPNP      Michelle McMillan, RN, CDE  
Michael Willcutts, MD-PhD  Teresa Newman, RN, MSN, CPNP      Paula Thieme, RN, CDE        
John Dallas, MD            Phyllis Wakeland, RN, MSN, CPNP    Khadija Cheeks, RN            
Joel Steelman, MD          Lisa Troung, RN, MSN, CPNP      Kelli Goree, RN, CDE         
Jill Radack, MD            Angie Barton, RN, CDE          Courtney Wolff, RN           
Susan Hsieh, MD            Courtney Wolff, RN          Kim McClellan, RN            
Don Wilson, MD             LeeAnn Cornelison, RN, CDE    John Dallas, MD              
Teena Thomas, MD           Paula Thieme, RN, CDE        Phyllis Wakeland, RN, MSN, CPNP  
Alex delaTorre, MD         Khadija Cheeks, RN          Lisa Troung, RN, MSN, CPNP    

---

**School Hotline 1-866-266-7936**