Quick Reference Emergency Plan for a Student with Diabetes

Hypoglycemia (Low Blood Sugar) Photo

Student's Name							
Grade/Teacher Date of Plan							
Emergency Contact Information:							
Mother/Guardian	Father/Guardian						
Home phone Work phone	Cell Home phone	Work phone Cell					
School Nurse/Trained Diabetes Pers	onnel Contact Number(s))					
Never s	end a child with suspected low blood sugar a	nywhere alone.					
• Too • N • D • Too much •	Missed food	Onset • Sudden					
Symptoms							
Mild • Hunger • Shakiness • Weakness • Paleness • Anxiety • Irritability • Dizziness Circle student's usual symptoms. Notify School Nurse or Train Management	Moderate • Headache • Blurry vision • Behavior • Weakness change • Slurred Speech • Poor • Confusion coordination • Other	Severe • Loss of consciousness • Seizure • Inability to swallow Circle student's usual symptoms. k blood sugar, per Diabetes Medical HYPOGLYCEMIA.					
Mild	Moderate	Severe					
Student may/may not treat self. Provide quick-sugar source. 3-4 glucose tablets or 4 oz. regular soda or 3 teaspoons of glucose gel Wait 10 to 15 minutes. Recheck blood glucose. Repeat food if symptoms persist or blood glucose is less than Follow with a snack of carbohydrate and protein (e.g.,	 Someone assists. Give student quick-sugar source per MILD guidelines. Wait 10 to 15 minutes. Recheck blood glucose. Repeat food if symptoms persist or blood glucose is less than 	 Don't attempt to give anything by mouth. Position on side, if possible. Contact school nurse or trained diabetes personnel. Administer glucagon, as prescribed. Call 911. Contact parents/guardian. Stay with student. 					

The Quick Reference Emergency Plan can be found in NDEP's "Helping the Student with Diabetes Succeed: A Guide for School Personnel," which is available for free download at http://www.ndep.nih.gov/diabetes/pubs/youth_ndepschoolguide.pdf

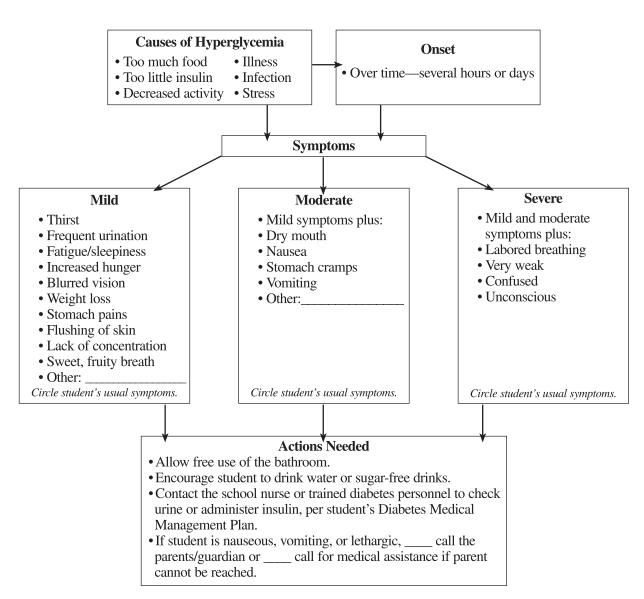
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