

WHAT SCHOOL PERSONNEL SHOULD KNOW ABOUT DIABETES

Prepared By The Canyons School District Nursing Services

GENERAL INFORMATION

Diabetes is a condition in which the body cannot produce enough insulin to maintain a normal level of glucose (sugar) within the blood stream. Without adequate insulin, glucose cannot get into the cells of the body. Whether glucose levels become too high (hyperglycemia) or too low (hypoglycemia), an intervention is necessary to bring glucose levels back to normal levels and avoid life-threatening complications.

The key to good diabetes control is a careful balance between food, exercise, and insulin. It's a juggling act to keep blood sugar levels within the target range. In a nutshell, food makes blood sugar levels go up, and exercise and insulin make blood sugar levels go down. People with diabetes have to check their blood sugar levels throughout the day using a blood sugar device (glucometer). Depending on the blood sugar results they may need insulin, food, or no intervention to stay within their normal range.

INSULIN ADMINISTRATION

Some children may need to take insulin at lunchtime. The insulin dose is based upon the grams of carbohydrates the student will eat and their blood sugar. Insulin may be administered via injection or an insulin pump.

INSULIN PUMP

An Insulin Pump is a device the size of a pager that is worn outside the body. The insulin pump delivers a constant infusion of insulin. It holds a cartridge or reservoir of insulin inside the pump that is programmed to deliver the insulin through small plastic tubing called an infusion set. The infusion set is inserted (by the parents/child) just below the skin and stays in place for two to three days. Common sites could include the abdomen, hip, thigh, or upper arm. Insulin pump therapy combines a continuous basal infusion rate of insulin for 24 hours and a bolus dose of insulin programmed by the individual for meals or snack times and times of high blood sugar. Typically, basal rates are set in consultation with the child's health care provider. The bolus dose of insulin is usually what will be given at school, via the insulin pump, by the action of the individual wearing the insulin pump.

BLOOD SUGAR MONITORING

Students monitor their blood glucose levels frequently throughout the day. They should at least be monitoring blood glucose levels at lunchtime and whenever they are feeling symptoms of high/low blood glucose. Blood glucose levels may also be monitored before/after exercising and before academic testing.

HYPERGLYCEMIA

Hyperglycemia is a **high blood sugar** caused by 1) illness, 2) eating too much, 3) missing an insulin dose or, 4) stress. **Symptoms typically seen are frequent urination or excessive thirst. Allow liberal water and bathroom privileges.**

HYPOGLYCEMIA

Hypoglycemia is a **low blood sugar** caused by 1) too much insulin, 2) skipping a snack/meal, 3) too much exercise, or a combination of the three.

FIELD TRIPS

Parents should be notified of field trips in advance so proper preparation can be made. Glucometer, snacks, and low blood sugar treatments (juice/frosting/gel) should be brought on all field trips with student. If the field trip goes over the lunch period, arrangements must be made to allow student to test their blood sugar, receive insulin (if needed), and eat lunch/snacks when needed. Emergency phone numbers should also be taken.

ACADEMIC TESTING

Student should be allowed to test blood sugar before any test and treat blood sugar accordingly. Accommodations should be made for any make-up testing in the event of an abnormal blood sugar reading that cannot be corrected or one that occurs during testing. Students will do poorly on academics if experiencing a low blood sugar.

HYPOGLYCEMIA (LOW BLOOD SUGAR)

- A **low blood sugar** is a **MEDICAL EMERGENCY** and needs to be acted upon immediately whereas a high blood sugar needs prompt but not immediate action.
- In order for students to prevent/treat their low blood sugar they must be allowed to have quick access to food and eat or drink whenever and wherever needed.
- Never send a child with suspected or documented low blood sugar anywhere alone.

WARNING SIGNS OF HYPOGLYCEMIA

Sudden Hunger
Sweating
Paleness
Headache
Nervousness
Shakiness

Blurred Vision
Irritable/Moodiness
Crying
Confusion
Fatigue
Drowsiness

Abdominal Pain
Nausea
Poor Concentration
Inability to Concentrate/"Spaciness"
Inappropriate Actions/Response

TREATMENT for HYPOGLYCEMIA (low blood sugar)

If a student has a blood sugar below 80 and is conscious and cooperative:

1. Give sugar/carbohydrate immediately in one of the following forms:
 - 3-4 Glucose Tablets
 - 4 oz (½ cup) juice
 - 6 oz (½ can) regular soda (*NOT sugar free or DIET*)
2. Recheck blood sugar in 10-15 minutes. If blood sugar is still below 80, repeat as above.
3. The teacher or staff should remain with the student until the blood sugar is greater than 80.
4. When blood sugar is above 80 give a protein snack if it will be more than 30 minutes before lunch.

If a student has a blood sugar below 80 and they are uncooperative or disoriented:

1. Lay student on their side;
2. Squeeze ½-1 tube of glucose gel/tube frosting inside the student's mouth between the cheek and gum.
3. Recheck blood sugar in 10-15 minutes. If blood sugar is still below 80, repeat as above.
4. The teacher or staff should remain with the student until the blood sugar is greater than 80.
5. When blood sugar is above 80 give a protein snack if it will be more than 30 minutes before lunch.

If the student is unconscious or having a seizure:

1. Call 911
2. Individual students may have glucagon at school. District nurse trained staff will follow district policy for administering the glucagon.
3. Contact parent.

