

## **SCHOOL TIPS FOR TYPE 1 DIABETES**

#### COMMUNICATION

- Meet with the classroom teacher, gym teacher, principal or vice-principal, school secretary or other staff as needed
- Establish regular communication with your child's school
- Start a communication book for younger children to write down and share important information
- Discuss other forms of communication such as text, email, or school messaging
- Provide links for online resources:
  - Guidelines for the Care of Students Living with Diabetes at School, Diabetes
     Canada
  - o Diabetes at School
  - o Alberta Children's Hospital Diabetes Clinic-Type 1 Diabetes Information-School and Diabetes
- Teach staff about signs and symptoms, treatment, and prevention of low blood sugar
- Provide a supply of rapid acting carbohydrate to treat low blood sugars and replace as needed
- Provide a belt bag with rapid acting carbohydrate for the teacher or child to carry during outdoor classes or field trips
- Review the symptoms of high blood sugar increased thirst, needing to use the toilet, trouble concentrating
- Inform school that high blood sugar is not an emergency
- Ask about a private and clean space for blood sugar checks and insulin injections
- Provide a sharps container for safe disposal of needles and lancets
- Consider buying a watch with an alarm if your child needs reminders to check blood sugars or eat snacks

#### **CONTINUOUS GLUCOSE MONITORS**

- Dexcom and Libre are glucose sensors that continuously measure glucose levels just beneath
  the skin and send data wirelessly to a phone or receiver
- The sensor must be within Bluetooth range of 6 metres/20 feet to be able to receive alerts about low or high blood sugars
- Student must have consistent access to their receiver device or phone throughout the day
- Provide letter to school regarding need for cell phone as diabetes technology





## **Diabetes Student Care Plan**

### Instructions

✓ After completing and printing this form, remember to include a photo of the student.

✓ To ensure this information is included in the student's file at school, drop off a copy to the school's Administrative Office with a request to have this form become a part of the student's on-site file.

Please place photo here

Student Name		
Date Grade Roo	m	
Mother Contact Information Fat	her Contact Information	
Name	ne	
Home Phone Hom	ne Phone	
Work Phone Wor	k Phone	
Cell Phone Cell	Phone	
Low Blood Sugar (Hypoglycemia)  Low blood sugar is a common side effect of insulin. It can result from skipping or being late for a meal or snack, extra activity, or too much insulin. Hypoglycemia can develop quickly and must be treated immediately.  Symptoms (check student's specific symptoms)  shaky weak pale sweaty hungry tired grumpy confused  Treatment  Do not leave the student alone.  1. Check blood sugar.  2. If the blood sugar is under 4.0 OR under 5.0 with symptoms treat immediately with or		
3. Wait 15 minutes and recheck blood sugar. If still	low, retreat.	
Severe Low Blood Sugar –  If confused or disoriented: Take charge and confused or disoriented or having a seizure  High Blood Sugar	pax the student to eat or drink a treatment	

# bathroom breaks. Managing Food

- Snacks/lunch must be fully eaten and on time.
- Allow enough time to eat.
- No food sharing.
- When classroom food/treats are planned, contact parents for instructions.
- Student needs supervision with snacks/lunch to ensure all food is eaten.
- Student needs prompt to eat morning snack at a.m.
- Student needs prompt to eat afternoon snack at \_\_\_\_\_ p.m.

Symptoms of high blood sugar are increased thirst and frequent urination. The student may be irritable and not be able to concentrate. Allow the student to drink lots of water and take frequent

Blood Glucose Monitoring			
Check before: a.m. snack lunch	p.m. snack	going home	
☐ Student needs reminder to check blood sugar			
☐ Student prefers to do blood glucose check in _			
☐ Student needs help interpreting blood sugar res	sult		
Location of monitoring supplies			
Managing Physical Activity			
<ul> <li>Risk of low blood sugar increases during/after ph</li> </ul>	ysical activity.		
<ul> <li>Notify parents of active special events (Terry Fox run, field trip, track day, etc.)</li> </ul>			
Blood glucose meter and low treatments should <i>always</i> be accessible during physical activity.			
<ul> <li>Extra food may be needed prior to physical activity</li> </ul>	ty.		
☐ Check blood sugar before regular gym class.			
☐ Check blood sugar before unplanned activity.			
If blood sugar is below, give a small snack	(example)		
Managing Insulin			
Student administers insulin by pen injection <b>before</b>	e: a.m. snack	☐ lunch ☐ p.m. snack	
Room location where insulin will be administered			
Location of insulin pen and needle tips			
The <u>student</u> will remove the needle tip after the inj	ection and place in a	sharps container located	
<del></del>	•		
Insulin Dose			
Student will call and speak to a parent to confi	rm the dose.		
☐ Student will independently calculate the dose.			
School staff has agreed to calculate the dose (	note: training must b	pe provided).	
☐ The student should be supervised when administering insulin. Always double check to ensure			
that the correct dose has been selected and d	ialed into the pen		
Other medical conditions			
Medical Condition	Tı	reatment	
0 - 1 - 1 1 - 15			
Contact parents if:			
The student vomits or is sick.  Low blood sugar does not go above 4.0 after two treatments.			
Low blood sugar does not go above 4.0 after two treatments.			
• Other			



Date:	
То:	Teachers and School Administrators
RE:	

The above student has type 1 diabetes and is followed in the Diabetes Clinic at the Alberta Children's Hospital. The parents have completed a Diabetes Care Plan. Please ensure that all staff involved with the student are familiar with it and keep a copy in the classroom.

Type 1 diabetes and insulin treatment can lead to the following situations that could affect a student's ability to function properly at the time of an examination.

Hypoglycemia or **low blood sugar** (< 4.0 mmol/L) can affect cognitive functioning.

- If the student with diabetes experiences a low blood sugar before or during an
  examination, he or she should check the blood sugar, treat with a source of rapid acting
  carbohydrate (for example juice or candies) and then recheck the blood sugar 10 to 15
  minutes later.
- Students should have their blood glucose monitor and low blood sugar treatments on their persons in order to promptly manage hypoglycemia.
- A hypoglycemic event may impair cognition for 15 to 60 minutes and therefore the student should be allowed extra time to complete the examination.

Hyperglycemia or **high blood sugar** (> 15.0 mmol/L) may lead to increased thirst and urination.

• If the student with diabetes is hyperglycemic prior to and during an examination, he or she needs to be able to drink water and use the washroom.

The above described blood sugar variations are not predictable or preventable. However, most students with diabetes are expected to be able to write exams without any deleterious effects from their medical condition.

If you wish to learn more about how you can support students with diabetes, we suggest you visit the "school" section of our website which is located at <a href="https://www.ucalgary.ca/achdiabetes">www.ucalgary.ca/achdiabetes</a>.

Sincerely,

Diabetes Clinic, Alberta Children's Hospital

