School Health Institute for Education and Leadership Development https://www.bucme.org/node/1045



Case #1

You are the school nurse and on Tuesday morning you receive a call from a parent who informs you that their child, a fourth grader in your school, was just diagnosed with type 1 diabetes. The child is still in the hospital and will be dismissed to home on Thursday and will be back at school on Monday morning.

How can you assist this parent and the child when they return to school?

What will you tell the mother on the phone?

As you plan for Monday's return to school you gather information about the child.

- 1. They have a history of anxiety with transitions
- 2. They have no snacks at school at this time
- 3. They have lunch at 11:45 am
- 4. They have recess at 12:05pm-12:25pm
- 5. They have PE every Tuesday, Wednesday and Thursday at 1:00pm.

6. The MD orders are attached

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Case #1

SAMPLE DIABETES MEDICATION ORDER FORM

Blood Glucose Monitoring:YES Blood G Monitor for s/s of hypo and/or hyperglycemia	lucose MonitorNOContinuous Blood Glucose
Target blood glucose (BG): pre-meal:100-12	20 mg/dl
Correction/sensitivity factor (ISF) = 1 unit lowe	rs BG90 mg/dl
Insulin Type:Humalog	administered subcutaneously (SC)
yesvia syringe via pen	via insulin pump
Student is able to self-administer: yes	No no
To be used prior to consuming carbohydrates (CHO); <u>excluding</u> CHO used to treat hypoglycemia
• Insulin to carbohydrate (I:C) ratio = 1 u	nit of insulin per30 grams CHO at morning snack
	18 grams CHO at lunch
 Sliding Scale: for BG level mg/dl Time blood glucose >3 hours fasting 	
Less than 700 units 70-110	0 units
151-2000.5units 201-250 units	00.75-1.0 units
301-3502.0 units 351-399	9 _ 2.5 units 400-over 3.0 units
**Check for ketones if BG level is over>250	
<u>Hypoglycemia</u>	
If BG < 70 give 15 grams of CHO and retest in 15 minrepeat until above 70	
Glucagon1 mg SC if BG < 70 and UNCONSCIOUS; Medical Emergency call 911	
<u>Hyperglycemia</u>	
If BG is or greater check ketones urine blood	
If ketones are negative administer insulin per s	sliding scale and water.
If ketones are positive administer insulin per sl	iding scale call parent and physician.
Signature of Parent or legal guardian	Print Date
Signature of licensed prescriber	Print Date

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