

SCHOOL SETTING

MDI bolus calculator with Dexcom G5 CGM



DIABETES MANAGEMENT PLAN 2019

Name of student: _____ Date of birth: _____

Name of school: _____ Grade/Year: _____

Blood glucose meter type: _____

This plan should be reviewed and updated at least once per year.

EMERGENCY MANAGEMENT

Please see the Diabetes Action Plan as to the treatment of hypoglycaemia (hypo).

The child should not be left alone.

DO NOT attempt to give anything by mouth or rub anything onto the gums as this may lead to choking.

If the school / centre is located more than 30 mins from a reliable ambulance response, the school / centre staff are advised to discuss Glucagen training with the diabetes health team.

If the child has high blood glucose levels please refer to the Diabetes Action Plan.

INSULIN ADMINISTRATION

The student will need to have an insulin injection at: Fruit break - 'munch & crunch' etc
 1st break
 2nd break

The insulin dose will be determined by the bolus calculator based on the grams/serves of carbohydrate the student will be eating and their current blood glucose level.

Can student independently count carbohydrates? Yes No
(parent/carer will label all food)

Is supervision required for bolus calculator? Yes No

If yes, the staff member/s needs to: Remind Supervise
 Assist button push
(parent/carer to provide additional instruction)

Is supervision required for the insulin injection? Yes No

If yes, the staff member/s needs to: Remind Supervise Assist
 Administer injection
(Qualified health professional to provide additional instruction)

Name of staff member/s: _____

Type of injection device: Pen Syringe

The location in the school/centre where the injection is to be undertaken:
(must be agreed upon by all parties)

This plan has been adapted from the original work of Diabetes Victoria, Monash Children's Hospital and The Royal Children's Hospital, Melbourne.

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Sensor Glucose Monitoring

Is supervision required for sensor glucose check? Yes No

If yes, the staff member/s needs to: Remind Observe

Can student calibrate the CGM: Yes No

(Contact Parent / Carer if required)

Can the student troubleshoot CGM Alarms or malfunctions: Yes

No

(parent/carer to provide additional instruction)

CGM Individual requirements:

Communication process for CGM follower/s to contact the school:

(must be agreed upon by all parties)

Name/s CGM followers approved to contact:

Further action is required if SGL is < 4.0mmol/L or >15.0mmol/L. [Refer to Diabetes Action Plan]

Please note:

Sensor reads glucose levels between 2.2-22.2 mmol/L.

Sensor glucose **below 2.2mmol/L will show as LOW** on the receiver or smart device. **[Refer to Diabetes Action Plan]**

Sensor glucose **above 22.2mmol/L will show as HIGH** on the receiver or smart device. **[Refer to Diabetes Action Plan]**

Times to check Sensor Glucose

(select those that apply)

Anytime, anywhere

Anytime hypo suspected

Fruit break – ‘munch & crunch’ etc

Prior to 1st break

Prior to 2nd break

Prior to activity

Post activity

Prior to exams/tests

When feeling unwell

When CGM Alarms

To calibrate CGM

Other routine times – please specify:

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BLOOD GLUCOSE MONITORING

Is the student able to perform their own blood glucose monitoring? Yes No

If yes, does the staff member/s need to: Remind Supervise Assist

If no, the staff member/s needs to do the blood glucose check: Yes

Name/s of staff member/s assisting with checking BGL's:

Further action is required if BGL is < 4.0mmol/L or >15.0mmol/L. [Refer to Diabetes Action Plan]

Please note

The blood glucose meter with bolus calculator reads the word 'HI' for a blood glucose level above certain limits. It does not give a numerical value of how high the blood glucose level is, therefore will not provide a recommended insulin dose to lower the students blood glucose level. When this happens please contact parent/carer ASAP.

Times to check BGLs via finger prick

(select those that apply)

- Anytime hypo suspected
- Post hypoglycaemia treatment (due to lag time of CGM)
- During sensor warm up
- If symptoms do not match sensor glucose
- If there are less than 3 sequential sensor glucose readings within last 15 minutes
- There are no trend arrows on the receiver
- Sensor falls out or fails to read glucose
- For 6 hours after Paracetamol has been taken. Do not use CGM data during this period.
- To calibrate CGM
- Prior to 1st break
- Prior to 2nd break
- Other routine times – please specify:

Glucose ranges will vary day to day for the individual with diabetes and will be dependent on a number of factors such as:

- Insulin
- Stress
- Level of activity
- Puberty
- Age
- Growth spurts
- Type / quantity of food
- Illness/infection

HYPO TREATMENTS TO BE USED

- All hypo treatment foods should be provided by parent/carer
- Ideally, packaging should be in serve size bags or containers
- Please use one of the items provided as listed below

Fast acting carbs

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Sustaining carbs

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If the above options are not available for some reason, use any alternative hypo treatment – e.g. 3 teaspoons of sugar dissolved in water, lemonade, jelly beans

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EATING AND DRINKING

Younger students may require supervision to ensure all food is eaten

The student should not exchange meals with another student

Seek parent/carer advice regarding appropriate foods for parties/celebrations that are occurring whilst in your care

Allow access to drinking water and toilet at all times (high blood glucose levels can cause increased thirst and urination)

Does the child have coeliac disease?

No

Yes (Seek parent/carer advice regarding appropriate foods and hypo treatments)

PHYSICAL ACTIVITY AND SWIMMING

- Physical activity usually **lowers** glucose levels. The drop in glucose levels may be immediate or delayed as much as 12-24 hours
- A sensor or blood glucose check is required before physical activity that will be longer than 30 minutes or before swimming for any duration
- Below 4.0mmol/L **DO NOT EXERCISE treat hypo as per Diabetes Action Plan**
- 4.0 – 6.9 mmol/L give grams carbohydrate. Student can then commence exercise
- 7.0 – 15.0 mmol/L can commence exercise
- Above 15.0mmol/L for first time and child is well. Can exercise at moderate intensity only
- Above 15.0mmol/L for first time and child is unwell **refer to Diabetes Action Plan**
- Above 15.0mmol/L for second BG check in a row **refer to Diabetes Action Plan**
- Individual requirements

Additional planning required for off-site activities, sports and swimming carnivals

EXCURSIONS AND CAMPS

It is important to plan ahead for extracurricular activities and consider the following:

- Early and careful planning with parents/carers and medical team is required **at least 4 weeks** prior to school camps and a **separate and specific management plan for camps is required**
- Ensure CGM receiver, BG meter, blood glucose strips, blood ketone strips, hypo and activity food are readily accessible during the excursion day
- Diabetes care is carried out as usual during excursions off-site school premises
- Always have extra hypo treatment available
- Permission may be required to eat on bus – inform bus company in advance
- Staff/parents/carers to collaborate and plan well in advance of the activity
- Additional supervision will be required for swimming and other sporting activities (especially for younger students) either by a 'buddy' teacher or parent/carer
- Students are best able to attend camps when they are reliably independent in the management of their own diabetes; otherwise a parent/carer could attend or a school staff member can volunteer to assist with diabetes care activities

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EXAMS AND ASSESSMENT

- It is recommended sensor or blood glucose be checked prior to an exam or test at school
- It is recommended sensor or blood glucose level be above 4.0mmol/L
- Blood glucose meter, CGM receiver, test strips and hypo food are advised to be available in the exam setting
- Agreement of where CGM receiver/smart device will be kept and how it will monitored during exams and assessment
- It is recommended that considerations for extra time if a hypo occurs be discussed in advance
- Applications for special provision for QCS exams are advised to be attended to at the beginning of year 11 and 12 – check QCAA requirements at www.qcaa.qld.edu.au

EXTRA SUPPLIES PROVIDED FOR DIABETES CARE AT THE CENTRE

- Insulin and syringes/pens/pen needles
- Finger prick device
- Blood glucose meter
- Blood glucose strips
- Blood ketone strips
- CGM sensor
- Hypo food
- Sport/physical activity food

Location where extra supplies are to be stored:

AGREEMENTS

I have read, understand and agree with this plan. I give consent to the school to communicate with the treating team about my child's diabetes management at school.

Parent / carer

_____ Signature _____ Date _____
First Name & Family Name (please print)

Qualified Health Practitioner

Position: _____
(please specify title)

_____ Signature _____ Date _____
First Name & Family Name (please print)

School Representative

Position: _____
(please specify title)

_____ Signature _____ Date _____
First Name & Family Name (please print)