

OKLAHOMA STATE DEPARTMENT OF HEALTH  
GUIDELINES FOR DIABETES MANAGEMENT IN SCHOOL

Oklahoma State Department of Health



Please call the School Health Coordinator, Maternal and Child Health Service, Family Health Services, Child and Adolescent Health Division, Oklahoma State Department of Health at 405-426-8085 with any questions.

# Oklahoma Diabetes in School Guidelines

## FOREWORD

The Oklahoma State Department of Health (OSDH) is pleased to present the *Guidelines for Diabetes Care Procedures in Schools*, a resource document for school personnel.

The *Guidelines for Diabetes Care Procedures in Schools* are intended to provide guidance to school administrators, school nurses, teachers, and other staff members on the care of students with diabetes during the school day.

The *Guidelines* are meant to assure the training requirements for volunteer diabetes care assistants per Oklahoma **70 O.S. §1210.196** are understood and consistently applied.



## Oklahoma State Department of Health

## **Importance of Diabetes Management**

In order to assure appropriate diabetes management in schools, the Oklahoma Legislature passed the Diabetes Management in Schools Act of 2007, codified in **70 O.S. § 1210.196**. The Act empowers school staff with the training and information they need to safely and appropriately care for students with diabetes following their physician's orders, while in their care at school or a school activity. The following guidelines have been set forth by the planning committee, as outlined in the Act, to establish guidelines for the training of volunteer diabetes care assistants and to clarify procedures for those involved in caring for students with diabetes.

Managing a student's diabetes in school is important for the student academically, as well as for their health, safety, and to promote normal growth and development. Proper management can prevent emergency situations related to blood glucose levels that are too high or too low and reduce the complications related to diabetes. Maintaining blood glucose levels within the target range optimizes the student's ability to learn by avoiding the effects of hypoglycemia and hyperglycemia on cognitive function, attention and behavior. Maintaining blood glucose levels may prevent or delay serious complications such as heart disease, stroke, blindness, kidney failure, gum disease, nerve disease and amputations.

## **Guidelines for Diabetes Medical Management Plan (DMMP)**

A school nurse, if the district has a school nurse, shall obtain and review the Diabetes Medical Management Plan (DMMP) annually or more often if changes occur. DMMP (link to a sample DMMP is listed under Appendix as well as a sample copy) may also be known as medical orders provided by the student's healthcare provider or team of providers. The DMMP or physician orders must have a provider's signature to be valid.

For appropriate care and supervision, DMMP or physician orders must be followed by all school personnel who have direct contact with the student with diabetes. A fillable DMMP form is provided in the Appendix.

## **Approved Trainings**

The following trainings have been approved by the Oklahoma State Department of Health (OSDH) and are considered to meet the standards for school nurses, certified school nurses, or public health nurses assigned to the school, as set forth in the law. Under Resources, trainings are marked with an asterisk (\*).

**American Diabetes Association Safe at School Diabetes Care Tasks at School:** *What Key Personnel Need to Know, curriculum along with the use of Helping the Student with Diabetes Succeed: A Guide for School Personnel.* Completion of all modules, videos, and pre/post-test are necessary for the training requirements to be fulfilled. **Note:** If you choose this option, you must contact OSDH for further instructions

**The Oklahoma State Department of Health Diabetes Management in Schools Training:** This training is provided in conjunction with the Oklahoma State Department of Education (OSDE) around the state throughout the year. Training dates and locations can be found on the OSDE website under Health and P.E., professional learning.

Additional training may be submitted for approval by OSDH. The training to be reviewed must meet all requirements set forth in the state law.

## **Guidelines for School Nurses and Training**

A school nurse, certified school nurse, or public health nurse assigned to the school setting should complete diabetes management training provided by OSDH/OSDE a minimum of one time, preferably in person. Once the initial state training has been completed, the training may be completed online, the next year or complete another recommended training every 3 years. **Upon successful completion of the OSDH/OSDE training, a certificate of completion will be issued.** The subsequent online training must be completed in the same month as the previous year's training. If a participant attended the initial training in August, they must complete the online training by August 31<sup>st</sup> 3 years from the date on the certificate. A nurse may also complete a different approved training every 3 years in order to train other school personnel. (The OSDH/OSDE training may also be completed every 3 years for a licensed registered nurse to train other school staff.)

A school nurse, certified school nurse, or public health nurse assigned to the school must complete a diabetes management training provide by OSDH/OSDE, a training that is approved by National Association of School Nurse (NASN) or American Diabetes Association (ADA) such as **Diabetes Care Tasks at School: What Key Personnel Need to Know** to be used with the **Helping the Student with Diabetes Succeed: A Guide for School Personnel**. (The link for the guide is in Resources.) The guide should be read prior to training and able to locate online. Another training option is the National Diabetes Education Program and Diabetes training under Healthy Schools by the American Diabetes Association (ADA). It is recommended that school nurses complete an approved training a minimum of every **three years**, or as recommended by the organization that provides the training. Training every **three years** ensures appropriate preparation to properly train school personnel to function as a volunteer diabetes care assistant. By completing one of the approved trainings, the nurse is permitted to provide the annual diabetes management training to other school personnel as outlined in the state law.

A nurse shall understand his/her role in ensuring compliance with Federal and State laws that apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. The nurse must understand the procedures for implementing these laws, and respect the student's confidentiality and right to privacy. The nurse must follow any relevant HIPAA and FERPA laws, to protect the student's privacy. A school nurse, certified school nurse, or a public health nurse assigned to the school is responsible for implementing the Diabetes Medical Management Plan, developing Individual Health Care Plans (IHPs), Action Plans, emergency plans, disaster plans, Section 504 Plan (a sample of a Section 504 Plan and a link are listed under Appendix), and training other school personnel. **It is recommended that a minimum of two adult school personnel** have successfully completed approved training and that both of the individuals trained shall be available in each building, every day.

The training provided by the nurse to the volunteer diabetes care assistant must follow **70 O.S. § 1210.196.5. Volunteer Diabetes Care Assistants training.**

**The training shall include instruction on:**

1. Recognizing the symptoms of hypoglycemia and hyperglycemia;
2. Understanding the proper action to take if the blood glucose levels of a student with diabetes is outside the target ranges indicated by the student's DMMP;
3. Understanding the details of the diabetes medical management plan of each student assigned as a volunteer diabetes care assistant;
4. Performing finger sticks to check blood glucose levels, checking urine ketone levels, and recording the results of those checks appropriately;
5. Properly administering, according to the physician's orders or the DMMP, insulin, and glucagon and recording the results of the administration;
6. Recognizing complications that require seeking emergency assistance; and
7. Understanding the recommended schedules and food intake for meals and snacks for a student with diabetes, the effect of physical activity on blood glucose levels, and the proper actions to be taken if the schedule of a student is disrupted.

**NOTE:** The volunteer diabetes care assistant shall annually demonstrate competency in the training required by subsection C of the **70 O.S. § 1210.196.5** listed above. When a school nurse is in the district, the nurse may observe the care assistant performing diabetes management tasks. At the in-person state training, a hands-on return demonstration is part of the training.

A nurse who has completed the approved training may request a copy of the training PowerPoint presentations and competency test. The requestor may contact the School Health Coordinator at the Oklahoma State Department of Health, Maternal and Child Health Division, Family Health Services.

The school nurse, the principal, or a designee of the principal shall maintain a copy of the training guidelines and any records associated with the training for 7 years or following school policy on records retention.

When delegation of diabetes management tasks is deemed appropriate, the school nurse provides ongoing supervision and evaluation of student health outcomes. The school nurse is accountable for addressing the student's ongoing healthcare needs, encouraging independence, and self-care within the ability of the individual student. The school nurse must also promote a healthy, safe school environment that is conducive to learning. Ineffective diabetes management in school can lead to absenteeism, depression, stress, poor academic performance, and poor quality of life. Poorly controlled diabetes not only affects academic performance but can lead to long-term health complications that can be irreversible.

A school nurse, certified school nurse, or public health nurse assigned to the school shall be the coordinator/provider of care and the trainer of an adequate number of school personnel as specified above in the state statute. A school nurse, certified school nurse, or a public health nurse assigned to the school shall ensure if the school nurse is not present, at least one adult school employee who has received training per **70 O.S. § 1210.196.5** is present and can complete the diabetes care tasks in a timely manner. The management tasks must be followed while the student is at school, on field trips, participating in school-sponsored extracurricular activities, and while being transported by the school. This is necessary to enable full participation in school activities. These school personnel shall successfully complete the training per **70 O.S. §1210.196.5**. These school personnel need not be health care professionals. A school nurse, certified school nurse, or a public health nurse assigned to the school must conduct ongoing, periodic

nursing assessments of the student with diabetes, review the DMMP/physician's orders, and update the Individual Health Care Plan (IHP). They must also coordinate the student's Emergency Care Plan and the Disaster Plan following the DMMP/physician's orders.

It is important that the nurse facilitate the initial school diabetes team meeting to discuss the implementation of the DMMP, IHP and develop/implement the Section 504 Plan, Individual Education Plan (IEP) (a sample of an IEP and a link are listed under Appendix), or another education plan used by the school. In addition, the nurse is to follow up with school diabetes team meetings when necessary to discuss assessment data, receive updates, and evaluate the need for changes to the written plans. It is also recommended the nurse discusses with the parent or guardian throughout the year any changes or issues that arise.

The nurse, if available in the district, must plan and implement diabetes management training for school personnel with responsibility for the student with diabetes. Additionally, the nurse should verify the competency of everyone mentioned in the IHP, Section 504 Plan, IEP, or other plans making sure they are competent in knowing their role to carry out the plan, how their role is related to each other and when and where to seek help.

Diabetes management is most effective when there is a partnership among students, parents/guardians, school nurses, healthcare providers, and other school personnel (e.g., teachers, counselors, coaches, transportation, food service employees, and administrators). A school nurse or public health nurse assigned to the school provides the health expertise and coordination needed to ensure cooperation from all partners in assisting the student toward diabetes self-care.

The nurse works with the student, parents, and the student's health care provider, principal, Section 504/IEP coordinator, and other relevant school staff members to implement written care plans, including the IHP, Section 504 Plan, IEP, or other education plans and monitor compliance.

The nurse will work with the classroom teacher, bus driver, nutrition staff and other school personnel who have direct contact with the student with diabetes, in developing a plan to provide substitute personnel with appropriate information to manage diabetes at school. The nurse must verify that an adult school employee who has received the Diabetes Training per **70 O.S. § 1210.196.5** is available for the student while they are attending school or participating in a school sponsored activity.

The nurse is to request the appropriate materials and medical supplies from the parent/guardian, and arrange a system to notify them of any material or medical supplies that need to be replenished. The nurse must also communicate assessment data about the student's diabetes management or health concerns, such as acute hypoglycemia episodes, hyperglycemia, general attitude, and emotional issues. The nurse must maintain accurate and legible documentation of blood glucose levels, incidents in care occurring at school, as well as at all school sponsored activities. A copy of documentation shall be available for continued care for physician/health care team or to the parent/guardian as necessary.

## **Guidelines for Volunteers**

Following the Oklahoma Statutes, the Diabetes Management Volunteer must demonstrate annual competency by successfully completing approved diabetes management training per **70 O.S. § 1210.196.5**. The school nurse, if available in the district, must verify the competency of the trained diabetes care assistant.

The volunteers may be trained by a nurse in their district who has met the training requirements for school nurses. A second option is to successfully complete the annual state diabetes training provided by OSDH staff in conjunction with OSDE. This may be completed in-person at one of the multiple trainings held across the state, or if staff completed the training the prior year 'in-person with the hands-on needle skills', they may complete the virtual online training (Link listed under Resources). For example, if the initial training was attended in August, volunteers must complete the online training by August 31<sup>st</sup> of the next year in order to enroll in online training. Those attempting to complete the online training in September will need to attend the state training in person or a training given by their school's nurse. It is recommended that volunteers be trained in person every other year for needle skill compliance and evaluation of competency of the skills as written in **70 O.S. § 1210.196.5. Volunteer Diabetes Care Assistants training.**

A school employee shall not be subject to any penalty or disciplinary action for refusing to serve as a volunteer diabetes care assistant. However, those who agree to serve **must** accept responsibility for assigned tasks and acknowledge liability for actions that do not follow the Diabetes Medical Management Plan or Physician Orders. The volunteer must understand and follow the relevant portions of the student's DMMP, Emergency care plan, IHP, Section 504 plan, or another education plan. The volunteer must also attend scheduled diabetes management meetings. The volunteer must understand that a student who is experiencing high or low blood glucose levels is never to be left alone or sent anywhere alone.

The volunteer must be able to recognize signs and symptoms of hypoglycemia, hyperglycemia, and determine what action is needed.

The volunteer must keep accurate and legible documentation of blood glucose levels and any incidents that require follow-up. There must be open communication between the volunteer and the school nurse, if one is available in the district, to ensure care is appropriate. The nurse must also verify the DMMP/physician orders are being followed.

The volunteer must respect the student's confidentiality and right to privacy and follow the relevant, HIPAA and FERPA guidelines to protect the student's privacy. The volunteer must be available on campus during regular school hours and when a student is participating in before and after-school activities on field trips, athletics, or other school-sponsored activities. The volunteer is to provide support and encouragement to the student to help ensure the student is provided with a supportive learning environment and treated the same as students without diabetes, except to respond to medical needs.

Please direct any question to OSDH, MCH, School Health Program at:

**Oklahoma State Department of Health  
Maternal and Child Health Services  
123 Robert S, Kerr Suite 1702  
Oklahoma City, OK 73117  
(405) 271-4471**

## **Resources:**

**Helping the Student with Diabetes Succeed: A Guide for School Personnel:**

<https://www.diabetes.org/sites/default/files/2020-06/SchoolguidepdfMay2020.pdf>

**Center for Disease Control Managing Diabetes at School Resource:**

<https://www.cdc.gov/diabetes/library/features/managing-diabetes-at-school.html>

**OSDH School Health Guidelines-Diabetes:**

<https://www.ok.gov/health2/documents/FINAL%20DIABETES%20GUIDELINES%20AUGUST2019.pdf>

**American Diabetes Association Safe at School Diabetes Care Tasks at School**

<https://diabetes.org/tools-support/know-your-rights/safe-at-school-state-laws/training-resources-school-staff/diabetes-care-tasks-school>

**\*American Diabetes Association Training Resource for School Staff**

**\*ADA Training for school nurses and to use to train other school staff:**

<https://diabetes.org/tools-support/know-your-rights/safe-at-school-state-laws/training-resources-school-staff>

**\*Oklahoma State Department of Health Diabetes Management in Schools Training:**

<https://sde.ok.gov/safe-and-healthy-schools-professional-learning>

**Tips for Teachers:**

<http://main.diabetes.org/dorg/PDFs/schools/tentipsforteachers.pdf>

**Oklahoma State Law Diabetes Management in Schools Act:**

[http://main.diabetes.org/dorg/PDFs/schools/statelaws/ok\\_schooldiabeteslaw.pdf](http://main.diabetes.org/dorg/PDFs/schools/statelaws/ok_schooldiabeteslaw.pdf)

**ADA Safe at School State Laws:**

<https://www.diabetes.org/tools-support/know-your-rights/safe-at-school-state-laws>

**Diabetes Resource:**

<https://danatech.org>

## **Appendix:**

**Oklahoma Statutes Title 70 Diabetes Management in Schools Act:**

[http://main.diabetes.org/dorg/PDFs/schools/statelaws/ok\\_schooldiabeteslaw.pdf](http://main.diabetes.org/dorg/PDFs/schools/statelaws/ok_schooldiabeteslaw.pdf)

**Sample Diabetic Medical Management Plan (DMMP):** <http://main.diabetes.org/dorg/PDFs/living-with-diabetes/diabetes-medical-management.pdf>

**Sample Section 504 Plan:**

<http://main.diabetes.org/dorg/PDFs/Advocacy/Discrimination/504-plan.pdf>



# **Legislation Related to Diabetes Management in Schools**

OKLAHOMA STATUTES TITLE 70. SCHOOLS DIVISION III.

OTHER SCHOOL LAWS CHAPTER 15.

HEALTH AND SAFETY DIABETES MANAGEMENT IN SCHOOLS ACT

## **§ 1210.196.1. Short title**

Sections 3 through 9 of this Act shall be known and may be cited as the "Diabetes Management in Schools Act".

## **§ 1210.196.2. Definitions**

As used in the Diabetes Management in Schools Act:

1. "Diabetes medical management plan" means a document developed by the personal Healthcare team of a student, that sets out the health services that may be needed by the school, and is signed by the personal health care team and the parent or Guardian, of the student;
2. "School" means a public elementary or secondary school. The term shall not include a charter school established pursuant to Section 3-132 of Title 70 of the Oklahoma Statutes;
3. "School nurse" means a certified school nurse as defined in Section 1-116 of Title 70 of the Oklahoma Statutes, a registered nurse contracting with the school to provide school health services, or a public health nurse; and
4. "Volunteer diabetes care assistant" means a school employee who has volunteered to be a diabetes care assistant and who has successfully completed the training required by Section 5 of this act.

## **§ 1210.196.3. Diabetes medical management plan**

A diabetes medical management plan shall be developed for each student with diabetes who will seek care for diabetes while at school or while participating in a school activity. The plan shall be developed by the personal health care team of each student. The personal health care team shall consist of the principal or designee of the principal, the school nurse, if a school nurse is assigned to the school, the parent or guardian of the student, and to the extent practicable, the physician responsible for the diabetes treatment of the student.

## **§ 1210.196.4. School nurse to administer management plan--Volunteer diabetes care assistant--Refusal to serve as assistant**

- A. The school nurse at each school in which a student with diabetes is enrolled shall assist the student with the management of their diabetes care as provided for in the diabetes medical management plan for the student.
- B. If a school does not have a school nurse assigned to the school, the principal shall make an effort to seek school employees who may or may not be health care professionals to serve as volunteer diabetes care assistants to assist the student with the management of their diabetes care as provided for in the diabetes medical management plan for the student.
- C. Each school in which a student with diabetes is enrolled shall make an effort to ensure that a school nurse or a volunteer diabetes care assistant is available at the school to assist the diabetic student when needed.

- D. A school employee shall not be subject to any penalty or disciplinary action for refusing to serve as a volunteer diabetes care assistant.
- E. A school district shall not restrict the assignment of a student with diabetes to a particular school site based on the presence of a school nurse, contract school employee, or a volunteer diabetes care assistant.
- F. Each school nurse and volunteer diabetes care assistant shall at all times have access to a physician.

**§ 1210.196.5. Volunteer diabetes care assistants training**

- A. The state Department of Health shall develop guidelines, with the assistance of the Following entities, for the training of volunteer diabetes care assistants:

- 1. Oklahoma School Nurses Association (renamed School Nurse Organization of Oklahoma SNOO);
- 2. The American Diabetes Association;
- 3. The Juvenile Diabetes Research Foundation International;
- 4. The Oklahoma Nurses Association;
- 5. The State Department of Education;
- 6. Oklahoma Board of Nursing;
- 7. Oklahoma Dietetic Association (renamed Oklahoma Academy of Nutrition and Dietetics);
- 8. Cooperative council of School Administrators.

- B. A school nurse or a State Department of health designee with training in diabetes care shall coordinate the training of volunteer diabetes care assistants. C. The training shall include instruction in:

- 1. Recognizing symptoms of hypoglycemia and hyperglycemia;
- 2. Understanding the proper action to take if the blood glucose levels of a student with diabetes are outside the target ranges indicated by the diabetes medical management plan for the student;
- 3. Understanding the details of the diabetes medical management plan of each Student assigned to a volunteer diabetes care assistant;
- 4. Performing finger sticks to check blood glucose levels, checking urine ketone levels, and recording the results of those checks;
- 5. Properly administering insulin and glucagon and recording the results of the administration
- 6. Recognizing complications that require seeking emergency assistance; and
- 7. Understanding the recommended schedules and food intake for meals and snacks for a student with diabetes, the effect of physical activity on blood glucose levels, and the proper actions to be taken if the schedule of a student is disrupted.

- C. The training shall include instruction in:

- 1. Recognizing the symptoms of hypoglycemia and hyperglycemia;

2. Understanding the proper action to take if the blood glucose levels of a student with diabetes are outside the target ranges indicated by the diabetes medical management plan for the student;
  3. Understanding the details of the diabetes medical management plan of each student assigned to a volunteer diabetes care assistant;
  4. Performing finger sticks to check blood glucose levels, checking urine ketone levels, and recording the results of those checks;
  5. Properly administering insulin and glucagon and recording the results of the administration;
  6. Recognizing complications that require seeking emergency assistance; and
  7. Understanding the recommended schedules and food intake for meals and snacks for a student with diabetes, the effect of physical activity on blood glucose levels, and the proper actions to be taken if the schedule of a student is disrupted.
- D. The volunteer diabetes care assistant shall annually demonstrate competency in the training required by subsection C of this section.
- E. The school nurse, the principal, or a designee of the principal shall maintain a copy of the training guidelines and any records associated with the training.

**§ 1210.196.6. Student information sheet--Privacy policies**

- A. Each school district shall provide, with the permission of the parent, to each school Employee who is responsible for providing transportation for the student with diabetes or supervision a student with diabetes an information sheet that:
1. Identifies the student who has diabetes;
  2. Identifies potential emergencies that may occur as a result of the diabetes of the student and the appropriate responses to emergencies; and
  3. Provides the telephone number of a contact person in case of an emergency involving the student with diabetes.
- B. The school employee provided information as set forth in this section shall be informed of all health privacy policies.

**§ 1210.196.7. Student management of diabetes at school--Designated private area**

- A. In accordance with the diabetes medical management plan of a student, a school shall permit the student to attend to the management and care of the diabetes of the student, which may include:
1. Performing blood glucose level checks;
  2. Administering insulin through the insulin delivery system used by the student;
  3. Treating hypoglycemia and hyperglycemia;
  4. Possessing on the person of the student at any time any supplies or equipment necessary to monitor and care for the diabetes of the student; and
  5. Otherwise attending to the management and care of the diabetes of the student in the classroom, in any area of the school or school grounds, or at any school- related activity.
- B. Each school shall provide a private area where the student may attend to the management and care of the student's diabetes.

**§ 1210.196.8. Employee immunity from liability--Nurse not responsible for acts of diabetes care assistant**

- A. A school employee may not be subject to any disciplinary proceeding resulting from an action taken in compliance with the Diabetes Management in Schools Act. Any employee acting in accordance with the provisions of the act shall be immune from civil liability unless the actions of the employee arise to a level of reckless or intentional misconduct.
- B. A school nurse shall not be responsible for and shall not be subject to disciplinary Action for actions performed by a volunteer diabetes care assistant.

# Diabetes Medical Management Plan (DMMP)

This plan should be completed by the student's personal diabetes health care team, including the parents/guardians. It should be reviewed with relevant school staff and copies should be kept in a place that can be accessed easily by the school nurse, trained diabetes personnel, and other authorized personnel.

Date of plan: \_\_\_\_\_ This plan is valid for the current school year: \_\_\_\_\_ – \_\_\_\_\_

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## Student information

Student's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Date of diabetes diagnosis: \_\_\_\_\_  Type 1  Type 2  Other: \_\_\_\_\_  
School: \_\_\_\_\_ School phone number: \_\_\_\_\_  
Grade: \_\_\_\_\_ Homeroom teacher: \_\_\_\_\_  
School nurse: \_\_\_\_\_ Phone: \_\_\_\_\_

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## Contact information

**Parent/guardian 1:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email address: \_\_\_\_\_

**Parent/guardian 2:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email address: \_\_\_\_\_

**Student's physician/health care provider:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Emergency number: \_\_\_\_\_  
Email address: \_\_\_\_\_

### Other emergency contacts:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

## Checking blood glucose

Brand/model of blood glucose meter: \_\_\_\_\_

Target range of blood glucose:

Before meals:  90–130 mg/dL  Other: \_\_\_\_\_

Check blood glucose level:

- Before breakfast     After breakfast     \_\_\_\_ Hours after breakfast     2 hours after a correction dose  
 Before lunch     After lunch     \_\_\_\_ Hours after lunch     Before dismissal  
 Mid-morning     Before PE     After PE     Other: \_\_\_\_\_  
 As needed for signs/symptoms of low or high blood glucose     As needed for signs/symptoms of illness

Preferred site of testing:  Side of fingertip  Other: \_\_\_\_\_

Note: The side of the fingertip should always be used to check blood glucose level if hypoglycemia is suspected.

Student's self-care blood glucose checking skills:

- Independently checks own blood glucose  
 May check blood glucose with supervision  
 Requires a school nurse or trained diabetes personnel to check blood glucose  
 Uses a smartphone or other monitoring technology to track blood glucose values

Continuous glucose monitor (CGM):  Yes  No Brand/model: \_\_\_\_\_

Alarms set for: Severe Low: \_\_\_\_\_ Low: \_\_\_\_\_ High: \_\_\_\_\_

Predictive alarm: Low: \_\_\_\_\_ High: \_\_\_\_\_ Rate of change: Low: \_\_\_\_\_ High: \_\_\_\_\_

Threshold suspend setting: \_\_\_\_\_

## Additional information for student with CGM

- Confirm CGM results with a blood glucose meter check before taking action on the sensor blood glucose level. If the student has signs or symptoms of hypoglycemia, check fingertip blood glucose level regardless of the CGM.
- Insulin injections should be given at least three inches away from the CGM insertion site.
- Do not disconnect from the CGM for sports activities.
- If the adhesive is peeling, reinforce it with approved medical tape.
- If the CGM becomes dislodged, return everything to the parents/guardians. Do not throw any part away.
- Refer to the manufacturer's instructions on how to use the student's device.

Student's Self-care CGM Skills	Independent?	
The student troubleshoots alarms and malfunctions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The student knows what to do and is able to deal with a HIGH alarm.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The student knows what to do and is able to deal with a LOW alarm.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The student can calibrate the CGM.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The student knows what to do when the CGM indicates a rapid trending rise or fall in the blood glucose level.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

The student should be escorted to the nurse if the CGM alarm goes off:  Yes  No

Other instructions for the school health team: \_\_\_\_\_

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## Hypoglycemia treatment

Student's usual symptoms of hypoglycemia (list below): \_\_\_\_\_

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If exhibiting symptoms of hypoglycemia, OR if blood glucose level is less than \_\_\_\_\_ mg/dL, give a quick-acting glucose product equal to \_\_\_\_\_ grams of carbohydrate.

Recheck blood glucose in 15 minutes and repeat treatment if blood glucose level is less than \_\_\_\_\_ mg/dL.

Additional treatment: \_\_\_\_\_

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If the student is unable to eat or drink, is unconscious or unresponsive, or is having seizure activity or convulsions (jerking movement):

- Position the student on his or her side to prevent choking.
- Give glucagon:  1 mg       ½ mg       Other (dose) \_\_\_\_\_
  - Route:  Subcutaneous (SC)       Intramuscular (IM)
  - Site for glucagon injection:  Buttocks       Arm       Thigh       Other: \_\_\_\_\_
- Call 911 (Emergency Medical Services) and the student's parents/guardians.
- Contact the student's health care provider.

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## Hyperglycemia treatment

Student's usual symptoms of hyperglycemia (list below): \_\_\_\_\_

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- Check  Urine     Blood for ketones every \_\_\_\_\_ hours when blood glucose levels are above \_\_\_\_\_ mg/dL.
- For blood glucose greater than \_\_\_\_\_ mg/dL AND at least \_\_\_\_\_ hours since last insulin dose, give correction dose of insulin (see correction dose orders).
- Notify parents/guardians if blood glucose is over \_\_\_\_\_ mg/dL.
- For insulin pump users: see **Additional Information for Student with Insulin Pump**.
- Allow unrestricted access to the bathroom.
- Give extra water and/or non-sugar-containing drinks (not fruit juices): \_\_\_\_\_ ounces per hour.

Additional treatment for ketones: \_\_\_\_\_

- Follow physical activity and sports orders. (See **Physical Activity and Sports**)

If the student has symptoms of a hyperglycemia emergency, call 911 (Emergency Medical Services) and contact the student's parents/guardians and health care provider. Symptoms of a hyperglycemia emergency include: dry mouth, extreme thirst, nausea and vomiting, severe abdominal pain, heavy breathing or shortness of breath, chest pain, increasing sleepiness or lethargy, or depressed level of consciousness.

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## Insulin therapy

Insulin delivery device:  Syringe       Insulin pen       Insulin pump

Type of insulin therapy at school:  Adjustable (basal-bolus) insulin     Fixed insulin therapy     No insulin

## Insulin therapy (continued)

### Adjustable (Basal-bolus) Insulin Therapy

- **Carbohydrate Coverage/Correction Dose:** Name of insulin: \_\_\_\_\_
- **Carbohydrate Coverage:**  
**Insulin-to-carbohydrate ratio:** \_\_\_\_\_ **Lunch:** 1 unit of insulin per \_\_\_\_\_ grams of carbohydrate  
**Breakfast:** 1 unit of insulin per \_\_\_\_\_ grams of carbohydrate **Snack:** 1 unit of insulin per \_\_\_\_\_ grams of carbohydrate

#### Carbohydrate Dose Calculation Example

$$\frac{\text{Total Grams of Carbohydrate to Be Eaten}}{\text{Insulin-to-Carbohydrate Ratio}} = \text{Units of Insulin}$$

**Correction dose:** Blood glucose correction factor (insulin sensitivity factor) = \_\_\_\_\_ Target blood glucose = \_\_\_\_\_ mg/dL

#### Correction Dose Calculation Example

$$\frac{\text{Current Blood Glucose} - \text{Target Blood Glucose}}{\text{Correction Factor}} = \text{Units of Insulin}$$

**Correction dose scale** (use instead of calculation above to determine insulin correction dose):

Blood glucose \_\_\_\_\_ to \_\_\_\_\_ mg/dL, give \_\_\_\_\_ units      Blood glucose \_\_\_\_\_ to \_\_\_\_\_ mg/dL, give \_\_\_\_\_ units

Blood glucose \_\_\_\_\_ to \_\_\_\_\_ mg/dL, give \_\_\_\_\_ units      Blood glucose \_\_\_\_\_ to \_\_\_\_\_ mg/dL, give \_\_\_\_\_ units

See the worksheet examples in **Advanced Insulin Management: Using Insulin-to-Carb Ratios and Correction Factors** for instructions on how to compute the insulin dose using a student's insulin-to-carb ratio and insulin correction factor.

#### When to give insulin:

##### Breakfast

- Carbohydrate coverage only
- Carbohydrate coverage plus correction dose when blood glucose is greater than \_\_\_\_\_ mg/dL and \_\_\_\_\_ hours since last insulin dose.
- Other: \_\_\_\_\_

##### Lunch

- Carbohydrate coverage only
- Carbohydrate coverage plus correction dose when blood glucose is greater than \_\_\_\_\_ mg/dL and \_\_\_\_\_ hours since last insulin dose.
- Other: \_\_\_\_\_

##### Snack

- No coverage for snack
- Carbohydrate coverage only
- Carbohydrate coverage plus correction dose when blood glucose is greater than \_\_\_\_\_ mg/dL and \_\_\_\_\_ hours since last insulin dose.
- Correction dose only: For blood glucose greater than \_\_\_\_\_ mg/dL AND at least \_\_\_\_\_ hours since last insulin dose.
- Other: \_\_\_\_\_



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## Insulin therapy (continued)

**Fixed Insulin Therapy** Name of insulin: \_\_\_\_\_

- \_\_\_\_\_ Units of insulin given pre-breakfast daily  
 \_\_\_\_\_ Units of insulin given pre-lunch daily  
 \_\_\_\_\_ Units of insulin given pre-snack daily  
 Other: \_\_\_\_\_

### Parents/Guardians Authorization to Adjust Insulin Dose

- Yes  No Parents/guardians authorization should be obtained before administering a correction dose.  
 Yes  No Parents/guardians are authorized to increase or decrease correction dose scale within the following range:  
+/- \_\_\_\_\_ units of insulin.  
 Yes  No Parents/guardians are authorized to increase or decrease insulin-to-carbohydrate ratio within the following  
range: \_\_\_\_\_ units per prescribed grams of carbohydrate, +/- \_\_\_\_\_ grams of carbohydrate.  
 Yes  No Parents/guardians are authorized to increase or decrease fixed insulin dose within the following range:  
+/- \_\_\_\_\_ units of insulin.

### Student's self-care insulin administration skills:

- Independently calculates and gives own injections.  
 May calculate/give own injections with supervision.  
 Requires school nurse or trained diabetes personnel to calculate dose and student can give own injection with supervision.  
 Requires school nurse or trained diabetes personnel to calculate dose and give the injection.

---

## Additional information for student with insulin pump

**Brand/model of pump:** \_\_\_\_\_ **Type of insulin in pump:** \_\_\_\_\_

**Basal rates during school:** Time: \_\_\_\_\_ Basal rate: \_\_\_\_\_ Time: \_\_\_\_\_ Basal rate: \_\_\_\_\_  
Time: \_\_\_\_\_ Basal rate: \_\_\_\_\_ Time: \_\_\_\_\_ Basal rate: \_\_\_\_\_  
Time: \_\_\_\_\_ Basal rate: \_\_\_\_\_

**Other pump instructions:** \_\_\_\_\_

**Type of infusion set:** \_\_\_\_\_

**Appropriate infusion site(s):** \_\_\_\_\_

- For blood glucose greater than \_\_\_\_\_ mg/dL that has not decreased within \_\_\_\_\_ hours after correction, consider pump failure or infusion site failure. Notify parents/guardians.  
 For infusion site failure: Insert new infusion set and/or replace reservoir, or give insulin by syringe or pen.  
 For suspected pump failure: Suspend or remove pump and give insulin by syringe or pen.

### Physical Activity

- May disconnect from pump for sports activities:  Yes, for \_\_\_\_\_ hours  No  
Set a temporary basal rate:  Yes, \_\_\_\_\_% temporary basal for \_\_\_\_\_ hours  No  
Suspend pump use: Yes, for \_\_\_\_\_ hours  No

## Additional information for student with insulin pump (continued)

Student's Self-care Pump Skills	Independent?	
Counts carbohydrates	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Calculates correct amount of insulin for carbohydrates consumed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Administers correction bolus	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Calculates and sets basal profiles	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Calculates and sets temporary basal rate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Changes batteries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Disconnects pump	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Reconnects pump to infusion set	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Prepares reservoir, pod, and/or tubing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inserts infusion set	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Troubleshoots alarms and malfunctions	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Other diabetes medications

Name: \_\_\_\_\_ Dose: \_\_\_\_\_ Route: \_\_\_\_\_ Times given: \_\_\_\_\_

Name: \_\_\_\_\_ Dose: \_\_\_\_\_ Route: \_\_\_\_\_ Times given: \_\_\_\_\_

## Meal plan

Meal/Snack	Time	Carbohydrate Content (grams)
Breakfast		_____ to _____
Mid-morning snack		_____ to _____
Lunch		_____ to _____
Mid-afternoon snack		_____ to _____

Other times to give snacks and content/amount: \_\_\_\_\_

Instructions for when food is provided to the class (e.g., as part of a class party or food sampling event): \_\_\_\_\_

Special event/party food permitted:  Parents'/Guardians' discretion  Student discretion

### Student's self-care nutrition skills:

- Independently counts carbohydrates
- May count carbohydrates with supervision
- Requires school nurse/trained diabetes personnel to count carbohydrates

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## Physical activity and sports

A quick-acting source of glucose such as  glucose tabs and/or  sugar-containing juice must be available at the site of physical education activities and sports.

Student should eat  15 grams  30 grams of carbohydrate  other: \_\_\_\_\_

before  every 30 minutes during  every 60 minutes during  after vigorous physical activity  other: \_\_\_\_\_

If most recent blood glucose is less than \_\_\_\_\_ mg/dL, student can participate in physical activity when blood glucose is corrected and above \_\_\_\_\_ mg/dL.

Avoid physical activity when blood glucose is greater than \_\_\_\_\_ mg/dL or if urine/blood ketones are moderate to large.

(See **Administer Insulin** for additional information for students on insulin pumps.)

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## Disaster plan

To prepare for an unplanned disaster or emergency (72 hours), obtain emergency supply kit from parents/guardians.

Continue to follow orders contained in this DMMP.

Additional insulin orders as follows (e.g., dinner and nighttime): \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

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## Signatures

This Diabetes Medical Management Plan has been approved by:

\_\_\_\_\_  
Student's Physician/Health Care Provider

\_\_\_\_\_  
Date

I, (parent/guardian) \_\_\_\_\_, give permission to the school nurse or another qualified health care professional or trained diabetes personnel of (school) \_\_\_\_\_ to perform and carry out the diabetes care tasks as outlined in (student) \_\_\_\_\_ Diabetes Medical Management Plan. I also consent to the release of the information contained in this Diabetes Medical Management Plan to all school staff members and other adults who have responsibility for my child and who may need to know this information to maintain my child's health and safety. I also give permission to the school nurse or another qualified health care professional to contact my child's physician/health care provider.

Acknowledged and received by:

\_\_\_\_\_  
Student's Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Nurse/Other Qualified Health Care Personnel

\_\_\_\_\_  
Date

# SAMPLE SECTION 504 PLAN

The attached sample Section 504 Plan was developed by the American Diabetes Association (ADA) and the Disability Rights Education and Defense Fund, Inc. (DREDF).



## **MODEL 504 PLAN FOR A STUDENT WITH DIABETES**

[NOTE: This model 504 Plan lists a broad range of services and accommodations that might be needed by a child with diabetes in school. The plan should be individualized to meet the needs, abilities, and medical condition of each student and should *include only those items in the model that are relevant to that student*. Some students will need additional services and accommodations that have not been included in this model plan.]

**Section 504 Plan for** \_\_\_\_\_

**School** \_\_\_\_\_

**School Year:** \_\_\_\_\_

**Student's Name** \_\_\_\_\_ **Birth Date** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Health Status/Disability:** \_\_\_\_\_

**Homeroom Teacher:** \_\_\_\_\_ **Bus Number:** \_\_\_\_\_ **Car Rider:** \_\_\_\_\_

## **OBJECTIVES/GOALS OF THIS PLAN**

Diabetes can cause blood glucose (sugar) levels to be too high or too low, both of which affect the student's ability to learn as well as seriously endangering the student's health both immediately and in the long term. The goal of this plan is to provide the special education and/or related aids and services needed to maintain blood glucose within this student's target range, and to respond appropriately to levels outside of this range in accordance with the instructions provided by the student's personal health care team.

## **REFERENCES**

- School accommodations, diabetes care, and other services set out by this Plan will be consistent with the information and protocols contained in the National Diabetes Education Program *Helping the Student with Diabetes Succeed: A Guide for School Personnel*, June 2010.

## **DEFINITIONS USED IN THIS PLAN**

1. ***Diabetes Medical Management Plan (DMMP)***: A plan that describes the diabetes care regimen and identifies the health care needs of a student with diabetes. This plan is developed and approved by the student's personal health care team and family. Schools must do outreach to the parents and child's health care provider if a DMMP is not submitted by the family [**Note: School districts may have other names for the plan. If so, substitute the appropriate terminology throughout.**]
2. ***Quick Reference Emergency Plan***: A plan that provides school personnel with essential information on how to recognize and treat hypoglycemia and hyperglycemia.
3. ***Trained Diabetes Personnel (TDP)***: Non-medical school personnel who have been identified by the school nurse, school administrator, and parent who are willing to be trained in basic diabetes knowledge and have received training coordinated by the school nurse in diabetes care, including the performance of blood glucose monitoring, insulin and glucagon administration, recognition and treatment of hypoglycemia and hyperglycemia, and performance of ketone checks, and who will perform these diabetes care tasks in the absence of a school nurse.

**1. PROVISION OF DIABETES CARE**

- 1.1 At least \_\_\_\_\_ staff members will receive training to be Trained Diabetes Personnel (TDP), and either a school nurse or TDP will be available at the site where the student is **at all times** during school hours, during extracurricular activities, and on school sponsored field trips to provide diabetes care in accordance with this Plan and as directed in the DMMP, including performing or overseeing administration of insulin or other diabetes medications (which, for pump users includes programming and troubleshooting the student’s insulin pump), blood glucose monitoring, ketone checks, and responding to hyperglycemia and hypoglycemia including administering glucagon.
  
- 1.2 Any staff member who is not a TDP and who has primary care for the student at any time during school hours, extracurricular activities, or during field trips shall receive training that will include a general overview of diabetes and typical health care needs of a student with diabetes, recognition of high and low blood glucose levels, and how and when to immediately contact either a school nurse or a TDP.
  
- 1.3 Any bus driver who transports the student must be informed of symptoms of high or low blood glucose levels and provided with a copy the student’s Quick Reference Emergency Plan and be prepared to act in accordance with that Plan.

**2. TRAINED DIABETES PERSONNEL**

The following school staff members will be trained to become TDP’s \_\_\_\_\_(date):

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**3. STUDENT’S LEVEL OF SELF-CARE AND LOCATION OF SUPPLIES AND EQUIPMENT**

3.1 As stated in the attached DMMP:

(a) The student is able to perform the following diabetes care tasks without help or supervision:

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and the student will be permitted to provide this self-care at any time and in any location at the school, at field trips, at sites of extracurricular activities, and on school buses.

(b) The student needs assistance or supervision with the following diabetes health care tasks:

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(c) The student needs a school nurse or TDP to perform the following diabetes care tasks:

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3.2 The student will be permitted to carry the following diabetes supplies and equipment with him/her at all times and in all locations:

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3.3 Diabetes supplies and equipment that are not kept on the student and additional supplies and will be kept at:

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3.4 Parent is responsible for providing diabetes supplies and food to meet the needs of the student as prescribed in the DMMP.

#### **4. SNACKS AND MEALS**

- 4.1 The school nurse or TDP, if school nurse is not available, will work with the student and his/her parents/guardians to coordinate a meal and snack schedule in accordance with the attached DMMP that will coincide with the schedule of classmates to the closest extent possible. The student shall eat lunch at the same time each day, or earlier if experiencing hypoglycemia. The student shall have enough time to finish lunch. A snack and quick-acting source of glucose must always be immediately available to the student.
- 4.2 The attached DMMP sets out the regular time(s) for snacks, what constitutes a snack, and when the student should have additional snacks. The student will be permitted to eat a snack no matter where the student is.
- 4.3 The parent/guardian will supply snacks needed in addition to or instead of any snacks supplied to all students.
- 4.4 The parent/guardian will provide carbohydrate content information for snacks and meals brought from home.
- 4.5 The school nurse or TDP will ensure that the student takes snacks and meals at the specified time(s) each day.
- 4.6 Adjustments to snack and meal times will be permitted in response to changes in schedule upon request of parent/guardian.

#### **5. EXERCISE AND PHYSICAL ACTIVITY**

- 5.1 The student shall be permitted to participate fully in physical education classes and team sports except as set out in the student's DMMP.
- 5.2 Physical education instructors and sports coaches must have a copy of the emergency action plan and be able to recognize and assist with the treatment of low blood glucose levels.
- 5.3 Responsible school staff members will make sure that the student's blood glucose meter, a quick-acting source of glucose, and water is always available at the site of physical education class and team sports practices and games.



## **6. WATER AND BATHROOM ACCESS**

- 6.1 The student shall be permitted to have immediate access to water by keeping a water bottle in the student's possession and at the student's desk, and by permitting the student to use the drinking fountain without restriction.
- 6.2 The student shall be permitted to use the bathroom without restriction.

## **7. CHECKING BLOOD GLUCOSE LEVELS, INSULIN AND MEDICATION ADMINISTRATION, AND TREATING HIGH OR LOW BLOOD GLUCOSE LEVELS**

- 7.1 The student's level of self-care is set out in section 3 above including which tasks the student can do by himself/herself and which must be done with the assistance of, or wholly by, either a school nurse or a TDP.
- 7.2 Blood glucose monitoring will be done at the times designated in the student's DMMP, whenever the student feels her/his blood glucose level may be high or low, or when symptoms of high or low blood glucose levels are observed.
- 7.3 Insulin and/or other diabetes medication will be administered at the times and through the means (e.g., syringe, pen or pump) designated in the student's DMMP for both scheduled doses and doses needed to correct for high blood glucose levels.
- 7.4 The student shall be provided with privacy for blood glucose monitoring and insulin administration if the student desires.
- 7.5 The student's usual symptoms of high and low blood glucose levels and how to respond to these levels are set out in the attached DMMP.
- 7.6 When the student asks for assistance or any staff member believes the student is showing signs of high or low blood glucose levels, the staff member will immediately seek assistance from the school nurse or TDP while making sure an adult stays with the student at all times. Never send a student with actual -- or suspected -- high or low blood glucose levels anywhere alone.

7.7 Any staff member who finds the student unconscious will immediately contact the school office. The office will immediately do the following in the order listed:

1. **Contact the school nurse or a TDP (if the school nurse is not on site and immediately available) who will confirm the blood glucose level with a monitor and immediately administer glucagon (glucagon should be administered if no monitor is available);**
2. **Call 911 (office staff will do this without waiting for the school nurse or TDP to administer glucagon); and**
3. **Contact the student's parent/guardian and physician at the emergency numbers provided below.**

7.8 School staff including physical education instructors and coaches will provide a safe location for the storage of the student's insulin pump if the student chooses not to wear it during physical activity or any other activity.

## **8. FIELD TRIPS AND EXTRACURRICULAR ACTIVITIES**

8.1 The student will be permitted to participate in all school-sponsored field trips and extracurricular activities (such as sports, clubs, and enrichment programs) without restriction and with all of the accommodations and modifications, including necessary supervision by identified school personnel, set out in this Plan. The student's parent/guardian will not be required to accompany the student on field trips or any other school activity.

8.2 The school nurse or TDP will be available on site at all school-sponsored field trips and extracurricular activities, will provide all usual aspects of diabetes care (including, but not limited to, blood glucose monitoring, responding to hyperglycemia and hypoglycemia, providing snacks and access to water and the bathroom, and administering insulin and glucagon), and will make sure that the student's diabetes supplies travel with the student.

## **9. TESTS AND CLASSROOM WORK**

9.1 If the student is affected by high or low blood glucose levels at the time of regular testing, the student will be permitted to take the test at another time without penalty.

9.2 If the student needs to take breaks to use the water fountain or bathroom, check blood glucose, or to treat hypoglycemia or hyperglycemia during a test or other activity, the student will be given extra time to finish the test or other activity without penalty.

- 9.3 The student shall be given instruction to help him/her make up any classroom instruction missed due to diabetes care without penalty.
- 9.4 The student shall not be penalized for absences required for medical appointments and/or for illness. The parent will provide documentation from the treating health care professional if otherwise required by school policy.

## **10. COMMUNICATION**

- 10.1 The school nurse, TDP, and other staff will keep the student's diabetes confidential, except to the extent that the student decides to openly communicate about it with others.
- 10.2 Encouragement is essential. The student be treated in a way that encourages the student to eat snacks on time, and to progress toward self-care with his/her diabetes management skills.
- 10.3 The teacher, school nurse or TDP will provide reasonable notice to parent/guardian when there will be a change in planned activities such as exercise, playground time, field trips, parties, or lunch schedule, so that the lunch, snack plan, and insulin dosage can be adjusted accordingly.
- 10.4 Each substitute teacher and substitute school nurse will be provided with written instructions regarding the student's diabetes care and a list of all school nurses and TDP at the school.

## **11. EMERGENCY EVACUATION AND SHELTER-IN-PLACE**

- 11.1 In the event of emergency evacuation or shelter-in-place situation, the student's 504 Plan and DMMP will remain in full force and effect.
- 11.2 The school nurse or TDP will provide diabetes care to the student as outlined by this Plan and the student's DMMP, will be responsible for transporting the student's diabetes supplies, and equipment, will attempt to establish contact with the student's parents/guardians and provide updates, and will and receive information from parents/guardians regarding the student's diabetes care.

**12. PARENTAL NOTIFICATION**

**12.1 NOTIFY PARENTS/GUARDIANS IMMEDIATELY IN THE FOLLOWING SITUATIONS:**

- Symptoms of severe low blood sugar such as continuous crying, extreme tiredness, seizure, or loss of consciousness.
  
- The student’s blood glucose test results are below \_\_\_\_\_ or are below \_\_\_\_\_ 15 minutes after consuming juice or glucose tablets.
  
- Symptoms of severe high blood sugar such as frequent urination, presence of ketones, vomiting or blood glucose level above \_\_\_\_\_.
  
- The student refuses to eat or take insulin injection or bolus.
- Any injury.
  
- Insulin pump malfunctions cannot be remedied.
- Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**12.2 EMERGENCY CONTACT INSTRUCTIONS**

Call parent/guardian at numbers listed below. If unable to reach parent/guardian, call the other emergency contacts or student’s health care providers listed below.

**EMERGENCY CONTACTS:**

\_\_\_\_\_  
Parent’s/Guardian’s Name    Home Phone Number    Work Phone Number    Cell Number

\_\_\_\_\_  
Parent’s/Guardian’s Name    Home Phone Number    Work Phone Number    Cell Number

**Other emergency contacts:**

_____	_____	_____	_____
Name	Home Phone Number	Work Phone Number	Cell Number
_____	_____	_____	_____
Name	Home Phone Number	Work Phone Number	Cell Number

**Student's Health Care Provider(s):**

_____	_____	_____
Name	Phone Number	Address
_____	_____	_____
Name	Phone Number	Address

**This Plan shall be reviewed and amended at the beginning of each school year or more often if necessary.**

**Approved and received:**

\_\_\_\_\_  
**Parent/Guardian**

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Parent/Guardian**

\_\_\_\_\_  
Date

**Approved and received:**

\_\_\_\_\_  
**School Administrator and Title**

\_\_\_\_\_  
Date

\_\_\_\_\_  
**School Nurse**

\_\_\_\_\_  
Date