**Student’s Name:**

**Student’s usual **LOW blood glucose symptoms:**
- Shaky or jittery
- Sweaty
- Hungry
- Pale
- Headache
- Blurry vision
- Sleepy
- Dizzy

**Student’s usual **HIGH blood glucose symptoms:**
- Increased thirst, dry mouth
- Frequent or increased urination
- Change in appetite, nausea
- Blurry vision
- Fatigue
- Other

---

**ALGORITHMS FOR BLOOD GLUCOSE RESULTS**

**CHECK BLOOD GLUCOSE**

**70 – 90**
1. If student’s blood glucose result is immediately following or prior to exercise, give 15 gm carbohydrate snack.
2. If meal or snack is within 60 minutes, no additional carbs are needed.
3. If student is not going to eat within 1-2 hours, give small carbohydrate snack.

**91-125**
- Student may eat a snack before exercising or before recess.

**126-300**
- No action needed.

**ABOVE 300**

**Student treated by PUMP**
1. If 2-3 hours since last bolus, treat with correction bolus via pump.
   - Check for redness at site, tubing for kinks or air bubble, insulin supply
3. If blood glucose still ≥ 300 mg/dl and not explained, check ketones:
   a. If ketones are **absent or small**, encourage exercise and water
   b. If ketones **moderate or large**:
      - Give insulin correction dose per orders **via syringe**.
      - Call parent
      - No exercise; encourage water
4. Change infusion set or continue insulin injections every 2-3 hours via syringe.
5. Provide free, unrestricted access to water and the restroom.

**Student treated by INJECTION**
1. Use correction scale or formula at lunch or every 3 hours.
2. Notify school nurse (if avail.)
3. Check ketones if symptoms or if blood glucose>300 twice in a row:
   a. If ketones are **absent or small**, encourage exercise and water
   b. If ketones **moderate or large**:
      - No exercise; give water
      - Call parent
      - Give units of insulin per orders
4. Provide free, unrestricted access to water and the restroom.

**CALL 911** if student becomes unconscious, has seizures or is unable to swallow.
- Turn student on side to ensure open airway
- Give glucaon as ordered. Keep student in recovery position on side.
- If on insulin pump, either place it in ‘suspend’ mode, or disconnect it at the pigtail or clip. If pump is removed, send it with EMS to the hospital.
- Notify school RN & parent/guardian.
- Wait 15 minutes; if no response, repeat glucagon.
- If responsive, offer juice. Wait 15 minutes and give carbohydrate snack.

**15 GM FAST-ACTING CARBOHYDRATE:**
- ½ c. juice
- 3-4 glucose tablets
- Tube of glucose gel
- ½ c. regular (not diet) soda
- 6-7 small sugar candies (to chew)
- 1 c. skim or low-fat milk

**EXERCISE AND SPORTS:**
- Ensure that student has quick access to water for hydration, fast-acting carbohydrates, snacks, and monitoring equipment.
- Student should not exercise if blood glucose level is below 70 mg/dl or if they have moderate to large ketones.

***Never send a child with suspected low blood glucose anywhere alone.***

Montana Kids with Diabetes School Collaborative, 3/23/2015. Adapted with permission from Alaska Division of Public Health and the American Diabetes Association, Alaska Area