

HYPOGLYCAEMIA

LOW

Blood Glucose Level < 4.0mmol/L

**DO NOT LEAVE CHILD ALONE
DO NOT DELAY TREATMENT**

Signs and symptoms

Note: Symptoms may not always be obvious.
Pale, headache, shaky, sweaty, dizzy, drowsy, changes in behavior.

Child conscious
(Able to eat hypo food)

**Child unconscious/
drowsy**
(Risk of choking/unable to swallow)

Step 1: Give fast acting carb
(As supplied or listed on management plan)

First Aid DRSABC
Stay with unconscious child

Step 2: Recheck BGL after 10-15 mins
If BGL < 4.0 repeat Step 1
If BGL > 4.0 go to Step 3

**CALL AN
AMBULANCE
DIAL 000**

Step 3: Sustaining carb
If starting BGL was:
Between 2.0 - 4.0 no follow-up carb required.
< 2.0 give sustaining carb as supplied.

Contact parent/guardian
When safe to do so

PARENT / GUARDIAN NAME _____

CONTACT No _____

SCHOOL SETTING

Insulin pump

Use in conjunction with management plan

DIABETES ACTION PLAN 2017



Photo of child

CHILD'S NAME

SCHOOL

INSULIN

The insulin pump continually delivers insulin.

The pump will deliver insulin based on carb and BGL entries. All BGLs must be entered into the pump*

Able to button push: independently
 with supervision
 with assistance

ROUTINE BGL CHECKING TIMES

- Anytime, anywhere in the school
- Prior to lunch and other times as per management plan
- Anytime hypo is suspected
- Prior to activity
- Prior to exams or tests (e.g. NAPLAN)

PHYSICAL ACTIVITY

- 1 serve sustaining carb before every 30 mins of planned activity (**no bolus**)
- Vigorous activity should **not** be undertaken if BGL > 15.0 and blood ketones are > 0.6

*DO NOT ENTER BGL into pump within 1 hour of completing activity (see management plan)

HYPERGLYCAEMIA

HIGH

Blood Glucose Level > 15.0mmol/L

HIGH BGLS ARE NOT UNCOMMON

Signs and Symptoms

Note: Symptoms may not always be obvious.
Some could be: increased thirst, increased urine production, poor concentration, irritability, lethargy.

**IF UNWELL (EG VOMITING) CONTACT
PARENTS TO COLLECT CHILD**

Check Blood Ketones

Blood ketones > 0.6 requires immediate treatment

Blood Ketones
< 0.6

Blood Ketones
> 0.6

Correction bolus
Recheck BGL in 2 hrs

Potential line failure.
Contact parent/guardian for further advice.

**BGL < 15
indicates
line is
working**

**BGL
> 15**

May need injected insulin and line change.

DATE _____

HOSPITAL _____

TREATING DNE _____

CONTACT No _____

