

**BELLEVUE SCHOOL DISTRICT
TYPE 1 DIABETES WITH PUMP INDIVIDUAL HEALTH PLAN**

2019-2020

Name:	DOB:	Date:	
School:		Grade/Teacher:	
HEALTH CONCERN: TYPE 1 DIABETES			

SYMPTOMS OF LOW BLOOD SUGAR:	SYMPTOMS OF HIGH BLOOD SUGAR:
<ul style="list-style-type: none"> • Shakiness • Sweating • Other: _____ 	<ul style="list-style-type: none"> • Confused • Drowsy • Headache • Lethargic • Flushed • Confused • Other: _____ • Headache • Stomach ache

TARGET BLOOD GLUCOSE BEFORE MEALS (FYI): _____ to _____
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Blood Glucose Correction Factor:
1 Unit per _____ mg/dL (correction factor) if over _____ (target blood sugar)

Blood Glucose Monitoring:	Other times monitoring may occur:
<ul style="list-style-type: none"> ✓ Symptoms of high/low blood glucose. ✓ Before snack ✓ Before lunch 	<ul style="list-style-type: none"> ✓ After lunch ✓ After recess ✓ Before riding the bus or walking home ✓ Before educational testing/assessments

Insulin to Carbohydrate Ratio* (Insulin to be administered via _____ pump)
Breakfast: 1 unit per _____ grams of carbs
AM Snack: 1 unit per _____ grams of carbs
Lunch: 1 unit per _____ grams of carbs

*Licensed medical personnel are authorized to adjust insulin dose by +/- 20% after consultation with parent/caregiver.

FOR HYPOGLYCEMIA WITH PUMP: CAN BE LIFE THREATING - Blood glucose under 80mg/dL.
<ul style="list-style-type: none"> • Give 10-15 grams fast-acting carbohydrate such as: _____ • Recheck blood sugar in 15 minutes. • Repeat carbohydrate treatment if blood glucose is still under 80mg/dL, if student remains symptomatic and it is not meal time. • Once blood glucose is over 80mg/dL, <i>may</i> follow with a small snack such as: _____ if greater than 1 hour before a meal. <p>*If student is unconscious or unresponsive, CALL 911 immediately and disconnect insulin pump. Nurse or trained PDA may administer Glucagon per orders.</p> <p>*Do not give insulin to cover carbohydrates given to treat low blood glucose.</p>

FOR HYPERGLYCEMIA WITH PUMP: Blood glucose over 300mg/dL.
<ul style="list-style-type: none"> • Test urine ketones immediately. Contact parent if moderate or large ketones are present. • Check pump & tubing for leaks, air bubbles, kinks, and make sure it is connected/inserted properly. • Give correction bolus with insulin pump if indicated and RETEST in 1 hour. • Encourage water intake. • Encourage rest.

BEFORE P.E.: _____ (Day) _____ (time)

- If blood glucose is _____ **or higher:** No snack needed.
- If blood glucose is **between** _____ **to** _____ he needs to eat _____ **gm carbs** before P.E. (cheese crackers)
- If blood glucose is **under** _____ he needs to eat _____ **gm carbs** before P.E. (cheese crackers & juice)

RECESS CONSIDERATIONS (If recess is after lunch):

DESIGNATED PDA? No. Yes: _____

DISASTER PLAN AND ORDERS

- Parent is responsible for providing and maintaining “disaster kit”.
- To prevent low blood sugars: set a temporary basal rate of 90% (10% reduction) for 24 hours (or until relief/food is available).
- Continue to deliver insulin for food intake per the pump’s recommendations.

DISASTER GLUCAGON ADMINISTRATION: In the case of a disaster or true emergency where the parent, nurse, PDA, or other licensed, knowledgeable individual is unavailable, other school personnel will administer glucagon to student (see Appendix ‘O’ guidelines for hypoglycemia in OSPI’s Guidelines For Care of Student with Diabetes) in the event of severe hypoglycemia. Staff to follow guidelines on how to prepare and inject glucagon. If glucagon is administered, check blood glucose and recheck every 10 minutes until blood glucose is > 80 mg/dL.

Licensed Health Care Provider’s signature: <small>Signature authorizes medication for length of school year</small>	Date:	Phone:	
		Fax:	
Parent/Guardian signature:	Date:	Phone:	

INDIVIDUAL CONSIDERATIONS:

Classroom:

- Teacher to inform substitute teachers of the student’s Individual Health Plan
- Student will be escorted (by buddy or adult) to health room if high/low blood glucose concerns/symptoms. May also request RN/PDA to location of student.
- Teacher to notify parent/guardian, nurse, PDA (if available), & office staff regarding change in class schedule, activities, field trips, and parties, etc to allow time to adjust insulin dosages or food appropriately.
- Allow for water and restroom breaks.

Transportation:

- Bus-Transportation will be informed of the student’s Individual Health Plan
- Student should carry own supplies on bus

Field Trip Procedures: Medication/supplies, IHP, and snacks will accompany student (and remain with student) during any off campus activity.

Recess: Recess staff will be informed of the student’s Individual Health Plan

Parent/Student:

- To provide additional supplies to the health room
- To provide additional snacks to health room and classroom.
- Parent to provide number of carbohydrates contained in snack and lunch.
- If student attends extended day/childcare, clubs before & after school, evening and summer activities, parent will notify the program director of their child’s medication and health care needs.

Other:

- RN will notify teachers, specialists, and other staff of student’s IHP
- If student tests in health room, staff to observe insulin dose and record on flow sheet.
- Student tests her blood glucose independently in the health room with verification from the school nurse, parent, or trained/designated unlicensed assistive personnel, or PDA. Student is able to independently administer insulin through the pump with verification by the school nurse or parent. If nurse is not available, student will have access to a phone where she can contact the parent to validate her blood glucose level and calculate the insulin dose. The parent will not have to be physically at the school to assist, but via phone.
- Student may check blood glucose in the classroom, health room, and on campus.
- If appropriate, please refer to student’s confidential or green folder for 504 eligibility information.

School Nurse:		Email:	@bsd405.org	Phone:	425-456-
				Fax:	425-456-