

TYPE 1 DIABETES Emergency Response Plan

This first aid protocol is part of the student's medical orders (Diabetes Management Plan)

Student Name: _____ Date of Birth: _____ Class: _____
D M Y

EMERGENCY CONTACTS

Parent A: _____ PH: _____

Parent B: _____ PH: _____

Diabetes Educator: _____ PH: _____

I hereby authorise medications and treatments specified on this plan to be administered according to the plan as consented by the parent/ guardian/patient

Doctor: _____ Signature/s: _____ Date: _____
D M Y

GLUCOSE LEVELS



LOW: Under 4.0 mmol/l = HYPO

Needs immediate action! Must be attended by adult until recovery.

**ACT
NOW**

Symptoms - drowsy, sweaty, shaky, irritable, headache, poor concentration. Symptoms may not be obvious.

1. Give rapid acting carbohydrate _____ (must always be accessible).
2. If CGM reads above 4.0 mmol/l and student has symptoms, check finger-prick glucose level (student's hand must be washed) and treat if glucose level under 4.0 mmol/l.
3. Check glucose level 15 minutes after treatment.
4. If glucose level is still under 4.0 mmol/l repeat treatment.
5. Stay with student and call for additional assistance if concerned.

SEVERE LOW GLUCOSE – UNRESPONSIVE, FITTING (or cannot accept glucose by mouth).

1. Place student on their side.
2. Call for help and request trained staff member attend immediately.
3. Administer glucagon where prescribed.
4. Call ambulance (Dial 000 and state 'Diabetes Emergency').
5. Notify parents – if unable to contact parents, notify diabetes team.

URGENT



HIGH: Over 8.0 mmol/l = HYPER

ALERT

If the student appears WELL

1. The student should continue classroom activities.
2. Refer to student's Diabetes Management Plan for possible causes, further actions and management.

If the student appears UNWELL, is FEELING SICK or is VOMITING THIS MAY BE LIFE THREATENING!

1. Escalate IMMEDIATELY to trained staff members to take action in accordance with Diabetes Management Plan.
2. Notify parents.
3. If unable to contact the parents, call an ambulance (Dial 000 and state 'Diabetes Emergency').
4. Never assume the cause of vomiting until assessed by a parent or medically qualified person.



4.0-8 mmol/l = TARGET RANGE

Perfect for optimal school performance, concentration, learning and memory.

GOAL

This plan does not expire but review is recommended by _____
D M Y