# High Blood Glucose (Hyperglycemia) emergency Care Plan: For students who use INSULIN INJECTIONS

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| **Student Name:**  Click or tap here to enter text. | **Date of Birth:Click or tap here to enter text.** |

## Contact information

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| **Address:**Click or tap here to enter text. | **State:**Click or tap here to enter text. | **Zip Code:**Click or tap here to enter text. |
| **Parent/Guardian:**  Click or tap here to enter text. | **Phone:**  **Click or tap here to enter text.** | **Cell:**  Click or tap here to enter text. |
| **Emergency Contact:**  Click or tap here to enter text. | **Phone:**  Click or tap here to enter text. | **Cell:**  Click or tap here to enter text. |
| **Healthcare Provider:**  Click or tap here to enter text. | **Office Phone:**  Click or tap here to enter text. | **Fax:**  Click or tap here to enter text. |

***An adult must accompany/stay with any student suspected of having high blood glucose!***

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| IF YOU SEE THIS… | DO THIS\_ |
| **Signs of High Blood Glucose:**   * Excessive thirst * Frequent urination * Nausea, vomiting * Hunger * Other:Click or tap here to enter text. | **Immediate action**:   1. Accompany student to the health room. 2. Check blood glucose and ketones. 3. Encourage student to drink plenty of water or other sugar-free liquids (8 oz/hour if less than 5 years old or 8—16 oz/hour for students 6 years or older). 4. Assess for symptoms of nausea, vomiting, severe abdominal pain, heavy/labored breathing, change in mental status. Check ketones if these symptoms are noted. 5. **If moderate to large ketones with symptoms, call 911 and follow instructions on the IHP.** 6. No exercise if having nausea or abdominal pain. 7. Rest as needed. |

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| IF YOU SEE THIS… | DO THIS\_ |
| **High Blood Glucose:**   * Unconscious * Unresponsive * Difficulty swallowing * Seizure activity | 1. **Treat High Blood Glucose Levels**— **only give additional insulin if it has been > 3 hours since last insulin injection.** 2. **Blood Glucose >\_\_\_\_\_\_** 3. Administer the correction factor: 4. \_\_\_\_\_\_unit per \_\_\_\_\_\_mg/dl > \_\_\_\_\_\_ via injection. **Only if > 3 hours since last dose**. 5. Recheck BG every 2 hours unless provider orders state otherwise. 6. If BG >\_\_\_\_\_ two times in \_\_\_\_\_ minutes/hours, check ketones (urine or blood). 7. For BG > \_\_\_\_\_\_\_ and not responding to treatment, notify school nurse and contact parent/guardian to pick up student at school. 8. Student will not be transported on the bus with BG >\_\_\_\_\_\_\_ 30 minutes prior to departure. |

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| IF YOU SEE THIS… | DO THIS\_ |
| Urine Ketone Levels | If blood glucose is greater than 300 mg/dl two times, check urine ketones. If ill or vomiting, check ketones when BG >300.  **Ketones = Trace:** No intervention needed.  **Ketones = Trace—Small**:   1. Have student drink 16-24 oz. water over 2 hours. 2. Recheck blood glucose. 3. Recheck urine ketones. 4. If urine ketones **positive**, call parent/guardian.   **Ketones = Moderate—Large**:   1. Have student drink 16-24 oz. water. 2. Call parent immediately. Extra insulin may be needed. Parent can direct this, per IHP or Section 504 Plan. |

**Health Plan and medication must accompany student on any field trip or school activity.**

**\*\*Keep plan readily available for substitutes! \*\***   
**Attention Bus Drivers: To activate emergency procedures-pull over, call dispatch to call 911**