

HYPOGLYCAEMIA

LOW

Blood Glucose Level <4.0mmol/L

Signs and Symptoms

Pale, headache, shaky, sweaty, dizzy, drowsy, changes in behaviour. *Symptoms may not always be obvious*

DO NOT leave child UNATTENDED
DO NOT delay TREATMENT

Child Conscious
(Able to eat hypo food)

Child Unconscious/drowsy
(Risk of choking/unable to swallow)

Give fast acting carb
(e.g. 5 jelly beans, 125ml lemonade, 2 jelly snakes)

First Aid DRABC
Stay with unconscious child

Give sustaining Carb
(e.g. Muesli bar, 1 cup milk, 6 dry biscuits, apple)

Call an Ambulance
Dial 000

Recheck BGL after 15 mins
If BGL <4.0mmol/L repeat fast acting carb

Contact parents
when safe to do so

PARENT NAME: _____
CONTACT No: _____

2015

Diabetes Action Plan

Twice daily injections

[to be used in conjunction with management plan]

Child's Name: _____

School: _____

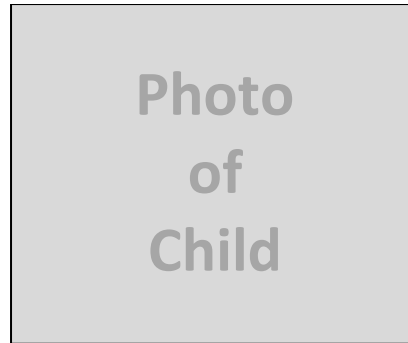


Photo
of
Child

Insulin is taken in the morning, before school.
Please make sure ALL carbohydrate food is eaten at snack and lunch times

Routine BGL checking times

- Anytime, anywhere in the school
- Prior to lunch
- 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 activity
- 1 serve fast acting carb before every 30 mins of swimming
- Vigorous activity should not be undertaken if BGL >15 and blood ketones are >1.0

HYPERGLYCAEMIA

HIGH

Blood Glucose Level >15mmol/L

HIGH BGs are not uncommon

Signs and Symptoms

There may be no signs and symptoms.
Some could be: increased thirst, increased urine production, poor concentration, irritability, lethargy

Child well
Check blood ketones.
If >1.0 call parent
(extra insulin may be needed)

Child unwell
(e.g. vomiting) +/-
Check blood ketones.
If >1.0

Encourage oral fluids, return to class
(1-2 glasses water per hour; extra toilet visits may be required)

Contact parents
to collect child ASAP

DATE: _____
HOSPITAL: _____
TREATING DNE: _____
CONTACT No: _____