

HYPOGLYCAEMIA (Hypo)

LOW

Blood Glucose Level (BGL) < 4.0 mmol/L

**DO NOT LEAVE STUDENT ALONE
DO NOT DELAY TREATMENT**

Signs and symptoms

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

Student conscious
(Able to eat hypo food)

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

**Step 1: Give fast acting
carbohydrate**
(as supplied or listed on
management plan)

First Aid DRSABCD
Stay with unconscious
student

**Step 2: Recheck BGL
after 15 mins**
If BGL < 4.0 repeat Step 1
If BGL ≥ 4.0 go to Step 3

**CALL AN
AMBULANCE
DIAL 111**

**Step 3: Give sustaining
carbohydrate**
(as supplied or listed on
management plan)

Contact parent/carer
When safe to do so

PARENT/CARER NAME _____

CONTACT No _____

OTHER CONTACT NAME & No _____

SCHOOL SETTING

Twice daily injections

DIABETES ACTION PLAN 2019



Click to place
photograph
here

STUDENT'S NAME

SCHOOL

Use this plan in conjunction with Diabetes Management Plan

- Continuous Glucose Monitoring (CGM) Appendix
- Flash Glucose Monitoring Appendix

INSULIN

Insulin will be given at home 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
- Before lunch
- Anytime hypo is suspected
- Before activity
- Before exams or tests

PHYSICAL ACTIVITY

- 1 serve sustaining carbohydrate food before every 30 mins of planned activity
- Vigorous activity should **not** be undertaken if BGL ≥ 15.0 and blood ketones are ≥ 1.0

*For further information see Management plan

HYPERGLYCAEMIA (Hyper)

HIGH

Blood Glucose Level (BGL) ≥ 15.0 mmol/L

HIGH BGLS ARE COMMON

Signs and Symptoms

Note: Symptoms may not always be obvious.
Some could be: increased thirst, extra toilet visits, poor concentration, irritability, tiredness

Student well
Re-check BGL in 2 hours

Student unwell
E.g. vomiting
Check blood ketones
(if able) If ≥ 1.0 mmol/L

**Encourage oral fluids,
return to class**
1–2 glasses water per hour;
extra toilet visits may be
required.

**CONTACT PARENT/
CARER
TO COLLECT
STUDENT ASAP**

**In 2 hours, if BGL still
≥ 15.0
call parent/carer for
advice**

DATE _____

TREATING MEDICAL TEAM _____

CONTACT No _____

This plan has been adapted from the original work of Diabetes Victoria, Monash Children's Hospital and the Royal Children's Hospital, Melbourne.