

HYPOGLYCAEMIA (Hypo)

LOW

Blood Glucose Level (BGL) < 4.0 mmol/L

**DO NOT LEAVE CHILD ALONE
DO NOT DELAY TREATMENT**

Signs and symptoms

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

Child conscious

(Able to eat hypo food)

Child unconscious/ drowsy

(Risk of choking/unable to swallow)

Step 1: Give fast acting carbohydrate

(as supplied or listed on management plan)

First Aid DR S ABCD

Stay with unconscious child

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 _____

EARLY CHILDHOOD EDUCATION AND CARE SETTING

Twice daily injections

DIABETES ACTION PLAN 2019



CHILD'S NAME

CENTRE

Click to place
photograph
here

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 arriving at the centre.

Please make sure ALL carbohydrate food is eaten at snack and lunch times

ROUTINE BGL CHECKING TIMES

- Anytime, anywhere in the centre
- Before lunch
- Anytime hypo is suspected
- Before planned activity

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
- Usually playtime doesn't require additional action, but check with parent/carer about this

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

Child well

Re-check BGL in 2 hours

Child unwell

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

Encourage oral fluids, return to activity

1-2 glasses water per hour; extra toilet visits may be required

**CONTACT PARENT/
CARER
TO COLLECT
CHILD 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.