

## DIABETES AND SCHOOL INFORMATION

You have a child in your class who has type 1 (insulin-dependent) diabetes. The following material is intended to help you understand what that means and how you might help in an emergency situation. For those of you who have had a child with diabetes in your class before, please review this information.

Children with diabetes should always wear a medical ID bracelet/necklace that clearly identifies them as having diabetes. Children with diabetes require 2-3 insulin injections and 4 or more blood sugar checks daily. They need to eat 3 meals and 3 snacks a day (specific amounts at specific times). They should carry their morning snack (generally eaten about 10:30 AM) and lunch with them to school each day, or have money to buy lunch. They need another snack at the end of the school day, or as soon as they get home.

There are two kinds of *EMERGENCY SITUATIONS* for a child with diabetes:

1. **Any situation which would leave them without adequate food or insulin to maintain their balance for the day.** This could be something as simple as forgetting their lunch. Each child should have an "Emergency Food Kit" with instructions in a designated place (classroom, office, medical room).
2. **Low blood sugar / insulin reaction / hypoglycemia:** Different names for the same thing. Low blood sugar can be a result of too much insulin, a delayed or missed meal, or more exercise/activity than usual without a corresponding increase in food. This situation can develop within minutes of a child appearing healthy and normal.

Most children older than 6 or 7 years of age can recognize their own low blood sugar symptoms and treat the situation themselves (with dextrose tablets, juice or candy). It is possible however, that some children will not recognize the symptoms, and you will need to treat them.

### SYMPTOMS OF LOW BLOOD SUGAR

- cold, clammy, or sweaty skin
- pallor (paleness)
- shakiness, or lack of co-ordination
- irritability, hostility, poor behaviour, tearfulness
- staggering gait (appearing drunk)
- fatigue
- confusion
- extreme hyperactivity
- **eventually unconscious and possible seizure**, if not treated early

**TREATMENT OF LOW BLOOD SUGAR:** one of the following, until feeling better:  
(It is imperative that this is done at the first sign of low blood sugar!)

- 4 ounces (125 mL) fruit juice (1 Junior juicebox or  $\frac{1}{2}$  regular juicebox)
- 4 ounces (125 mL) regular pop (not diet!)
- 2 teaspoons sugar
- 2 hard candies
- 3-4 dextrose tablets
- any other form of fast-acting sugar (honey, jelly beans)

**CAUTION: NEVER** give food or drink if child is unconscious!

**Never leave a child with diabetes alone in a low blood sugar situation.** If for some reason the student does not have some form of treatment on them (in fannypack, backpack), send someone else to get them something. **DO NOT LEAVE THEM ALONE!**

**If the child is UNCONSCIOUS:** call for an ambulance immediately. Be sure to tell them the situation, and that the student has diabetes. Immediately following that, call the parents or the emergency contact person.

**If the child is having a SEIZURE:** keep the child on his/her side to prevent choking. Call for an ambulance immediately, then call parents. Tell the ambulance that the child has diabetes.

**ILLNESS:** if the child vomits while at school, phone parents immediately. If you are unable to reach them or the emergency contact person, take the child to the nearest hospital. Be sure to tell them they have diabetes. (If they cannot keep anything in their stomach, they will need to be put on an IV to keep their blood sugar from falling).

**HIGH BLOOD SUGAR:** is usually NOT an emergency situation. It can be the result of too much food, illness, stress, less than the usual amount of exercise, or not enough insulin. It will result in a sluggish, tired feeling, extra thirst, and more frequent need to urinate. ***They cannot control this!*** A high blood sugar situation should not go on for more than 2-3 days. The family should phone the child's doctor to get help with adjusting the insulin.

Please discuss this with the parents if you have any questions.

More information is available from the [Kids with Diabetes in Your Care](#) page on the Canadian Diabetes Association website: [www.diabetes.ca/Section\\_About/kidswithdiabetes.asp](http://www.diabetes.ca/Section_About/kidswithdiabetes.asp).