

# EMERGENCY HEALTH PLAN FOR STUDENT WITH DIABETES

Biloxi Public Schools

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMERGENCY PHONE NUMBER (home) \_\_\_\_\_

EMERGENCY PHONE NUMBER (work) \_\_\_\_\_ CELL PHONE NUMBER \_\_\_\_\_

PRIMARY HEALTH PROVIDER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

HOSPITAL \_\_\_\_\_ CERTIFIED DIABETIC EDUCATOR \_\_\_\_\_

## 1. GLUCOSE MONITORING

LOCATION OF MONITOR \_\_\_\_\_

USUAL TIMES TO CHECK BLOOD SUGAR \_\_\_\_\_

TARGET RANGE FOR BLOOD SUGAR \_\_\_\_\_ mg/dL to \_\_\_\_\_ mg/dL

CAN CHILD DO OWN BLOOD SUGAR CHECKS \_\_\_ YES \_\_\_ NO, PERSON TRAINED TO ASSIST \_\_\_\_\_

TYPES OF INSULIN TAKEN \_\_\_\_\_

USUAL TIMES OF INSULIN INJECTIONS \_\_\_\_\_

## 2. MEALS AND SNACKS

MEAL TIMES \_\_\_\_\_

SNACK TIMES \_\_\_\_\_

FOODS TO AVOID, IF ANY \_\_\_\_\_ PREFERRED SNACKS \_\_\_\_\_

## 3. EXERCISE AND SPORTS

TIME AND DAY OF PHYSICAL EDUCATION \_\_\_\_\_

TIME AND DAY OF RECESS \_\_\_\_\_

## 4. HYPOGLYCEMIA (LOW BLOOD SUGAR)

USUAL SYMPTOMS OF HYPOGLYCEMIA \_\_\_\_\_

TREATMENT OF HYPOGLYCEMIA \_\_\_\_\_

**GLUCAGON SHOULD ONLY BE GIVEN IF CHILD IS UNCONSCIOUS OR HAVING A SEIZURE.  
IF GLUCAGON IS GIVEN BY THE NURSE, 911 AND THE PARENTS SHOULD BE CALLED IMMEDIATELY.**

## 5. HYPERGLYCEMIA (HIGH BLOOD SUGAR)

USUAL SYMPTOMS OF HYPERGLYCEMIA \_\_\_\_\_

TREATMENT OF HYPERGLYCEMIA \_\_\_\_\_

**BY SIGNING BELOW, I AGREE WITH THIS PLAN AND AUTHORIZE THE RELEASE OF INFORMATION BETWEEN THE DOCTOR AND THE SCHOOL NURSE WHENEVER IT IS NECESSARY.**

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

DOCTOR SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

SCHOOL NURSE SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_