

SPECIAL EDUCATION DISTRICT OF LAKE COUNTY

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**Hypoglycemia Emergency Care Plan
 (For Low Blood Glucose)**

Student's Name: _____
 Grade/Teacher: _____
 Date of Plan: _____

| Emergency Contact Information | |
|--------------------------------------|-------------------------|
| Mother/Guardian: | _____ |
| Email address: | _____ Home phone: _____ |
| Work phone: | _____ Cell: _____ |
| Father/Guardian: | _____ |
| Email address: | _____ Home phone: _____ |
| Work phone: | _____ Cell: _____ |
| Health Care Provider: | _____ |
| Phone number: | _____ |
| School Nurse: | _____ |
| Contact number(s): | _____ |
| Trained Diabetes Personnel: | _____ |
| Contact number(s): | _____ |

The student should never be left alone, or sent anywhere alone, or with another student, when experiencing hypoglycemia.

| Causes of Hypoglycemia | Onset of Hypoglycemia |
|--|--|
| <ul style="list-style-type: none"> • Too much insulin • Missing or delaying meals or snacks • Not eating enough food (carbohydrates) • Getting extra, intense, or unplanned physical activity • Being ill, particularly with gastrointestinal illness | <ul style="list-style-type: none"> • Sudden – symptoms may progress rapidly |

Hypoglycemia Symptoms

Circle student's usual symptoms.

| Mild to Moderate | Severe |
|---|---|
| <ul style="list-style-type: none"> • Shaky or jittery • Sweaty • Hungry • Pale • Headache • Blurry vision • Sleepy • Dizzy • Confused • Disoriented | <ul style="list-style-type: none"> • Uncoordinated • Irritable or nervous • Argumentative • Combative • Changed personality • Changed behavior • Inability to concentrate • Weak • Lethargic • Other: _____ |
| <ul style="list-style-type: none"> • Inability to eat or drink • Unconscious • Unresponsive • Seizure activity or convulsions (jerking movements) | |

| Actions for Treating Hypoglycemia | |
|--|--|
| <p>Notify School Nurse or Trained Diabetes Personnel as soon as you observe symptoms. If possible, check blood glucose (sugar) at fingertip. Treat for hypoglycemia if blood glucose level is less than _____ mg/dL.</p> <p>WHEN IN DOUBT, ALWAYS TREAT FOR HYPOGLYCEMIA AS SPECIFIED BELOW:</p> | |
| Treatment for Mild to Moderate Hypoglycemia | Treatment for Severe Hypoglycemia |
| <ul style="list-style-type: none"> • Provide quick-acting glucose (sugar) product equal to _____ grams of carbohydrates. Examples of 15 grams of carbohydrates include: <ul style="list-style-type: none"> ◦ 3 or 4 glucose tablets ◦ 1 tube of glucose gel ◦ 4 ounces of fruit juice (not low-calorie or reduced sugar) ◦ 6 ounces of soda (1/2 can) (not low-calorie or reduced sugar) • Wait 10 to 15 minutes. • Recheck blood glucose level. • Repeat quick-acting glucose product if blood glucose level is less than _____ mg/dL. • Contact the student's parents/guardian. | <ul style="list-style-type: none"> • Position the student on his or her side. • Do not attempt to give anything by mouth. • Administer glucagon: _____ mg at _____ site. • While treating, have another person call 911 (Emergency Medical Services). • Contact the student's parents/guardian. • Stay with the student until Emergency Medical Services arrive. • Notify student's health care provider. |