

5-11 y.o.	70-180 mg/dl
12-18 y.o.	70-150 mg/dl
>18 y.o.	70-130 mg/dl

Notification to Parents:

Low < target range and High > 300 mg/dl (if on pump then > 240mg/dl or individualized on orders)

Note: The frequency of routine blood glucose monitoring should take into consideration the student's schedule and participation in classroom learning/activities. Too frequent routine glucose monitoring may impact learning and school participation. On average, a student would have routine glucose monitoring one to three times/day at school.

3. Hypoglycemia

Treatment for Hypoglycemia

- Student should be treated in the classroom if symptomatic or if Blood Glucose (BG) is below *Target Range*. If the student needs to go to the Health Office – he/she should be accompanied.
- Check blood glucose - if blood glucose meters not available, treat symptoms.
- If Blood glucose is below *Target Range* and/or student is symptomatic treat with ~15 gram fast-acting carbohydrate. **Retest** in 10-15 minutes. Repeat 15gm fast acting carbohydrate until within *Target Range*. Follow with snack or lunch (see Note)
- **Mild symptoms:** Check blood glucose, treat with juice, glucose tabs, etc. until within *Target Range*. Follow with snack/lunch.
- **Moderate symptoms:** if unable to drink juice: administer glucose gel. Re-treat until within *Target Range*. Follow with snack or lunch (see Note)
- **Severe symptoms** which may include seizures, unconscious, unable or unwilling to take juice or gel:
Administer Glucagon: if trained staff is available and call **911**. Disconnect/suspend pump.
 - < 16 years old = 0.5 cc and > 16 years = 1.0 cc IM unless otherwise indicated by provider

Note: Do not give insulin for carbohydrates given to treat low blood glucose. For the student who is on a pump, the School Nurse should discuss with the parent whether the student is given an insulin bolus for snacks following hypoglycemia and note on Individualized Health Plan. At lunchtime, after blood glucose is