

DIABETES MELLITUS, TYPE 1 HEALTH ACTION PLAN

School Year: _____

Student Name		Grade	
Teacher		Grad Year	

Emergency Contact Information:

(Please provide, in order, where to call in an emergency during the school day)

	Name	Number	Cell/Work/Home	Relationship
1				
2				
3				
4				

School Nurses: 920-892-5100 Anne Nelson, RN (Grades 4K - 5)
 Jeanna Rortvedt, RN (Grades 6 - 12)

Physician: _____

DIAGNOSIS BACKGROUND & EQUIPMENT / MEDICATION AT SCHOOL:

Diagnosis Background	
Insulin Device Brand (Pen / Pump)	
Continuous Glucose Monitor (CGM)	
Emergency Medication Name	
Location of supplies at school: (Classroom, health room, locker, backpack)	
Other Important Information	

Target BG: 80-150 mg/dL

For Exercise, Sports and Field trips:

- ⇒ Notify school nurse when field trip is off school grounds.
- ⇒ Quick access is needed to all diabetic supplies including blood glucose meter and testing supplies, insulin, snacks, drinks, health plan, dosing guidelines, CGM & Glucagon or Baqsimi.
- ⇒ Staff trained in diabetic care and phone access is also required.

Student Name: _____

EMERGENCY ACTION PLAN Low Blood Glucose

If student is unable to eat or drink, is having a seizure, and/or is unconscious...

- **Obtain BAQSIMI Glucagon Kit**
- **Call the office to call a Medical Emergency** (inform office 911 will be called)
- **Call 911** - Alert dispatcher individual has Type 1 diabetes and report level of consciousness
- **Give BAQSIMI nasal powder (*See Instructions Below)**
- Turn student on side and keep airway clear (student may vomit)
- Give Baqsimi container to EMTs and report time of administration
- Notify parents
- Complete a MERT report
- Notify the nurse school and building principal, if not already done

***How to Administer BAQSIMI Nasal Powder:**

- Pull red stripe to remove shrink wrap
- DO NOT press plunger until ready to give
- Hold device between fingers and thumb, with thumb on the plunger (green line)
- Insert tip into 1 nostril until fingers touch outside of nose
- **Push plunger firmly all the way in until green line disappears and you hear 2 clicks**
- If student does not respond after 15 minutes, another dose may be given if available
- Assure 911 has been called

Note: A Medication Authorization Form needs to be filled out and signed by a doctor annually

CAUTION:

- Low blood glucose may cause seizures
- To prevent choking, turn onto side as when an unconscious person awakens they may vomit
- If Baqsimi is given, the student will need to go to the nearest emergency room for evaluation

This Individual Health Action Plan will be used in an emergency.

This information may be shared with the classroom teachers, administrators, aides, bus drivers and other appropriate personnel with a need to know.

Memo of understanding:

- It is understood that a Health Action Plan will be completed and signed annually
- It is understood that emergency medication will be provided at school
- It is understood that the school nurse will be notified of any changes in the health plan

Parent / Guardian Signature: _____ Date: _____