

### DAILY SCHEDULE OF ROUTINE DIABETES-RELATED TASKS

TIME	Meal/snack	BG check	Insulin	Comments

**LEGEND:** A – assistance required; S - with supervision; I – independent.      **BG=Blood glucose/sugar**

**EMERGENCY KIT LOCATION(S):** \_\_\_\_\_

**MILD HYPOGLYCEMIA (Low blood sugar): Check, Treat, Repeat**

If BG is under 4 mmol/L: Treat, then repeat BG check after 10-15 minutes

Treat again if still under 4 mmol/L

Treat and repeat this cycle until the BG is 4 or more

**Usual symptoms of low blood sugar for student are**

- |                                   |  |                                   |
|-----------------------------------|--|-----------------------------------|
| <input type="checkbox"/> shaky    | <input type="checkbox"/> irritable/grouchy | <input type="checkbox"/> dizzy    |
| <input type="checkbox"/> sweating | <input type="checkbox"/> blurred vision    | <input type="checkbox"/> headache |
| <input type="checkbox"/> hungry   | <input type="checkbox"/> weak/fatigue      | <input type="checkbox"/> pale     |
| <input type="checkbox"/> confused | <input type="checkbox"/> other _____       |                                   |

**Treat with:**

- \_\_\_\_ glucose tablets
- \_\_\_\_ cup juice/regular pop
- \_\_\_\_ Skittles
- Other \_\_\_\_\_

**HYPERGLYCEMIA (High blood sugar)**

Call parent/guardian if BG is above \_\_\_\_ mmol/L, or if student is unwell.

For students on a pump, correction and/or ketones check if BG is above \_\_\_\_

- Call parent: \_\_\_\_\_
- See care plan

Specific instructions: \_\_\_\_\_

*This worksheet is intended as a brief overview of DAILY diabetes-related tasks for the student. Consult the complete care plan for more details, particularly for non-standard situations. It is helpful to keep this sheet in the student's class(es), even if the student manages most of their care.*