Hypoglycemia or Low Blood Glucose (Hypo means LOW) for School Staff

Sometimes blood glucose levels are below a student’s target range. This is called hypoglycemia. This can happen when too much insulin has been given; too little food and/or unplanned physical activity which can cause blood glucose levels to drop too low resulting in an emergency situation if not identified and treated quickly. Hypoglycemia is an urgent complication of diabetes, and it can happen suddenly. It is important for school staff to recognize and treat hypoglycemia as early as possible to avoid the variety of consequences that hypoglycemia can cause, ranging from learning difficulties to emergency situations. The following chart explains the causes and symptoms of hypoglycemia and how to identify and treat it. If you see these symptoms, follow the Emergency Care Plan (ECP) and notify the school nurse. This chart and ECP should be shared with all substitutes.

Causes of Hypoglycemia
- Too much insulin
- Missed food
- Delayed food
- Unplanned strenuous physical activity

Symptoms (Onset is often sudden; symptoms may progress rapidly)
- Mild
  - Hunger
  - Shakiness
  - Weakness
  - Pale skin
  - Anxiety
  - Irritability
- Moderate
  - Headache
  - Behavior change
  - Poor coordination
  - Blurred vision
  - Combative behavior
- Severe
  - Loss of consciousness
  - Seizure
  - Inability to swallow

Actions Needed: Notify school nurse (RN). If the school nurse (RN) is not available, the Diabetes-Trained School Personnel (DTP) should be notified. If possible, check blood sugar, per Diabetes Medical Management Plan. When in doubt, always TREAT FOR HYPOGLYCEMIA

- Mild
  - Student may/may not treat self.
  - Provide quick-sugar source, 3-4 glucose tablets, or 4 oz. juice, or 6 oz. regular soda, or 3 teaspoons glucose gel.
  - Wait 10-15 minutes.
  - Recheck blood glucose.
  - Repeat food if symptoms persist or blood glucose is less than child’s target range.
  - Follow with a snack of carbohydrate and protein (e.g. cheese and crackers).

- Moderate
  - Student requires assistance.
  - Give student quick-sugar source per guidelines for MILD hypoglycemia.
  - Wait 10-15 minutes.
  - Recheck blood glucose.
  - Repeat food if symptoms persist or blood glucose is less child’s target range.
  - Follow with a snack of carbohydrate and protein (e.g. cheese and crackers).

- Severe
  - Do not give anything by mouth.
  - Position on side, if possible.
  - Administer glucagon, as prescribed.
  - While treating, have another person follow the district policy for medical emergency care.
  - Contact parents/guardians.
  - Stay with the student until emergency services arrive.

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Hyperglycemia or High Blood Glucose (Hyper means HIGH) for School Staff

Sometimes blood glucose levels are above a student’s target range. This is called hyperglycemia. This can happen when too little insulin has been given, when food intake hasn’t been covered by the needed amount of insulin, when a child gets sick and even during times of high stress, menstruation or injury. It is important to understand hyperglycemia because of its short- and long-term effects on the body. If you see these symptoms in a student you should refer them to the school nurse. If no school nurse is employed, notify the parent/guardian and the administrator. This chart and the student’s Emergency Care Plan (ECP) should be shared with all substitutes.

The following chart explains the causes and symptoms of hyperglycemia and the actions needed to respond.

Causes of Hyperglycemia
- Food intake not covered by insulin
- Too little insulin
- Decreased activity
- Illness/Infection
- Stress
- Injury
- Menstruation

Symptoms (Onset over several hours or days)

Mild
- Thirst
- Frequent urination
- Fatigue/sleepiness
- Increased hunger
- Blurred vision

Moderate
- Mild symptoms, plus:
  - Dry mouth
  - Nausea
  - Stomach cramps
  - Vomiting

Severe
- Mild and moderate symptoms, plus:
  - Labored breathing
  - Weakness
  - Confusion
  - Unconsciousness

Actions Needed
- Allow free use of the bathroom.
- Encourage child to drink water or sugar-free drinks.
- Notify school nurse (RN). If the school nurse (RN) is not available, the Diabetes-Trained School Personnel (DTP) should be notified to check urine ketones. Only the school nurse (RN) can administer insulin per individual student’s Diabetes Medical Management Plan.
- If student is nauseous, vomiting or lethargic, call the parents/guardians or emergency medical services in your area. Stay with the child until such help arrives.

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