504 INFORMATION FOR TYPE 1 DIABETES

Major Life Activity Affected: Eating, Concentrating, Learning, Physical Activity	
Focus	Accommodation
Type 1 Diabetes	• Student should have continuity and provision of diabetic management in the school setting. • All diabetic students should have an individual health protocol (IHP) in place. • The IHP should be primary document in regards to management in the school setting. • Unlicensed staff must be trained by a registered nurse in diabetic care needs. • Medication shall be provided and maintained by parents in the school setting to be available to the student as needed. • Provision of diabetic education shall be provided to staff.
Management	• Student shall be permitted to self-manage if the provider, parents, RN and administration believe the student to be behaviorally and developmentally capable. • Student's requiring assistance or supervision with management should have trained and designated caregivers to assist with testing, insulin administration and highs and lows. • Student should be permitted to test whenever the student feels it is necessary or staff observes symptoms compatible with highs or lows. • Student shall be able to leave class as needed to test. • Student shall have an escort assigned if symptomatic. • Student shall be able to carry, use or wear, as applicable, blood glucose monitoring device or continuous glucose monitor • Student shall have free access to water and restroom and food to treat or prevent lows. • Student shall be permitted extra snacks as needed • Student shall be permitted to consume glucose as needed. • Student shall be permitted to administer insulin as needed. • If for the purposes of glucose management student requires application to continuous glucose monitoring via cell phone, or real time communication with parents, student shall have access to cell phone. • Student shall be provided a secure place to keep supplies as needed, and a private place to test if desired. • Student shall have a minimum of 5 staff emergency glucagon trained in the building at any given time while student is in attendance at school. • All staff shall be advised of symptoms of severe hypoglycemia.

Communication	• The nurse shall communicate the diagnosis, first aid steps and routine procedures to appropriate staff. • The nurse shall delegate necessary procedures with specially trained staff. • The nurse shall be notified immediately of any complications in the school setting • Parents shall be notified of complications in the school setting. • Parents should communicate to the nurse changes in health status or disease management. • Parents shall authorize the nurse to communicate with the specialist or physician. • School Staff shall communicate any notable changes with student to school RN and counselor.
Classroom Work	• If student has highs or lows during a test, he or she will be allowed to take the test at another time without any penalty. • Student shall be given instruction without penalty to help him/her make up any classroom instruction missed due to diabetic care. • Student shall not be penalized for absences required for medical appointments or complications related to diabetes. • Extra time may be permitted for assignments or classroom tasks that were affected by student's high or low blood sugar.
Activity	• Student shall be permitted to participate in all school sponsored activities as managing doctor permits. • Student shall be permitted to participate in all field trips with available trained staff, without requirement of parents to chaperone or attend. • Student shall be allowed modifications for activities that dramatically affect blood sugar, if applicable.

Definitions:

***Individual Health Protocol (IHP)*:** A plan that describes the diabetes care regimen and identifies the health care needs of a student with diabetes. This plan is authored by the district RN with MD orders and parent authorization and compiles all applicable diabetic procedures for the student.

***Emergency Glucagon Procedure*:** An emergency procedure put in place to respond to severe hypoglycemic events that is consistent with current Oregon legislation for injectable emergency medications.

Designated Caregivers: Non-medical school personnel who have been identified by the school nurse, school administrator, and parent who are willing to be trained in basic diabetes knowledge and have received training coordinated by the school nurse in diabetes care, including the performance of blood glucose monitoring, insulin and glucagon administration, recognition and treatment of hypoglycemia and hyperglycemia, and performance of ketone checks, and who will perform these diabetes care tasks in the absence of a school nurse.

Glucagon is a peptide hormone, produced by alpha cells of the pancreas. It works to raise the concentration of glucose in the bloodstream. It is also used as a medication to treat a number of health conditions. Its effect is opposite to that of insulin, which lowers the extracellular glucose

Hypoglycemia is low blood glucose or low blood sugar, occurs when the level of glucose in your blood drops below normal. For many people with diabetes, that means a level of 80 milligrams per deciliter (mg/dL) or less. Symptoms may come on progressively or suddenly and can be evidenced by changes in cognition, sweatiness, clamminess, irritability, drowsiness or headache, for example.

Hyperglycemia or High blood sugar affects people who have diabetes relative to an imbalance in insulin, food, activity or stress/illness. Untreated, hyperglycemia can become severe and lead to serious complications requiring emergency care, such as a diabetic coma. In the long term, persistent hyperglycemia, even if not severe, can lead to complications affecting your eyes, kidneys, nerves and heart. Hyperglycemia doesn't cause symptoms until glucose values are significantly elevated — above 200 milligrams per deciliter (mg/dL), or 11 millimoles per liter (mmol/L). Symptoms of hyperglycemia develop slowly over several days or weeks. The longer blood sugar levels stay high, the more serious the symptoms become. Early signs include frequent urination, increased thirst, blurred vision, fatigue, and headache.

Insulin is a hormone made by the beta cells in the pancreas that allows your body to use sugar (glucose) from carbohydrates in the food that you eat for energy or to store glucose for future use. Insulin helps keeps your blood sugar level from getting too high (hyperglycemia) or too low (hypoglycemia). Type 1 Diabetics no longer produce insulin and must take insulin in order to maintain glucose levels.

References

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