

LOS ANGELES UNIFIED SCHOOL DISTRICT
Office of the Chief Medical Director
District Nursing Services

**DIABETES: TREATMENT OF HYPOGLYCEMIA
(Low Blood Sugar)**

I. GENERAL GUIDELINES

A. PURPOSE

1. To provide a source of quick acting carbohydrate (sugar) to relieve symptoms caused by low blood sugar.
2. To prevent severe reactions which require emergency medical treatment.

B. GENERAL INFORMATION

1. Students taking insulin may require care for hypoglycemic reactions resulting from:
 - a. Not enough food or delayed meal
 - b. Too much exercise
 - c. Too large an insulin dose
 - d. Illness or stress
2. Hypoglycemic reactions most frequently occur:
 - a. Just before meals
 - b. After strenuous exercise
3. Recognizing early symptoms and having access to quick acting carbohydrate (sugar) available are ways to help prevent emergencies.
4. Symptoms of hypoglycemic reactions may include:

Mild:

 - a. Headache
 - b. Hunger – stomachache, nausea
 - c. Sweating – cold, clammy skin
 - d. Trembling – dizziness
 - e. Lethargy – fatigue, drowsiness
 - f. Poor coordination – weakness, slurred speech

Moderate:

 - a. Personality changes – irritability, crying
 - b. Dazed look – glassy eyes
 - c. Pale appearance
 - d. Blurred or double vision
 - e. Inability to concentrate

Severe:

 - a. Extreme restlessness – combativeness
 - b. Seizures
 - c. Unconsciousness
5. Students who are independent can treat themselves, if able, and notify the School Nurse or Designated Trained Personnel.
6. For severe hypoglycemia, administer Glucagon injection if ordered by the student's licensed healthcare provider.

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D. PERSONNEL

1. Licensed Nursing Provider or School Physician
2. School personnel designated by the Site Administrator trained and supervised directly or indirectly by the School Nurse.

E. EQUIPMENT

Provided by Parent (request parent to replenish used supplies as needed)

1. Source of sugar – 15 grams of simple carbohydrates
 - a. Glucose tablets (approximately 3 to 5)
 - b. 4 ounces 100% juice
 - c. 4 ounces regular soda
 - d. Sugar packets (3 teaspoons needed) with water
2. Source of instant glucose (for moderate reaction when child is lethargic)
 - a. 10-15 grams of glucose gel
 - b. Cake writing gel (at least 15 grams)
3. If the next meal is more than 1 hour away, provide a snack with carbohydrates or see Healthcare Provider orders.
 - a. 6 saltine crackers
 - b. 3 graham crackers square
 - c. 1 slice bread
 - d. 8 ounces fat free or 1% milk

II. PROCEDURE FOR TREATMENT OF HYPOGLYCEMIA

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
1. Determine that student has symptoms of hypoglycemic reaction or blood sugar is below 70 or as ordered by the healthcare provider.	When in doubt, treat as hypoglycemic reaction. The immediate effects of low blood glucose can be more detrimental than those of high blood glucose.
2. Give appropriate amount of quick acting sugar (see above).	The symptoms usually improve within 5-10 minutes after the administration of sugar.
3. Recheck blood sugar in 15 minutes. If blood glucose remains below 70 or symptoms persist, repeat source of sugar.	If symptoms persist or blood glucose remains below 70 after the 3 rd testing, call the school nurse and parents.
4. When symptoms have subsided, and blood glucose is 70 and above and meal is more than an hour away, give appropriate snack or follow Healthcare Provider's order.	

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ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
5. If student presents with moderate symptoms but remains conscious, apply glucose gel in side of the mouth (cheeks), if provided. Massage the area.	Massage helps absorption of sugar.
6. If symptoms persists and/or student does not respond to above, initiate appropriate emergency procedures. <ul style="list-style-type: none"> a. CALL PARAMEDICS – 9 1 1 b. If student begins to lose consciousness or is having a seizure, initiate Glucagon Injection Protocol if ordered by students Healthcare Provider c. Position student on side and maintain open airway throughout emergency procedures. 	Notify School Nurse and Parents Do not give anything by mouth to a student who is unconscious or having a seizure. Minimizes the risk of aspiration.
7. Document electronically. If not available use Nursing Protocol Log indicating: <ul style="list-style-type: none"> a. Time of the event b. Signs and symptoms observed c. Blood Glucose test results d. Action taken e. Response of student f. If 911 is activated, complete iStar. 	Site administrator or School Nurse complete iStar. School Nurse to document in Welligent.

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Date



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