

Diabetes Management at School Equipment and Supplies Checklist

It is the responsibility of parents, and student if developmentally appropriate, to provide the following items and replace as needed:

Docum	<u>nentation</u>	
	Diabetes Medical Management Pla	an (signed by parent and provider)
	Medication Administration Author	ization form for insulin and glucagon (signed by parent and provider
	Insulin Dosing – Correction Factor	and Insulin to Carb Ratio
	Carbohydrate Counts for Meals an	d Snacks (provided daily)
Medica	ations_	
	Insulin	
	Glucagon	
Blood	Glucose Testing Supplies	Location:
	Glucometer	
	Extra Batteries for Glucometer	
	Test Strips	
	Lancet Device	
	Lancets	
	Alcohol Wipes	
<u>Insulin</u>	Administration Supplies	Location:
	Insulin Pen (with adequate amoun	t of insulin)
	Needles for Insulin Pen	
	OR	
	Insulin Pump (with adequate amou	unt of insulin)
	Extra Batteries for Pump	
Mild Lo	ow Blood Glucose Treatments	Location:
	Fast-acting source of glucose (gluc	ose tabs and/or juice boxes)
	Snacks containing carbohydrates a	and protein (e.g. cheese/crackers, nuts, beef jerky, etc.)
<u>Severe</u>	e Low Blood Sugar Treatment	Location:
	Glucagon Emergency Kit	
High B	lood Sugar Treatment	Location:
	Urine Ketone Strips	
	Water Bottles	
Lockdo	own Precautions	
		h a fast-acting source of glucose and carbohydrate and protein
	containing snack, labeled with stud	dent's name
	AND/OR	
	Student will self-carry fast-acting s	source of glucose and snack containing carbohydrates and protein