Individualized Emergency Diabetes Bus Care Plan

Student Nar	me:		DOB:
School:		Grade:	Date:
Route:	Teacher:		
	Low B	lood Sugar (Diabetes)
	Student may be hungry, swe	eating, have a hea	ndache, appear fussy or cranky.
EMERG	ENCY PLAN:		
1.	STOP the Bus		
2.	Look in backpack for a source	ce of sugar	
3.	3. Give – juice – regular soda (not diet) – glucose tablets (provided by parent) – or		
	another source of sugar righ	ıt away	
4.	4. Call 911 if student does not respond or is having a seizure		
5.	Report incident to school and	l/or parent	

Parent/Guardian Name: ______Phone No. _____