



SCHOOL EMPLOYEE GUIDE

This guide will help you understand treatment for a child using insulin pump therapy.

Medtronic



SCHOOL EMPLOYEE GUIDE

INTRODUCTION & CHECKING SUGARS

INTRODUCTION

My name is _____.

My child _____ was diagnosed with type 1 diabetes _____ years ago.

We use the following devices to help manage diabetes:



Insulin Pump

A pump delivers insulin to my child through a small tube attached to the body.



Continuous Glucose Monitor (CGM)

CGM tracks my child's sugar levels.



Blood Glucose Meter

A meter allows my child to test blood sugar.

CHECKING SUGARS WITH A BLOOD GLUCOSE METER

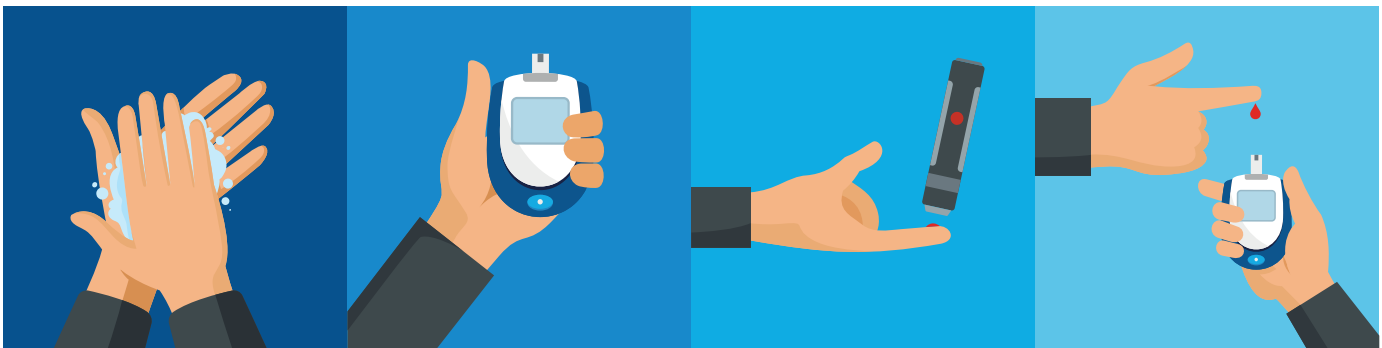
If a child displays symptoms of a high or low blood sugar, it's often recommended to test using a meter. Here are the steps to follow when checking blood sugar using a meter.

1. Wash hands

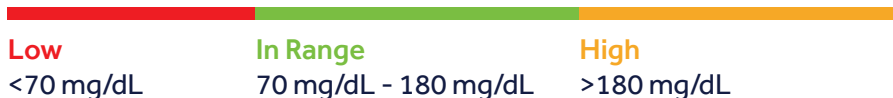
2. Insert test strip into meter

3. Draw blood using lancing device

4. Apply blood to test strip and wait for reading



5. Check blood sugar levels





SCHOOL EMPLOYEE GUIDE TREATING LOW BLOOD SUGARS

TREATING LOW BLOOD SUGARS

My child could experience a low blood sugar while at school.

For children living with diabetes, blood sugar is considered low when it falls below 70 mg/dL.

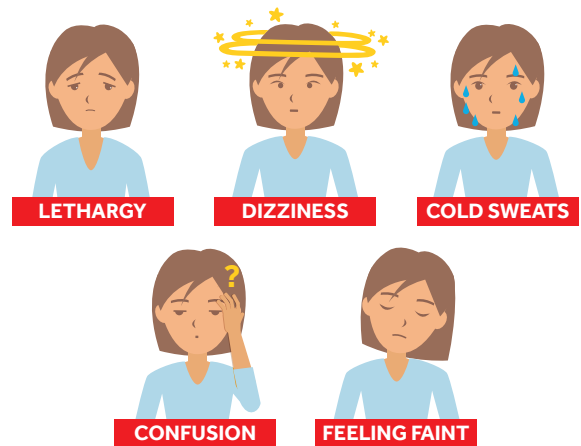
Low blood sugars can be very dangerous if untreated.

Low <70 mg/dL	In Range 70 mg/dL - 180 mg/dL	High >180 mg/dL
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Common symptoms

Some common signs of a low blood sugar are:

Lethargy, dizziness, cold sweats, lack of focus/ confusion, feeling faint



Our child's symptoms

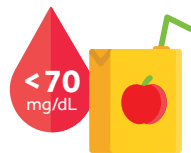
We've worked with our healthcare provider to identify these symptoms as indicating a low blood sugar for our child:

Treatment plan

If my child appears to be experiencing a low blood sugar, please take the following steps:



1. Test blood glucose using a meter.



2. If blood glucose is **below 70 mg/dL**, treat with 15g of fast-acting carbohydrate. My child's healthcare professional recommends

to treat a low glucose.



3. Recheck blood glucose after 15 minutes to assure blood glucose is above 70 mg/dL. If still below, repeat steps 2 & 3.



4. If my child experiences an extreme low and is unable to eat or drink, glucagon can be given by injection or using nasal spray.

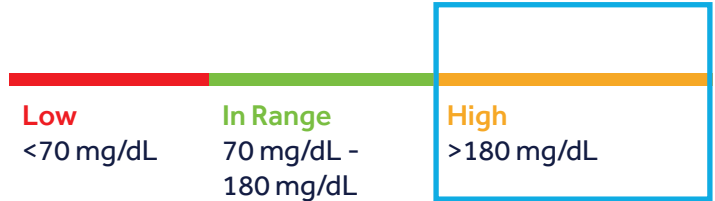


SCHOOL EMPLOYEE GUIDE TREATING HIGH BLOOD SUGARS

TREATING HIGH BLOOD SUGARS

Because my child cannot produce insulin, he/she can experience high blood sugars.

For children living with diabetes, blood sugar is considered high when it rises above 180 mg/dL. High blood sugars are most common after meals, and can be dangerous if untreated.

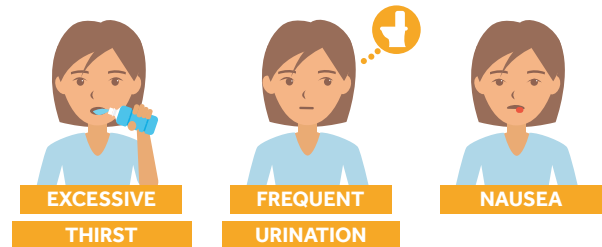


Common symptoms

Some common signs of a high blood sugar are: Excessive thirst, frequent urination, nausea

Our child's symptoms

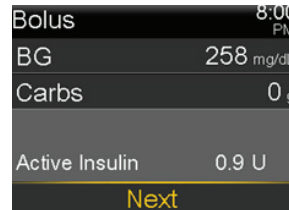
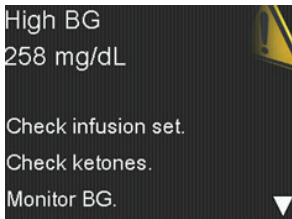
We've worked with our healthcare provider to identify these symptoms as indicating a high blood sugar for our child:



Treatment plan for child using SmartGuard™ Auto Mode

If my child appears to be experiencing a high blood sugar, please take the following steps:

1. Check BG.
2. If BG is high, message appears on screen.
3. Press Down to read the remainder of the message.
4. Select **Yes**.
5. Select **Bolus**.
6. Select **Carbs** and leave blank.
7. Select **Next**.
8. Review the High BG alert screen.
9. Select **OK**.
10. Select **Deliver Bolus** to deliver insulin.





SCHOOL EMPLOYEE GUIDE

GIVING INSULIN FOR FOOD

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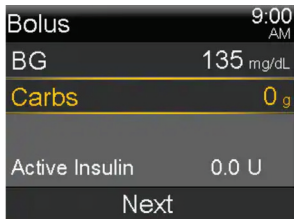
Whenever my child eats a snack or meal, insulin should be given to help control sugar levels. Giving insulin for food is often referred to as a bolus. It's best practice to bolus about 15 minutes before food.

Here are the steps to follow when it's time to give a bolus.

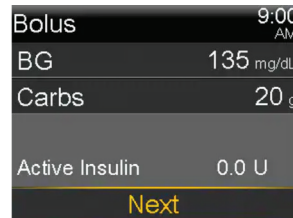
1. Test blood glucose using a meter.
2. Press **Select** and choose **Bolus** to go to the Auto Mode Bolus screen.



3. If using a linked meter, skip to step 4. Otherwise, enter the child's BG amount. You can enter a range from 20 mg/dL to 600 mg/dL.
4. Select **Carbs** and enter the amount for the meal.



5. For a correction bolus, you will not enter a carb amount. Go to step 6.
6. Select **Next**. The screen indicates the amount of the calculated bolus.



7. Review the calculated bolus amount.
8. Select **Deliver Bolus**.

A screen appears briefly to indicate the bolus delivery has started. Then, the Home screen appears and shows the progress of the bolus delivery.





SCHOOL EMPLOYEE GUIDE

CALIBRATIONS

CALIBRATIONS

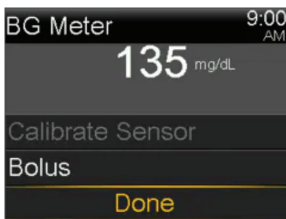
Some diabetes technologies require a calibration a few times a day. A calibration is when you use a blood glucose meter to help confirm that the numbers from my child's CGM are accurate. The pump will alert when a calibration is needed.

If a calibration is needed, follow the steps below. Please note, these instructions are for those using a linking meter.

1. Test blood glucose using a meter.
2. On the pump, select **Yes** to confirm the BG meter reading.
3. Select **Calibrate Sensor** to calibrate using the BG value.



4. Select **Done**.



Indications for Use

The insulin pump is indicated for the continuous delivery of insulin, at set and variable rates, for the management of diabetes mellitus. Age restrictions apply depending on pump model.

Contraindications

Pump therapy is not recommended for people who are unwilling or unable to perform a minimum of four blood glucose tests per day and to maintain contact with their healthcare professional. Successful insulin pump therapy requires sufficient vision or hearing to allow recognition of the pump signals and alarms.

Warnings/Precautions

Insulin pump therapy uses only rapid-acting U100 insulin. Therefore, any interruption in insulin delivery (due to infusion set clogs, leaks, loss of insulin potency, or pump malfunction) may result in hyperglycemia (high blood glucose) within 2-to-4 hours and, subsequently, the rapid onset of diabetic ketoacidosis (DKA) within 4-to-10 hours. The onset of stress or illness (caused by infection or an emotional event) can also result in a rise of blood glucose levels and the development of DKA. Establish a plan with your healthcare professional for rapidly identifying and treating both hypoglycemia and hyperglycemia, to prevent the onset of DKA and possible hospitalization. Act quickly to respond to out-of-target blood glucose. Notify your healthcare professional of low blood glucose requiring assistance or of high blood glucose, or of an increased frequency in low or high blood glucose. If your insulin delivery is interrupted for any reason, you must be prepared to replace the missed insulin immediately. Always carry an "emergency kit" of supplies that includes insulin, syringes or pens, blood glucose test strips and meter and urine ketone test strips, in case you develop a problem with your pump and your insulin delivery is stopped, or in case of high blood glucose. You should check for urine or blood ketones whenever your blood glucose is elevated above 250 mg/dL (13.7 mmol/L) and take an insulin injection if appropriate. For proper infusion set insertion techniques, follow the advice of your healthcare professional and the Instructions for Use included with the product. Change your infusion site every 2-to-3 days, according to your healthcare professional's suggestions, and according to the Instructions for Use that accompany the infusion sets and reservoirs. Check the amount of insulin remaining in your reservoir at least once a day. Infection at the infusion site is a risk of pump therapy. Check the infusion site often for redness, irritation and inflammation.