

DIABETIC MEDICAL MANAGEMENT PLAN


**North Carolina
Outward Bound**

THIS PLAN SHOULD BE COMPLETED BY THE APPLICANT'S PERSONAL HEALTH CARE TEAM.

Applicant's Name: _____ Course Number: _____

Diabetes Type

Diabetes type 1 Diabetes type 2

Blood Glucose Monitoring

Target range for blood glucose is 70-150 70-180 Other _____

Date of most recent A1C Test _____ Results of test _____

Usual times to check blood glucose _____

Times to do extra blood glucose checks (check all that apply)

before exercise

after exercise

when applicant exhibits symptoms of hyperglycemia

when applicant exhibits symptoms of hypoglycemia

other (explain): _____

Can applicant perform own blood glucose checks?

Yes No

Exercise and Sports

Outward Bound is a very physical endeavor. Diabetic applicants should be physically active in their everyday life and know the impact of activity on their blood sugar levels.

Is the applicant able to adjust insulin levels with a change in physical activity? Yes No

Restrictions on activity - should not exercise if blood glucose level is below _____ mg/dl or above _____ mg/dl or if moderate to large urine ketones are present.

For Applicants with Insulin Pumps

Applicants using insulin pumps MUST also be proficient at using syringes in case of pump failure to be accepted to course.

Is the applicant able to calculate the correct amount of insulin and self inject? Yes No

Type of pump: _____ Type of insulin in pump: _____

Applicant Pump Abilities/Skills:

Count carbohydrates

Yes No

Bolus correct amount for carbohydrates consumed

Yes No

Calculate and administer corrective bolus

Yes No

Calculate and set basal profiles

Yes No

Calculate and set temporary basal rate

Yes No

Disconnect pump

Yes No

Reconnect pump at infusion set

Yes No

Prepare reservoir and tubing

Yes No

Insert infusion set

Yes No

Troubleshoot alarms and malfunctions

Yes No

Insulin Dosing with Syringes

- Is applicant independent in carbohydrate calculations and management? Yes No
- Can applicant give own injections? Yes No
- Can applicant determine correct amount of insulin? Yes No
- Can applicant draw correct dose of insulin? Yes No

For Applicants Taking Oral Diabetes Medications

Type of medication: _____ Timing: _____

Other medications: _____ Timing: _____

Diabetic Incident Management

Hypoglycemia (Low Blood Sugar)

Usual symptoms of hypoglycemia: _____

Treatment of hypoglycemia: _____

Hyperglycemia (High Blood Sugar)

Usual symptoms of hyperglycemia: _____

Treatment of hyperglycemia: _____

Urine should be checked for ketones when blood glucose levels are above _____ mg/dl.

Treatment for ketones: _____

Contact Information for Applicant's Doctor/Health Care Provider:

Physician's Name: _____

Physician's Signature _____

Address: _____

Telephone: _____ Emergency Number: _____