Fear → Light bulb moment
Nursery / Preschool

- Early contact
- Make friends with the person in charge
- Don’t make it complicated
- Clear and concise rules
- Normality reigns supreme for the children
- Snacks at the same as their friends

Eloise
Aged 3
To the Nursery:  
**JESSICA BURTONG**
has HYPERINSULINISM

My child has only 5% of her pancreas left and this does not work 100% of the time. Because of this she needs to have injections of insulin and must balance her food and exercise.

An insulin reaction may occur if the blood sugar gets too low (a hypo), especially before meals or after exercise and this can be dangerous for Jessica and could cause brain damage or death.

**WARNING SIGNS OF INSULIN REACTIONS - HYPOS**

<table>
<thead>
<tr>
<th>Closing</th>
<th>Paleness</th>
<th>Headache</th>
<th>Changes of Mood</th>
<th>Confusion</th>
<th>Irritability</th>
<th>Tearfulness</th>
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<td>&amp; opening of eyes</td>
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Jessica's main symptoms are closing and opening of eyes, (this can nearly guarantee an extremely low blood sugar) paleness and mood changes.

If Jessica is unwell, please ring mum, Adrienne Burton on:

*home:*

*mobile:*

If Adrienne is unable to get to Jessica within ten minutes, or if instructed by her, please give Jessica:

- Hypiosol or 2 to 3 lucoslate tablets
- 1/3 can (330ml can) of coke, lemonade (any full sugar drink)

Please see attached hypo sheet.

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**Hypo**

If 2.6 or under or if seeming to pass out (sliding eyes etc) ALWAYS USE HYPOSTOP. Snap off top and squiz 15 tubes of HYPOSTOP in her cheeks create her mouth and rub in. (This will immediately bring her up). Squiz onto your fingers and pull loose her sheets and rub with hand over her mouth if necessary. Follow up with long acting food (Biscuits, sandwich, fruit, milk etc.). Check her blood after 5 to 10 minutes. If not on way up repeat hypostop and keep on checking every 10 minutes until going up.

If between 2.7 and 4.4:

You need to get her sugars up immediately and then follow with a long acting food. To raise sugars:

1. Two or three Lucoslate (or Dextrose) tablets
2. You then have to give her some long acting food (as above). Check after 5 to 10 minutes to make sure she is up, if not then try:
   - Two more Lucoslate tablets or
   - Coke (not diet) or any high sugar drink

Follow again with long acting food. Check every 10 minutes until rising.

If Jessica won't drink or eat use Hypiosol (as above) and follow up with long acting food.

If not responding to anything or in some the Glycogen Injection Kit will need to be administered. Mix up as pictures in box below but only inject half the syringe. Jessica then needs to go to hospital either by ambulance or can. Telephone mum (020 8249 3867 or 0773477 1462)

Signs for hypos (Jessica does not usually show any hypo signs at all except on rare occasions)

Doing anything different than she normally does:

1. Eyes start shifting and opening as going to sleep or passing out
2. Shakes way very quickly
3. Starts for a long time on someone's lap very badly and tired (this would not be in character, she is not a sleepy girl)
4. Weakness (which is unusual for her)
5. Scratching (always at night, sometimes a very high pitched scream)
6. If she has not eaten or eaten what she is supposed to eat, need to keep an eye on her (especially if she is in a hypo)

7. Vomits of pain - they tongue and vomit and will scream and cry every couple of minutes as a wave of pain hits her. (not sure where pain is but she might say her tummy hurts)

A hypo feels similar to being drunk (is differentiated, dizzy, headache). After a hypo it is a bit like having one feeling. (This is how I was explained to me by a dibilital)

When hypo, Jessica may not feel like eating or drinking and could get very stubborn and moody so you really have to try to force her.

She may well want to go to sleep after the hypo which is ok.

Phone numbers:

<table>
<thead>
<tr>
<th>Adrienne mobile</th>
<th>Adrienne home</th>
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<tr>
<td>0707 700 0000</td>
<td>Adrienne house</td>
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<tr>
<td>Adrienne's mum</td>
<td>Adrienne's mobile</td>
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<tr>
<td>Linda (Aunt)</td>
<td>Childcare Ward (Princess Royal Hosp)</td>
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<tr>
<td>Linda (Aunt) home</td>
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Primary school

- Approach early
- Friendly
- Care plan to include:
  - Day to day
  - Emergency rules
  - PE
  - Phone numbers

- Glucagon
- The Box
- The Bag

Jessica
Aged 4

Emilio
Age 4
The How to Guide

• Contact the head teacher early
• Have a few training/info meetings with:
  Class teacher
  TA’s in class
  Head
  School nurse if appropriate
• Perhaps stay for few days / weeks to train and show the ropes beginning of term

• Glucagon in schools
• Who can do the training?
Daily Plan

- Minimum requirements
- Added extras attached
- Record keeping for school
- Communication open
- Notes on the back
  ie low on stock in box etc

### RECORD OF BLOOD GLUCOSE LEVELS IN SCHOOL

**WEEK COMMENCING:**

<table>
<thead>
<tr>
<th>Time</th>
<th>Blood glucose level</th>
<th>Food given/ carbs/coke etc</th>
<th>Other Intervention ie bolus</th>
<th>Signed by</th>
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**Morning blood glucose level:**  

**Carbs at lunch:**

**Parents initials:**  

**Date:**

**Morning blood glucose level:**  

**Carbs at lunch:**

**Parents initials:**  

**Date:**
The Box

Supplies Box Contents

1. Full Care Plan
2. Mini cans of coke (hypo treatment - 15 cha per can)
3. Box containing:
   a. Multiclix barrels (needles)
   b. One Touch Vario test strips
   c. Pump batteries
4. One Touch glucometer - spare
5. Haribo (hypo treatment - 14 cha per bag)
6. Spare infusion sets and reservoirs (pump consumables)
7. Glucotabs

Fridge Box Contents

1. Glucagon Injection Kit (emergency hypo)
2. Novorapid viat - for insulin pump

Hypo treatment
Laminated sheets
Glucometer supplies
Emergency Flow Chart

Jessica Bursten
Hypopen Instructions

Hypoglycaemia or a "hypo" - a blood glucose of less than 4.4 mmol/L

If Jessica is unconscious go to Step 5. Do not attempt to give food, drink or Glucogon.

Step 1
- If below 3.0 go to Step 4.
- If Jessica is 3.1 to 4.4 give teaspoon of glucose (If glucose tablets or small can of syrup or chocolate is used) and go to Step 2.
- If unable or unwilling to eat or drink go to Step 5.

Step 2
- Ensure Jessica is relaxed and comfortable.
- Wait for 5 to 10 minutes after Jessica takes the glucose tablets or syrup and check the blood glucose reading.
- If above 4.4 mmol/L, go to Step 3.
- If not repeat Step 1.

Step 3
- If blood glucose above 4.4 mmol/L.
- Give a snack or pick it as close to the next meal as possible. (General: slow acting carb food or the snack, e.g. biscuits, prune bars, syrup or orange cordial. Will keep the blood glucose above 4.4 mmol/L even if the fast acting sugar has been eaten.)
- Check blood glucose again after 30 minutes.

Step 4
- Follow if Jessica below 3.0 mmol/L.
- Give small can of Coca-Cola or a glass of water (for Jessica). This needs to be consumed slowly.
- After finishing, the child waits for 5 to 10 minutes, ensure Jessica is relaxed and comfortable and check the blood glucose reading.
- If above 4.4 mmol/L, go to Step 3.
- If not, repeat Step 4 (another hour if necessary, once giving another can of Coca-Cola and once giving 5 glucose tablets).
- After the second repeat of Step 4:
- If above 4.4 mmol/L, go to Step 5.
- If blood sugar is not high give Glucogon injection and go to Step 5.

Step 5
- Administer Glucogon Injection (Follow simple picture instructions found in the lid of the Glucogon injection kit).
- Inject into thigh/femoral.
- If you cannot give injection, dial 999 (Red Cross service).
- Give Adrenaline (or emergency contact) - numbers below.
- If given glucogon injection and Jessica does not improve, contact emergency or Jessica will have to go to hospital. See below.
- Once, Jessica is stable, and cooperative follow Step 1.
- Monitor blood glucose readings carefully. Check readings every 15 minutes until ambulance or mother arrives to take over.

Red Cross - 999 Ambulance
Jessica has a Red Cross - Patient Specific Protocol (PSP) 999 (Red Cross). When reporting or ambulance, the need to be made clear to the ambulance service.

Direct Hospital Admission
Jessica has direct hospital admission to the Princess Royal and Terni Hospital and her hospital number is 347997.

TELEPHONE NUMBERS
- Adrino (Mom) home -
- Adrino (Mom) mobile -
- Breggot (brother) and Linda (Aunt) home -
- Breggot (brother) mobile -
- Linda (Aunt) mobile -
- 077 7409 2092 (Red Cross)
- 077 7409 2092 (Aunt)
- Princess Royal University Hospital - (Direct admission bed)
- Princess Royal University Hospital - (Direct admission bed)

Signed by: Dr. Khalil Hussain
Date:
Signed by mother: Adriana Ballesta
Date:

Information
Jessica usually does not display any symptoms of a hypo but sometimes will look or behave differently:
- Lethargic
- Groggy
- Very pale
- Sleepy/Sluggish
- Tense
- Weak
- Uncoordinated
- Eats/Thirst
- Odd/unusual behaviour
- Irritable
- Generally

Always check the blood glucose reading if Jessica has any of these signs/symptoms.
Secondary school

- Your teen will have more control
- Keep it simple
- Look at the timetable
- Care plan
- Small laminated cards
- Glucagon

Jessica Burton Yr7

Emergency hypo treatment

Testing Blood Sugars

Jessica will usually be able to test herself and act on a hypo without intervention. However, if Jessica feels so low she cannot test her own blood sugars or a member of staff has been trained to do a BG test must be called. If in doubt give Jessica the hypo treatment immediately and test when member of staff arrives or safely able (she can always give herself a bolus of insulin to cover the hypo treatment if she is not low.)

See below for instructions:

If the blood glucose is less than 4 mmols/L, follow the '15' rule

If Jessica is unconscious give Glucagon injection. Do not attempt to give food, drink or Glucogel. Suspend or disconnect the pump.

If blood glucose is less than 4 mmols and Jessica is alert, do not suspend the pump as the first line treatment but do the following:

↓ Give approx 15 grams of quick acting dextrose (ie 150 ml of non diet coke - small party sized can or 100 ml Lucozade)

↓ Repeat blood glucose test after 15 minutes

↓ If blood glucose still below 4 mmols give a further 15 grams of dextrose (ie 150 ml coke or 100 ml Lucozade)

↓ Repeat blood glucose test after 15 minutes

↓ If still below 4 ‘suspend’ the pump or disconnect at the site

Wait until blood glucose level has risen above 5 mmols before reconnecting the pump and call mum. If not sure at any stage above call mum immediately (07912 376456)

Severe Hypoglycaemia - glucagon

If uncooperative Jessica may drink her coke/Lucozade if you forcefully tell her she has to.

If drowsy/unconscious and/or unable to eat /drink, disconnect or suspend the pump (do not try to pull out her infusion set to do this; you may damage the pump and hurt Jessica) and then:

1. Call 999
2. Give Glucagon injection (if trained) which is kept in the pod and in the fridge in the Office, follow instructions on inside of lid
3. Ring mum - Ask someone else to call mum immediately the injection is being given or been given on 07912 376406/01424 846925

Stay with Jessica and watch her in case of vomiting or seizure. Keep checking her Blood glucose level until it reaches 5 mmol.

Glucagon :
Route: Sub cut or Intramuscular
Dosage: Full syringe
Site for: Thigh
Happy

Eve

Alliza-Lily

Louie

Charlie

Ellie & Tate

Emilio

Connie

Ellie

Liam

Scarlett

Tilly

Talley

Jessica

Riley