Dear Substitute Teacher,

Hello! My name is [child's name]. I am a [Grade student] in [Teacher's name] class, and I have Type 1 Diabetes. This means that my pancreas no longer produces insulin. I require regular blood glucose monitoring, insulin injections and snacks to maintain my blood glucose levels. Due to this condition it is important that you know the following information:

- I may have to visit the school nurse several times per day to test my blood glucose levels. The class aid, or another adult, needs to accompany me to the nurse's office.
- Hypoglycemia (low blood glucose levels) and hyperglycemia (high blood sugar levels) are both very serious conditions that need to be addressed immediately. Please contact the school nurse [School Nurse's name] for full instructions. I may need to take frequent bathroom breaks and may need to eat a snack in class to prevent a low blood sugar. I am allowed to do these things. If you have any questions about this be sure to contact the nurse. If I am showing symptoms of high or low blood glucose levels, an adult must take me immediately to the Nurse's office. Symptoms of high/low blood sugar include:

Low blood glucose symptoms (Hypoglycemia)	High blood glucose symptoms (Hyperglycemia)
Shakiness, Drowsiness, Dizziness, Sweating, Hunger, Headache, pale skin color, sudden mood swings (including crying), poor coordination (clumsy and/or jerky movements), poor attention span/confusion, tingling sensation around mouth, seizure, loss of consciousness.	Excessive thirst, fatigue, weakness, frequent urination, blurry vision

If [School Nurse's name] finds my blood glucose is low, I will remain there and have juice or a snack and be retested in 15 minute intervals until my blood glucose level is within an acceptable range. If I am low, it is important that I am not left alone until it has been determined that I have achieved normal levels. I must remain in the company of an adult if I am experiencing a low blood sugar level.

If [School Nurse's name] finds my blood glucose is high, I will remain there for a short time while she tests me and I drink additional water.

• If a special event is taking place (e.g. class party), my parents need to be consulted in advance to determine the correct amount of insulin that I need so that I can participate in the fun with everyone else.

Please contact my parents or [School Nurse's name] with any questions that you might have regarding diabetes and my health plan.

Sincerely, [child's name]

[Parent Name and Phone Number]