

## DIABETES MANAGEMENT PLAN 2020

### APPENDIX FOR CONTINUOUS GLUCOSE MONITORING (CGM)

☐ Dexcom G4   ☐ Dexcom G5

Name of student: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Name of school: \_\_\_\_\_ Grade/Year: \_\_\_\_\_

#### GENERAL INFORMATION:

Students may come to school with a continuous glucose monitoring (CGM) device.  
This technology is to support students and parents/carers and will be managed by parent/carers.

Teachers and school staff are not expected to do more than the current routine diabetes care.  
CGM provides information about trends in glucose levels but it will not affect the care activities indicated in the Diabetes School Action and Management plans. It is not necessary for staff to put CGM displays on their computer, smart phone, and other electronic devices or carry receivers. While these devices provide additional information on glucose values and trends, they are not compulsory management tools.

CGM consists of a small sensor that sits under the skin and measures glucose levels in the fluid surrounding the cells (interstitial fluid), and transmitter (pictured below) which sends data to a receiver. The receiver used can be the display screen of a compatible insulin pump, a smart device or a Dexcom stand-alone receiver.



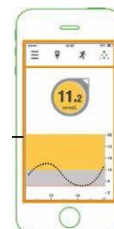
Transmitter & Sensor



Insulin Pump Receiver



Receiver



Smart Device

If the receiver is more than **3 - 6 meters** from the transmitter, connection will be lost. The information will be stored in the transmitter and downloaded when connection is restored.

It is the student's responsibility to carry the receiver (dedicated receiver, insulin pump, smartphone or iDevice) when at school. Some CGM devices can be monitored remotely by family members. CGM can be programmed to alarm if glucose levels go below set levels, so that action may be taken.

## USE IN SCHOOL SETTING

CGM **DOES NOT** replace a finger prick **blood glucose check**.

A finger prick blood glucose check should be performed:

- To confirm Hypoglycaemia (<4.0mmol/L)
- To confirm Hyperglycaemia (>15mmol/L or “HI”)
- Any time the child feels unwell

## CGM ALARMS

***CGM alarms may be ‘on’ or ‘off’ and should be used conservatively so they do not disrupt the student’s learning and school activities.***

If ‘on’ the CGM will alarm if interstitial glucose is < 4.0mmol/L

**ACTION** → Check finger prick blood glucose level (BGL) and treat per Diabetes School Action Plan

Alerts for high BGL or in response to changing glucose trends are not recommended at school

## STUDENT ABILITIES / SKILLS. THEY ARE ABLE TO DO THE FOLLOWING INDEPENDENTLY

Troubleshoot alarms and malfunctions. If “no”, contact parents/guardians for advice. If parents/carers not available or sensor comes out, continue with routine diabetes care as per the Diabetes School Management plan.	D Yes	D No
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## ADDITIONAL INFORMATION:

- A parent/carer is responsible for changing the CGM site and setting the alarms
- The sensor can remain on the student during water activities
- Diabetes management continues as per Diabetes School Action and Management Plans
- If the transmitter/sensor attached to the student falls out, school staff are requested to keep in a safe place, to either be taken home by the student or collected by the parents/carers
- Paracetamol should be avoided as this can affect sensor readings..
- **Parents /carers are the primary contact for any questions regarding CGM use**

Parent/Carer:	Signature:	Date:
Principal:	Signature:	Date:
Diabetes Healthcare Team:	Signature:	Date: