Shopping for the right outfit and coordinated school supplies makes preparing for the first day of school a very exciting time. The first day of school marks the first step in a year-long journey of achieving academic success, building strong relationships and conquering new heights in sports and other extracurricular activities.

Adding a few more items to the back to school checklist will make for an easier transition of diabetes management during the summer to the new school year.

Tip #1: Make sure your child’s current medication and meal regimen.

Tip #2: Meet with your school nurse and other school personnel at the beginning of the year. This discussion should include how frequently blood glucose level patterns, level of self-care and recommendations. Always provide the school nurse with the best form of contact and provide an update if changes occur.

Tip #3: Provide all diabetes supplies including snacks. Determine how often you will refill diabetes supplies at the school. Some families refill supplies monthly or quarterly.

Tip #4: Don’t forget proper storage! Blood and ketone testing strips should not be handed individually to school nurse. All strips must be stored in a properly marked bottle that does not allow light or air. Ketone testing strips expire 6 months after the bottle has been opened. Like your testing strips, insulin has a specific expiration and storage.

Tip #5: Make sure your school care plan is up to date. Your school care plan should reflect your child’s current medication and meal regimen. All strips must be stored in a properly marked bottle that does not allow light or air. Ketone testing strips expire 6 months after the bottle has been opened. Like your testing strips, insulin has a specific expiration and storage.

This is regardless of the remaining amount in the pen or vial.

If you have any questions or concerns about your supplies and preparing for a successfully safe school year, contact your diabetes educator or other medical team members. Other great resources include your Le Bonheur School Care Plan and the American Diabetes Association (ADA) Safe at School webpage, www.diabetes.org.

SUCCESS STORY

Nadim B. and I am 11. I have been diagnosed with Type 1 diabetes for two years. The hardest part of having diabetes for me has been the stress that comes with dealing with this disease, day in and day out. I have to remind myself that I am capable of taking care of myself, and that I have a great support team who can help me whenever I need it.

Since being diagnosed, I have participated in our county’s 4-H program, winning several regional competitions and competing in a state competition. I am now attending a community college, and it’s been a great experience for me.

Advice I would provide to someone recently diagnosed is that no matter how overwhelmed you feel, just know that it does get better. You are capable of anything you set your mind to including managing your diabetes. Keep your chin up!

COMMUNITY RESOURCES:

FREE DIABETES EMERGENCY NECKLACE
Send a self-addressed, stamped envelope to: Free Diabetes Necklace, Diabetes Research and Wellness Foundation, PO Box 96046, Washington, DC 20090-6046

CHURCH HEALTH AND WELLNESS CENTER
Free Diabetes classes offered on 2nd Saturday of each month 901-259-4673

JDRF WEST TENNESSEE CHAPTER
JDRF is the leading global organization funding Type I diabetes (T1D) research. Our strength lies in our exclusive focus and singular influence on the worldwide effort to end T1D. Contact JDRF for more information: 901-861-6550

AMERICAN DIABETES ASSOCIATION
800-Diabetes (800-342-2383)

WHAT’S HAPPENING: Upcoming events

WALK KICKOFF LUNCH
Hiton Memphis – Aug.11
T1D & YOU
Baptist Memorial – Sept. 11
STEP OUT: WALK TO STOP DIABETES
Sept. 17

ONE WALK
Shelby Farms – Oct. 1
BOO FEST – T1D – Oct. 29

DIABETES AWARENESS MONTH
November

BREW FOR A CURE
Cadre Building – Nov.4

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**ASK THE NURSE: What’s so important about the school care plan?**

By: Courtney Stack, RN, BSN, CPN

You may wonder why we always stop you on your way to check out after your diabetes follow up appointments and say, “Don’t forget your school care plan!” School care plans are important for a variety of reasons. They help communicate the doctor’s orders to the school nurse or whoever has been selected to supervise your diabetes care while at school. If you don’t get a new school care plan at each visit, your nurse will be using an old school care plan and potentially give you the wrong dose of insulin while at school. This could result in blood sugar running too high or too low. 

Aside from your current insulin doses, the school care plan also gives instructions that the nurse can follow for certain scenarios that may come up while at school. For example, you may have a low blood sugar before P.E or recess, and your teacher doesn’t know if you should be able to participate. The school care plan has specific guidelines of what your blood sugar should be before taking part in physical activity and what to do to bring your blood sugar up. 

On the other hand, you may have a high blood sugar in between meals when it is not your normal time for insulin. By following the school care plan, your nurse will know exactly what to do in these situations. It directs them to check for ketones, give extra fluids, and when to call our office for further instructions.

Other helpful information in the school care plan includes our office’s contact information, signs and symptoms of hypoglycemia and hyperglycemia, when to check blood glucose, what diabetes supplies must be kept at school, and diet guidelines. 

Overall, the school care plan is a great resource and set of orders for your appointed caregiver to follow while at school. No students manage their diabetes the same way. The school care plan is individualized and tailored to be specific for each student. Without it, you may be in danger of not getting the care you need. The nurses should give you an updated school care plan at the end of each visit but if not, make sure to ask for one before you end, and then make sure to get it to the right person at your school.

**STAFF SPOTLIGHT: Blake Adams, R.N., B.S.N.**

Hi, I’m Blake Adams, and I am a clinic nurse. I work in both clinic locations: on the main campus and in East Memphis. I went to Mississippi State University for my undergrad and received my Bachelor of Science in Nursing degree from Baptist Memorial Hospital in Memphis. I have been a nurse at Le Bonheur for 10 years. The first seven years were spent in the hospital on the General Medical/Surgical unit. I have been in the Le Bonheur Outpatient clinics for the past two years. I love what I do. However, I think I have a passion for caring for everyone because I am able to work with some really wonderful people and get to do what I love! I am also a mom. My husband and I welcomed a baby girl in January, and we love every minute with her.

**WHAT TO EXPECT WITH A 504 PLAN**

By Nakicia Smith, LMSW

**Q. What is a 504 plan?** Section 504 of the Rehabilitation Act of 1973 is a civil rights law that prohibits discrimination based on disability. It also requires that an educational institution or organization, which receives federal funds, to provide a student with a disability such as diabetes with some means to manage their condition at school and receive the same education as other children. The plan, which applies to all public schools and any private schools that receive federal funds, uses diabetes management goals developed by a student’s health care provider to set an individualized educational plan for the student throughout the year exactly how the child’s diabetes should be managed during the school year.

**Q. Does my child need a 504 plan?** Yes, all children with diabetes who qualify for services under Section 504 should have a plan at school; most, if not all, schools require an individual assessment.

**Q. What should I set up?** A 504 plan should be set up as soon as your child is diagnosed with diabetes. It will be up to you to request meeting with your child’s school for this.

**Q. What happens once I sign?** After the 504 is signed by a parent or legal guardian along with school representatives the form is official. The plan should be updated after any changes have been made during your Diabetes clinic visit. If no changes are made throughout the year it should be reviewed annually.

**Q. What’s the difference between a 504 plan and an Individualized Education Program?** Under the Individuals with Disabilities Education Act, students with mental, physical, and learning disabilities are guaranteed the help needed to have equal access to education. Individualized Education Programs (IEPs) specify many of the same health needs and goals as 504 plans, but go a step further by detailing academic services for the student. Most of the time, students with diabetes need only a 504 plan. If a child needs an IEP, a 504 plan won’t be necessary.

**Q. What should I do if the school won’t comply?** There are a few schools who fail to implement 504 plans because of a lack of knowledge. If you have concerns with the school adhering to your request for a 504 plan, you can contact your clinic social worker. Also, the ADA has legal advocacy staff and a national network of attorneys and volunteers experienced in schools.

**Q. How can I protect my child who attends a private or religious school?** Public school children are eligible for services under Section 504. Some private schools receive federal funds, but not all. Students who attend nonreligious, privately funded schools aren’t protected under Section 504, but they do have rights under the Americans with Disabilities Act. In that case, parents or guardians will need to talk with the school administration about setting up a written plan for their child’s diabetes care. Religious schools, unless they receive federal funds, are not required by law to follow either Section 504 or the Americans with Disabilities Act. Some religious schools do receive federal funding, though, such as through provision of bond money by a church or by the Tennessee School boards. A 504 plan isn’t required, however you may consider approaching the school about its antidiscrimination policy and asking the administration to sign a written diabetes education plan.

**DISHING WITH THE DIETITIAN: Eating Away from Home**

By: Katelyn Wolfe, MS, RD, CSp, LDN

For patients that count carbohydrates for insulin dosing, eating out of the home can be intimidating. At home, families have easy access to food labels, measuring cups and often pre-portioned foods. With a little practice and some simple tools, eating at school or at a restaurant can be a part of a healthy routine. Here are some tips:

- **Don’t leave home without it!** You will have to have your BG meter and insulin with you at school or when dining out (or anywhere if you’re away from home for that matter).
- **Use visual cues for determining serving size if serving size isn’t already known.** Here are a few common ones:
  - 1 cup = a clenched fist (i.e.: fresh fruit, dry cereal, raw vegetables)
  - ½ cup = cupped handful (i.e.: cooked cereal, rice, pasta, cooked vegetables)
  - 3 ounces = palm of hand or deck of cards (i.e.: meat, poultry)
  - 1 tablespoon = 1 thumb (i.e.: salad dressing, peanut butter, cheese, nuts)
- **Bring your resources with you!** Your smart phone can be your best friend for carb counting by using the free GoMeals App (Available on Android or iPhone). They serve as doma ins for many typical foods and chain restaurant nutrition information. Also, most chain restaurants have their nutrition information available on their websites or through the CalorieKing book.
- **Bring your glucose meter!** Your phone can be your best friend for carb counting by using the free GoMeals App (Available on Android or iPhone). They serve as domains for many typical foods and chain restaurant nutrition information. Also, most chain restaurants have their nutrition information available on their websites or through the CalorieKing book.
- **Bring your insulin and medications!**
- **Have a plan.** Work with your school nursing staff using the information provided in your child’s school care plan to create a treatment plan.
- **Cafeteria management should be informed.** Cafeteria management should be informed in advance so that carb counting is easy on the spot. If your child is very picky or resistant to eating school lunches, consider packing lunches and sending all of the carbohydrate information written down for each item.
- **Avoid eliminating treats!** Having diabetes does not mean having to give up favorite foods. Make sure to allow special treats for the kids. Keep the holiday traditions, school celebrations and family holidays. Just include the treat with a meal and count the carbs to account for the amount of insulin needed to cover the treat.
- **Aim for a balanced plate.** Including half a plate of non-starchy vegetables and fruit helps ensure that the meal is not overloaded with high carb grains or starchy vegetables and that the meal offers a variety of minerals, and fibers. Plus, these foods are also filling!