It is important to learn all about diabetes. At the time of diagnosis the family will spend two to three days learning about diabetes. A week later they will return for another day. This book will help in the beginning, until the family is ready to read “Understanding Diabetes.” In both books, the chapters have the same numbers and topics. All family members, including both parents, should be present for initial education.

The first day of teaching often includes:
- What diabetes is and what causes it
- Urine and/or blood ketone testing
- Blood sugar testing
- Recognizing a low blood sugar and how to treat it
- Insulin types and actions
- Drawing up insulin
- Giving shots
- Food survival skills

On the second day, the topics from day one are reviewed and a family member gives the shot. Other areas often covered are:
- A school plan
- Directions for diabetes care using the telephone
- Details of treatment (including “thinking” scales)
- Education about food (dietitian)
- Feelings (psych-social team)
- Plans for the next few days

One-Week Follow Up

Usually at one-week the family and child return for more education with other families. The content includes: teaching done by the dietitian and nurse and a clinic visit with the physician. Areas covered include:
- Details of food management with diabetes
- Review of HbA1c: what is it, why is it important
Insulin actions and different insulin regimens

Pattern management of blood sugars: how to identify trends and when to fax or e-mail numbers (all families are given fax sheets to send in weekly for at least four to six weeks)

Low blood sugar care: causes, signs and treatment of mild to severe low blood sugars including a review of the use of glucose tablets and gel, honey, and administration of glucagon

High blood sugar care: prevention of diabetic ketoacidosis; causes, signs and treatment

Sick-day management: how often to check blood sugar and ketones, fluid replacement, what type and how much, when and how to urgently call for assistance

The importance of education in diabetes.
Special Instructions for the first night are:
New Patient First-Night Instructions for __________________________________________________

A. The diabetes supplies you will need the first night include (your nurse will mark which you need):
   ____ Blood glucose meter  ____ Meter test strips  ____ Alcohol swabs
   ____ Ketone check strips  ____ Glucose gel & tabs  ____ Log book
   ____ Insulin  ____ Syringes  ____ Phone contact card

   The first night you will either get your insulin injection at our clinic, or you will give the shot at
   home or where you are staying.

B. If the insulin is given while at the clinic:
   ❑ 1. Humalog®/NovoLog®/Apidra® insulin has been given; eat within 10-15 minutes.
   ❑ 2. Regular insulin has been given, try to eat your meal within 30 minutes – or – have a snack
      containing carbohydrates on the way home if it will be more than 30 minutes.
   ❑ 3. Allow your child to eat until their appetite is satisfied, avoiding high sugar foods (especially
      regular sugar pop [soda] and sweet desserts).

C. If the dinner insulin is to be given at home:
   1. Check your child’s blood sugar right before your meal. Enter the result into the log book.
   2. Check for urine ketones. Enter the result into the log book.
   3. Call Dr. _____________________ at _____________________ or page at _____________________
      for an insulin dose.
      
      Give this dose: ________________________.

   4. Draw up and give the insulin injection right before your meal (see Chapter 8). If your child is
      not very hungry or is tired, you can give the shot after they eat and call the physician with any
      dose questions.
   5. Eat your meal, allowing your child to eat until their appetite is satisfied. Avoid high sugar foods.

D. Before Bed:
   1. Check your child’s blood sugar. Enter the result into the log book.
   2. Check for urine ketones. Enter the result into the log book.
   3. Call your pediatrician at the numbers listed above if your child’s blood sugar is below ____ or above
      ____, or if urine ketones are “moderate” or “large.” If urine ketones are “trace” or “small,” have
      your child drink 8-12 oz of water before going to bed.

   4. Give an insulin injection if your pediatrician instructs you to do so. (Dose, if ordered = ________.)
   5. Have your child eat a bedtime snack. Some ideas for this snack include: cereal and milk, toast
      and peanut butter, a slice of pizza, yogurt and graham crackers, or cheese and crackers. (See
      Chapter 11, Table 2 in the “Understanding Diabetes” book for other ideas.)

E. The second morning before coming to the clinic:
   1. If your pediatrician has instructed you to give the morning insulin at home before coming in,
      follow the steps listed above (see letter “C”) for last night’s meal dose before eating breakfast.
   2. If you have been instructed to wait to give the morning dose until after coming to the clinic, do
      a blood sugar test and a urine ketone test upon awakening (if blood sugar is less than 70 mg/dl
      [3.9 mmol/L], give 4–6 oz of juice promptly).

      Write the blood sugar and urine ketone results in your log book.
      ❑ Eat breakfast at home, and then come to the clinic for your insulin injection.
      ❑ Bring your breakfast to the clinic, and you will eat it after the insulin has been given.

   3. Please bring all blood testing supplies and materials you received the first day back to the clinic
      (including your log book, Pink Panther book, insulin and supplies).
Insulin is made in the body by an organ called the pancreas. The difference between people with type 1 diabetes and people with type 2 diabetes is the pancreas of a person with type 1 diabetes stops making enough insulin.

In type 2 diabetes, the pancreas can still make insulin, but the insulin does not work like it should.