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Precautionary Protocol for Educational Professionals in Caring for a Newly Diagnosed Student with Type I Diabetes

Sandra Berard *University of Rhode Island*, sandyh@my.uri.edu

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Title

Precautionary Protocol for Educational Professionals in Caring for a Newly Diagnosed Student with Type I Diabetes

Sandra J. Berard

Major

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Faculty Sponsor

Dr. John Boulmetis

Faculty Sponsor Department

Education

Technical Content Advisor

Mary E. Cloud MSN RN

Technical Content Advisor Department

Nursing

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Abstract

Type I Diabetes in children has become a major critical disease in today's elementary schools. The statistics reveal that "there are 25.8 million people in the United States, or 8.3% of the population, who have diabetes" (American Diabetes Association, 1). It is estimated that of those with Type I "only 5% of people with diabetes have this form of the disease" (ADA, 1). The problem is increasing among students at younger ages each and every year. Currently, students are being diagnosed with this autoimmune disease as early as four years of age. The American Diabetes Association states that "about 1 in every 400 children and adolescents has diabetes" (ADA, 1). Given this information, an increased number of elementary aged students

will be managing Type I Diabetes at a younger age. Because of this growing number of students who will be diagnosed with Type I Diabetes, it is, therefore, imperative that school administrators, school nurses, and elementary school teachers know and understand the signs and symptoms of hyperglycemia (high blood glucose) and hypoglycemia (low blood glucose) for this population of students. The severity of this illness may not only impact the student's heath, but also their current demeanor and academic success.

Type I Diabetes is identified as "a group of diseases characterized by high blood glucose levels that result from defects in the body's ability to produce insulin" (ADA, 1). This is the type of diabetes "usually diagnosed in children and young adults, and was previously known as juvenile diabetes" (ADA, 1). The proper protocol for the care of a child with diabetes is relatively easy as long as a clear understanding of the signs and symptoms is known by the professionals who are responsible for the care of the student with diabetes.

The reason I selected to investigate, inform, and educate teachers about Type I Diabetes is because of my son. When my son, at the age of nine was diagnosed with Type I Diabetes, there was a lack of experience by the school staff about the care, symptoms, and dangers of this disease. Unfortunately, after being newly diagnosed, I cared for him during the school day whenever he had signs and symptoms of hyperglycemia or hypoglycemia. This required me to be on call, to return to school when he was experiencing symptoms that necessitate treatment, and to remove my son from school whenever his symptoms escalated. This was necessary because he was unable to concentrate in school due to the lack of prompt care at the onset of his symptoms. This, in turn, placed him behind in his school work and resulted in him missing out on extracurricular activities. Then, he lacked crucial social engagement with other students and was constantly at the nurses' office.

The purpose of this project was to identify the procedures that are in place in a school setting when a child with Type I Diabetes has the symptoms of hyperglycemia or hypoglycemia. Such protocols are important to identify the care necessary to keep such a child safe while in school, and progressing with his/her learning experience so that it is similar to all the other students within the school setting.

My study of the elementary school systems in the Rhode Island area, as to what is in place to inform school practitioners on the care for a Type I Diabetic student in the school setting, will identify changes that have taken place over the years to better care for students with diabetes within the school system. Further, I will have created a guide and protocol document for teachers, school professionals, and school nurses to have as a reference guide to be used when a child with diabetes requires care due to signs and symptoms of hyperglycemia or hypoglycemia. Indeed, my hope is that this reference guide will be an invaluable resource for

the school professionals in order to enable every child despite his/her diagnosis to obtain full access to the very best educational opportunities.