

Title: Documenting Diabetic Care in the Medication Log

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Product: SNAP Health Center

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Version(s): all

Background: This article explains how to document diabetic care in SNAP Health Center.

Instructions:

Begin by creating the medication/treatment orders in the student's health record – You will potentially create about 5 scheduled and 7 PRN orders in the student's health record, depending on the individual student's orders:

Blood Glucose Test – PRN and scheduled for finger stick and continuous glucose monitoring

Carb Calculation – PRN and scheduled

Glucagon – PRN

Glucose (Tabs) – PRN

Insulin Administration – PRN and scheduled

Insulin Pump Maintenance – PRN and scheduled

Ketones check – PRN and scheduled

To enter a new medication order

- In the student's health record, click **Orders**.
- Click **New**
- Fill out the medication order based on the physician's orders. Examples for each type of order are included on the next pages.

To quickly create a PRN order out of a scheduled order

- In the Orders window, select the scheduled order
- Click **Copy**
- Modify the **Type, Frequency, start and end date** fields and click **OK**

Blood Glucose Test Orders - finger stick

Scheduled (may not need this for students with a continuous glucose monitoring device)

Treatment order for Doe, Jane ID: (none) DOB: 7/8/1999 Grade: 12 Teacher: nt

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active <input type="radio"/> Discontinued	<input checked="" type="radio"/> Scheduled <input type="radio"/> PRN <input type="radio"/> Admin At Home <input checked="" type="checkbox"/> Treatment	<input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Start: 09/01/2016 End: 06/30/2017 Expire: / /	<input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: Blood Glucose Test
 Dose: (fingerstick)
 Strength: |
 Route: Fingerstick
 Freq: 2 x per day

On Hand: 0 Tab/Qty Dose: 0 Reorder Qty: 0

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1: 09:30 #2: 13:00 #3: : #4: :

Info:
 Location:
 Medical Dx:
 ICD10 Code(s): Select...
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: BG<50 call parent, 30g fast acting carb
 BG 50-70 15g of fact acting carb
 BG>70 no treatment
 BG> 200 see insulin order

Buttons: Cancel, Share, Delete, Print, OK

PRN - for use when student receives a high or low blood glucose alarm on their pump or when they are feeling symptomatic

Treatment order for Doe, Jane ID: (none) DOB: 7/8/1999 Grade: 12 Teacher: nt

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active <input type="radio"/> Discontinued	<input type="radio"/> Scheduled <input type="radio"/> PRN <input type="radio"/> Admin At Home <input checked="" type="checkbox"/> Treatment	<input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Start: 09/01/2016 End: 06/30/2017 Expire: / /	<input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: Blood Glucose Test
 Dose: (fingerstick)
 Strength: |
 Route: Fingerstick
 Freq: As necessary

On Hand: 0 Tab/Qty Dose: 0 Reorder Qty: 0

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1: : #2: : #3: : #4: :

Info:
 Location:
 Medical Dx:
 ICD10 Code(s): Select...
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: BG<50 call parent, 30g fast acting carb
 BG 50-70 15g of fact acting carb
 BG>70 no treatment
 BG> 200 see insulin order

Buttons: Cancel, Share, Delete, Print, OK

Blood Glucose Test Orders – continuous glucose monitoring device (CGM) Scheduled

Treatment order for Doe, Jane ID: (none) DOB: 7/8/1999 Grade: 12 Teacher: nt

Status: <input checked="" type="radio"/> Active <input type="radio"/> Discontinued	Type: <input checked="" type="radio"/> Scheduled <input type="radio"/> PRN <input type="radio"/> Admin At Home <input checked="" type="checkbox"/> Treatment	Source: <input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Effective Dates: Start: 09/01/2016 End: 06/30/2017 Expire: / /	Permissions: <input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.
Treatment		Info		
Class: *Treatments/procedures	Drug Info	Info		
Descr: Blood Glucose Test		Location		
Dose: (CGM)		Medical Dx		
Strength:		ICD10 Code(s) Select...		
Route: via continuous glucose monitor		Billable Time: 0 Minutes	POS: School	
Freq:		Pharm.		
On Hand: 0	Tab/Qty Dose: 0	Reorder Qty: 0	Refill Hx	
Days of the Week: <input type="checkbox"/> Su <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Tu <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> Th <input checked="" type="checkbox"/> F <input type="checkbox"/> Sa		Notes: BG < 50 call parent, 30g fast acting carb BG 50-70 15g of fact acting carb BG > 70 no treatment BG > 200 see insulin order		
Administration Times: #1 09:30 #2 13:00 #3 : #4 :		Pharm.		
		Doctor		

PRN

Treatment order for Doe, Jane ID: (none) DOB: 7/8/1999 Grade: 12 Teacher: nt

Status: <input checked="" type="radio"/> Active <input type="radio"/> Discontinued	Type: <input type="radio"/> Scheduled <input checked="" type="radio"/> PRN <input type="radio"/> Admin At Home <input type="checkbox"/> Treatment	Source: <input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Effective Dates: Start: 09/01/2016 End: 06/30/2017 Expire: / /	Permissions: <input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.
Treatment		Info		
Class: *Treatments/procedures	Drug Info	Info		
Descr: Blood Glucose Test		Location		
Dose: (CGM)		Medical Dx		
Strength:		ICD10 Code(s) Select...		
Route: via continuous glucose monitor		Billable Time: 0 Minutes	POS: School	
Freq: As necessary		Pharm.		
On Hand: 0	Tab/Qty Dose: 0	Reorder Qty: 0	Refill Hx	
Days of the Week: <input type="checkbox"/> Su <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Tu <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> Th <input checked="" type="checkbox"/> F <input type="checkbox"/> Sa		Notes: BG < 50 call parent, 30g fast acting carb BG 50-70 15g of fact acting carb BG > 70 no treatment BG > 200 see insulin order		
Administration Times: #1 : #2 : #3 : #4 :		Pharm.		
		Doctor		

Carb Calculation Orders

Scheduled - for use during routine bolus before meals and snacks

Treatment Order for Jones, Joan

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input checked="" type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 06/01/2013	<input checked="" type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/2014	<input checked="" type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: Carbohydrate/Insulin Calculation
 Dose: see notes
 Strength:
 Route: *N/A
 Freq: before snacks and meals

On Hand: Tab/Qty Dose: Reorder Qty:

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 10:00 #2 12:00 #3 13:45 #4 :

Info:
 Location:
 Dx:
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: carb count prior to snacks and lunch see insulin order for sliding scale

Buttons: Print, Cancel, OK

PRN

Treatment order for t, t ID: (none) DOB: 10/10/2011 Grade: -2PK Teacher: Mrs. Smith

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 07/01/15	<input type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input checked="" type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/16	<input type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: DM - Carbohydrate/Insulin Calculation
 Dose: See notes
 Strength:
 Route: *N/A
 Freq: As necessary

On Hand: Tab/Qty Dose: Reorder Qty:

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 : #2 : #3 : #4 :

Info:
 Location:
 Medical Dx:
 ICD10 Code(s): [Select...](#)
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: Carb count prior to snacks and meals - See insulin orders for sliding scale.

Buttons: Cancel, Shared, Print, OK

PRN Glucagon Order

Medication Order for Jones, Joan DOB: 5/14/1996 Grade: 11 Teacher: Ms. Wright

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start: 09/01/2013	<input checked="" type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input checked="" type="radio"/> PRN	<input type="radio"/> Standing	End: 06/30/2014	<input checked="" type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire: / /	<input type="checkbox"/> M.D.
	<input type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Medication:

Class: Glucagon
 Descr: Glucagon
 Dose: .5mg
 Strength:
 Route: Intramuscular
 Freq: As indicated

On Hand:
 Tab/Qty Dose:
 Reorder Qty:
 Drug Info

Info:
 Location:
 Dx:
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: Call 911 if administered if does not awaken after 10-15 minutes, dose may be repeated while waiting for emergency assistance.

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 : #2 : #3 : #4 :

Print Cancel OK

PRN Glucose Tab Order

Medication Order for Jones, Joan DOB: 5/14/1996 Grade: 11 Teacher: Ms. Wright

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start: 09/01/2013	<input checked="" type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input checked="" type="radio"/> PRN	<input type="radio"/> Standing	End: 06/30/2014	<input checked="" type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire: / /	<input type="checkbox"/> M.D.
	<input type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Medication:

Class:
 Descr: Glucose
 Dose: see notes
 Strength:
 Route: PO (oral)
 Freq: As indicated

On Hand:
 Tab/Qty Dose:
 Reorder Qty:
 Drug Info

Info:
 Location:
 Dx:
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: BG < 70 1 tab
 BG < 50 2 tabs
 BG < 30
 if responsive 3 tabs
 if unresponsive give Glucagon+911

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 : #2 : #3 : #4 :

Print Cancel OK

Insulin Orders

Scheduled

Medication Order for Jones, Joan DOB: 5/14/1996 Grade: 11 Teacher: Ms. Wright

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active <input type="radio"/> Discontinued	<input checked="" type="radio"/> Scheduled <input type="radio"/> PRN <input type="radio"/> Admin At Home <input type="checkbox"/> Treatment	<input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Start: 09/01/2013 End: 06/30/2014 Expire: / /	<input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.

Medication:

Class: Insulins
 Descr: Humalog
 Dose: 1 unit per 15 carbs
 Strength:
 Route: via pump
 Freq: before snacks and meals

On Hand: 0 Tab/Qty Dose: 0 Reorder Qty: 0

Days of the Week: Su M Tu W Th F Sa

Administration Times: #1 10:00 #2 12:00 #3 13:45 #4 :

Info:
 Location:
 Dx:
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: also has PRN order

Buttons: Delete, Print, Cancel, OK

PRN

Medication Order for t, t ID: (none) DOB: 10/10/2011 Grade: -2PK Teacher: Mrs. Smith

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active <input type="radio"/> Discontinued	<input type="radio"/> Scheduled <input checked="" type="radio"/> PRN <input type="radio"/> Admin At Home <input type="checkbox"/> Treatment	<input checked="" type="radio"/> Prescription <input type="radio"/> Standing <input type="radio"/> Other	Start: 07/01/15 End: 06/30/16 Expire: / /	<input type="checkbox"/> Parent <input type="checkbox"/> M.D. Req. <input type="checkbox"/> M.D. <input type="checkbox"/> Self Admin.

Medication:

Class: * Insulin
 Descr: Humalog
 Dose: see notes
 Strength:
 Route: via insulin pump
 Freq: As necessary

On Hand: 0 Tab/Qty Dose: 0 Reorder Qty: 0

Days of the Week: Su M Tu W Th F Sa

Administration Times: #1 : #2 : #3 : #4 :

Info:
 Location:
 Medical Dx:
 ICD10 Code(s): Select...
 Billable Time: 0 Minutes POS: School
 Pharm.:
 Doctor:
 Notes: Bolus with 1 unit per 15 carbs

Buttons: Cancel, Shared, Print, OK

Insulin Pump Maintenance Orders

These orders are for the care of the pump, **NOT** the administration of insulin. Includes, checking alarms, readings, tubing etc.

Scheduled

Treatment Order for Jones, Joan

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input checked="" type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 09/01/2013	<input checked="" type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/2014	<input type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input checked="" type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment		Info
Class: *Treatments/procedures		Pump care only, includes checking tubes, alarms, messages. Does not include insulin administration.
Descr: Insulin Pump Maintenance		Location: [Dropdown]
Dose: n/a		Dx: [Dropdown]
Strength: [Dropdown]		Billable Time: 0 Minutes POS: School
Route: *N/A		Pharm.: [Dropdown]
Freq: [Dropdown]		Doctor: [Dropdown]
On Hand: [Input]	Tab/Qty Dose: [Input]	Reorder Qty: [Input]
Days of the Week:		Notes: [Text Area]
<input type="checkbox"/> Su <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Tu <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> Th <input checked="" type="checkbox"/> F <input type="checkbox"/> Sa		
Administration Times:		<input type="button" value="Print"/> <input type="button" value="Cancel"/> <input type="button" value="OK"/>
#1 12:00 #2 : #3 : #4 :		

PRN

Treatment order for Jones, Joan DOB: 5/14/1996 Grade: 11 Teacher: Ms. Wright

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 09/01/2013	<input checked="" type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input checked="" type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/2014	<input type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input checked="" type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment		Info
Class: *Treatments/procedures		Pump care only, includes checking tubes, alarms, messages. Does not include insulin administration.
Descr: Insulin Pump Maintenance		Location: [Dropdown]
Dose: n/a		Dx: [Dropdown]
Strength: [Dropdown]		Billable Time: 0 Minutes POS: School
Route: *N/A		Pharm.: [Dropdown]
Freq: As necessary		Doctor: [Dropdown]
On Hand: 0	Tab/Qty Dose: 0	Reorder Qty: 0
Days of the Week:		Notes: [Text Area]
<input type="checkbox"/> Su <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> Tu <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> Th <input checked="" type="checkbox"/> F <input type="checkbox"/> Sa		
Administration Times:		<input type="button" value="Print"/> <input type="button" value="Cancel"/> <input type="button" value="OK"/>
#1 : #2 : #3 : #4 :		

Ketones Orders

Scheduled

Treatment Order for Jones, Joan

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input checked="" type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 09/01/2013	<input type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/2014	<input type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: Ketones
 Dose: see notes
 Strength:
 Route: via urine dipstick
 Freq: 2 x per day

On Hand: Tab/Qty Dose: Reorder Qty:

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 09:30 #2 12:00 #3 : #4 :

Info: Do not use ketones field in Blood Glucose Test window unless ketones are checked during every Blood

Location:
 Dx:
 Billable Time: 0 Minutes POS: School

Pharm.:
 Doctor:
 Notes: Avoid physical activity when urine ketones are moderate to large. Contact parent.

Print Cancel OK

PRN

Treatment order for Jones, Joan DOB: 5/14/1996 Grade: 11 Teacher: Ms. Wright

Status:	Type:	Source:	Effective Dates:	Permissions:
<input checked="" type="radio"/> Active	<input type="radio"/> Scheduled	<input checked="" type="radio"/> Prescription	Start 09/01/2013	<input type="checkbox"/> Parent
<input type="radio"/> Discontinued	<input checked="" type="radio"/> PRN	<input type="radio"/> Standing	End 06/30/2014	<input type="checkbox"/> M.D. Req.
	<input type="radio"/> Admin At Home	<input type="radio"/> Other	Expire / /	<input type="checkbox"/> M.D.
	<input checked="" type="checkbox"/> Treatment			<input type="checkbox"/> Self Admin.

Treatment

Class: *Treatments/procedures
 Descr: Ketones
 Dose: see notes
 Strength:
 Route: via urine dipstick
 Freq: 2 x per day

On Hand: Tab/Qty Dose: Reorder Qty:

Days of the Week:
 Su M Tu W Th F Sa

Administration Times:
 #1 : #2 : #3 : #4 :

Info: Do not use ketones field in Blood Glucose Test window unless ketones are checked during every Blood

Location:
 Dx:
 Billable Time: 0 Minutes POS: School

Pharm.:
 Doctor:
 Notes: Avoid physical activity when urine ketones are moderate to large. Contact parent.

Print Cancel OK

Documenting Diabetic Care in the Medication Log and the Visit Log

Scheduled care: You will potentially see five different items in your medication log for each scheduled diabetic care visit: Blood Glucose Test, Carb/Insulin Calculation and Insulin Administration, Insulin Pump Care, Ketones.

Status	Sch. Time	Time Given	Student Name	Description	Dose	Nurse	Grade	Teacher
	09:30		Jones, Joan	Ketones	see notes		11	Ms. Wright
	10:00		Jones, Joan	Carbohydrate/Insulin Calculation	see notes		11	Ms. Wright
	10:00		Jones, Joan	Humalog	1 unit per 15 carbs		11	Ms. Wright
	11:00		Jones, Joan	Blood Glucose Test	see notes		11	Ms. Wright
	12:00		Jones, Joan	Insulin Pump Maintenance	n/a		11	Ms. Wright
	12:00		Jones, Joan	Ketones	see notes		11	Ms. Wright
	12:00		Jones, Joan	Humalog	1 unit per 15 carbs		11	Ms. Wright
	12:00		Jones, Joan	Carbohydrate/Insulin Calculation	see notes		11	Ms. Wright
	13:45		Jones, Joan	Carbohydrate/Insulin Calculation	see notes		11	Ms. Wright
	13:45		Jones, Joan	Humalog	1 unit per 15 carbs		11	Ms. Wright

Documenting a Scheduled Blood Glucose Test

When documenting a scheduled **blood glucose test** in the Medication Log, the Medication Administration window will appear (see below). Notice the blood glucose parameters and corresponding treatment you entered in the Medication Order Notes field show in the Med Notes window

Fill out the medication administration window paying special attention to the following fields:

Glucose Level – enter your blood glucose reading here

Ketones Level – use your separate ketone order to document ketone readings.

Comments - enter your treatment, if applicable, here unless it is an Insulin administration. Document that using the scheduled or PRN Insulin order. Enter finger stick or CGM to include test type on printed flow chart data.

Scheduled Carb/Insulin Calculation

Scheduled Carb/Insulin Calculation administrations (for a meal bolus) will appear daily on your Medication Log.

Fill out the medication administration window paying special attention to the following fields:

Dose: use this field to document the number of carbs the student will be consuming.

Comments: if desired, use this field to document the number of units you will be giving in the bolus.

Keep in mind; this is not where you document the insulin administration.

Scheduled Insulin Administration

Scheduled Insulin administrations (for a meal bolus) will appear daily on your Medication Log.

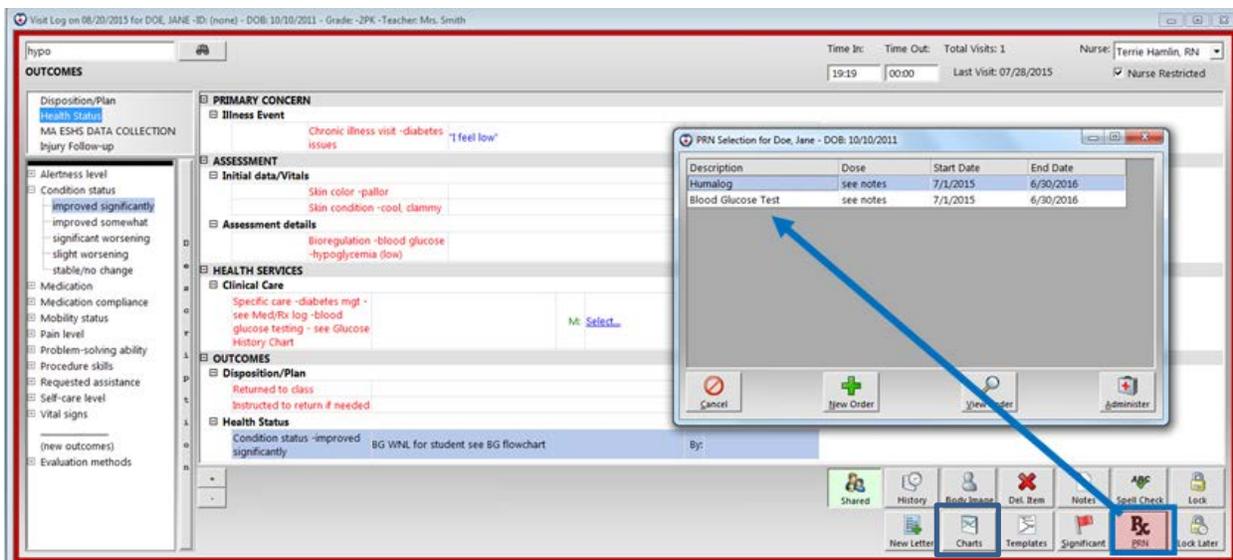
Fill out the medication administration window paying special attention to the following fields:

Dose: use this field to document the number of units administered for the number of carbs consumed.

Documenting PRN Diabetic Care:

All PRN Diabetic care, including PRN blood glucose checks, should be documented as a visit in the Visit Log so you are able to document the assessment of the student and rationale of the student receiving off schedule care.

- Using the PRN button in the visit log window will automatically document the administration in the Medication Log. To reflect the PRN administration in the visit as well, add a visit log item and optional note to your visit to reference the data in the medication log.
- The Charts button will let you view the student blood glucose flow chart.



Ways to print your student's data

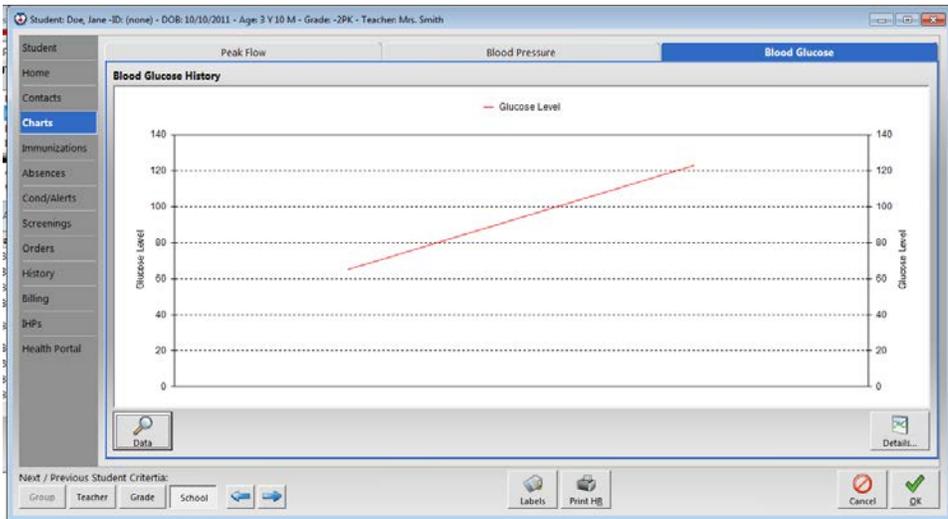
In the **Orders** section of the student's Health Record if you click on the **Current Year** button you will have a concise summary of each test, including the notes you made in the comments field of the medication administration window. This information is also available from the Medication Log by clicking once on the student's name and then clicking the History icon. Clicking on the Medication Name column header will sort the history by medication, so all Blood Glucose tests and Insulin administrations will be grouped together.

Date	Time	Description	Dose	Admin	Left	Status	Nurse	Note
08/20/2015	14:00	DM - Carbohydrate/Insulin Calculation	15 carb snack	0	0	Given	Terrie Hamlin, RN	1 unit bolus - see insulin order
08/20/2015	14:00	Blood Glucose Test	see notes	0	0	Given	Terrie Hamlin, RN	Glucose Level: 123;
08/20/2015	14:00	Humalog	1 unit for 15 carbs	0	0	Given	Terrie Hamlin, RN	
08/20/2015	11:00	DM - Carbohydrate/Insulin Calculation	30 carbs lunch	0	0	Given	Terrie Hamlin, RN	Bolus with 2 units - see insulin order
08/20/2015	11:00	Blood Glucose Test	see notes	0	0	Given	Terrie Hamlin, RN	Glucose Level: 65; 15 grams of fast acting carb given
08/20/2015	11:00	Humalog	2 units for 30 carbs	0	0	Given	Terrie Hamlin, RN	
08/20/2015	11:00	Humalog	2 units for 30 carbs	0	0	Given	Terrie Hamlin, RN	
08/20/2015	11:00	DM - Ketones	N/A	0	0	Given	Terrie Hamlin, RN	Negative
08/20/2015	11:00	DM - Insulin Pump Care	see notes	0	0	Given	Terrie Hamlin, RN	

In the **Charts** section of the student's Health Record, if you click on the Blood Glucose tab you can view your test data in a summary format.

Date	Time	Glucose	Ketones	Comments
08/20/2015	14:00	123		
08/20/2015	11:00	65		15 grams of fast acting carb given

To access a **cumulative graph** of all blood glucoses ever taken for the student, click the **Graph** icon in the lower left corner of the screen.



To access a **detailed graph**, click **Details**. This view can also be accessed from the Charts button in the Visit Detail screen. 16 entries can be viewed at once. To change the date range, use the scroll bar at the bottom of the screen to go back and forth in time. If you click on any entry in the graph, the details pertaining to the result will display in the bottom portion of the screen.

Print using the icon in the lower right. You can choose to print the current range, entire history, or a specified date range.

