Jerome Athlete Health Care
Management of Athletes with Diabetes
(JeromeAHC - 8/22/2025)

General Guidelines:

- **All Diabetic Athletes should either be using a CGM or have a personal glucose monitor and supplies with them at all practices and events.** Athletes using CGM, should identify their app to coaches and check their numbers frequently. It is recommended that CGM users have a backup glucose meter and strips available if CGM fails or is in error.
- **All Coaches and Diabetic Athletes should be aware of signs and symptoms of Hypoglycemia, Hyperglycemia and KetoAcidosis** and have appropriate supplies to treat these conditions at all practices and events.
- **All Diabetic Athletes should check their blood glucose level immediately prior to Activity, mid activity and post activity at a minimum.** If glucose number is outside the range of 70-150 mg/dl, the athlete should follow the appropriate protocol on the following page.
- **Diabetic Athletes with glucose readings above 250 mg/dl should be HELD from activity** until glucose level is showing evidence of returning to normal levels.
- **All Diabetic emergencies which occur during practice or events should be communicated with the Athletic Trainer and parents.** If the emergency happens at an away event, seek assistance from the Host Athletic Trainer if available, or call 911 if the appropriate protocols are not working.
- **All insulin dependent athletes should provide documentation on what type of insulin(s) they are using and should provide dosages.** Insulin pump users should provide their Carbohydrate to Insulin Ratio, Correction Factor and Basal rate information which should be included with their emergency medical information and carried with the appropriate coach.

The following protocols have been reviewed by the Jerome Athlete Health Care Team Physician for accuracy. Each Diabetic athlete may have an individualized plan to monitor their condition from their primary care physician. This individual plan should be on file with the Athlete Health Care Program and should be followed if it varies from this information. Coaches should be notified of any differences in plan and be advised on appropriate care for emergencies.

Hypoglycemia Protocol: The rule of 15

- If Glucose is 70 mg/dl or below:
    - Eat or Drink 15 grams of fast acting carbohydrate.
    - RECHECK your glucose in 15 minutes. If still < 70 mg/dl repeat 15 grams.
    - REPEAT STEPS every 15 minutes until glucose is > 70 mg/dl.
- The following contain 15 grams of Fast Acting Carbohydrate.
    - Glucose Tablets (3x5 Gram tablets, 4X4gram tablets - READ the LABEL)
    - 4oz. of Juice or Soda (not diet)
    - 8oz. nonfat or low fat milk
    - 1 tablespoon of table sugar or honey
    - 1 tube of glucose Gel (check Label)

*Primary sources of carbohydrates are the responsibility of the athlete to provide. The team Medical Kit should contain a backup source of Carbohydrate. The Athlete and Coach should always know where appropriate supplies are located during practice and events.

**Once you have a low glucose level, you are at risk for having another within the next hour. A meal or snack is advised within an hour after treating a low. Consult with your Health Care provider about your plan for eating meals and or snacks after treating low glucose levels.

***If an athlete has been prescribed a Glucogen Pen, it should be carried with them for all practices and competitions. The Coach should also receive training from the school nurse on the appropriate use of this instrument.

Hyperglycemia Protocol

- If glucose reading is above 250 mg/dl, follow these steps immediately:
    - Recheck your glucose to verify the number.
    - Take a correction bolus (pump users) or correction injection.
    - Recheck your glucose in 15-30 minutes to verify glucose is falling.
    - Recheck glucose in 30 minutes. If your glucose reading is not falling, do the following:
        - Take an injection of fast acting insulin with a syringe (not through a pump). Amount should be the same as a correction bolus.
        - Check for Ketones - call a health care provider if ketones are present.
        - Pump users should change infusion site (cannula), tubing and reservoir.
        - Drink Liquids that contain no calories every 30 minutes.
        - Recheck your glucose and ketones in 60 minutes. If glucose fails to come down, call your health care provider immediately.

DKA Protocol

- If nausea or vomiting is present, immediately check your glucose and ketones. If glucose is >250 mg/dl and/or ketones are present:
    - Call your healthcare provider.
    - Take an injection of fast acting insulin with a syringe. Dosage should be a correction bolus based on individual correction factors.
    - Drink liquids with no calories every 30 minutes. (8 oz)
    - Check your glucose and ketones in 1 hour.
    - Continue to take insulin as discussed with healthcare professionals.
    - If glucose is < 200 mg/dl and Ketones are still present, drink liquids with calories. Additional Insulin may be required. Contact your healthcare provider for specific guidelines for insulin doses when ketones are present.

*Pump users should change their entire infusion system (reservoir, infusion set, cannula) and troubleshoot their pump. If help is needed contact the pump manufacturer Help line.