

KAT-1 Diabetes Knowledge Scales

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Scale 1: Nutrition

1. If you include fat and protein in a meal that has carbohydrates, this:
 - A. Has no effect on the rise of glucose levels
 - B. Can cause blood glucose levels to rise more slowly after the meal**
 - C. Can cause blood glucose levels to rise more quickly after the meal
 - D. I'm not sure

2. The best way to determine the amount of carbohydrates in **prepackaged** food is:
 - A. Read the "Nutrition Facts" label on the package**
 - B. Make an educated guess
 - C. Call your doctor or dietician
 - D. Look up general information about the food on the internet
 - E. I'm not sure

3. A person with diabetes:
 - A. Should always avoid sweet food like candy, cookies and cake
 - B. Can eat sweet food in moderation if they count the carbohydrates in the food**
 - C. Should be able to eat whatever they want at any time
 - D. I'm not sure

4. Which of these statements about diabetes and diet is true?
 - A. People with diabetes should never eat sugar
 - B. People with diabetes can eat fast food any time
 - C. People with diabetes should eat a balanced diet containing fruits, vegetables, whole grains and healthy fats**
 - D. I'm not sure

5. Match the food with the approximate number of carbohydrates:

A. 1 small apple	a. 15 grams
B. 1 cup of milk	b. 11 grams
C. 1 grilled chicken breast	c. 0 grams
D. 1 cupcake with frosting	d. 40 grams

6. An important thing about foods labeled sugar-free is:

- A. They won't raise your blood sugar
- B. You don't need to take insulin before eating them
- C. They may still contain a lot of carbs**
- D. I'm not sure

This is a picture of a food label for a snack bag of high fiber cookies. Use the food label to answer the question below:

Nutrition Facts			
Serving Size 1 cup (228g)			
Servings per Container 2			
Amount Per Serving			
Calories 280		Calories from Fat 120	
		% Daily Value*	
Total Fat 13g			20%
Saturated Fat 5g			25%
Trans Fat 2g			
Cholesterol 2mg			10%
Sodium 660mg			28%
Total Carbohydrate 31g			10%
Dietary Fiber 3g			0%
Sugars 5g			
Protein 5g			
Vitamin A 4%	•	Vitamin C 2%	
Calcium 15%	•	Iron 4%	
<small>*Percent Daily Values are based on a 2,000-calorie diet. Your daily values may be higher or lower depending on your calorie needs.</small>			
	Calories:	2,000	2,500
Total Fat	Less than	65g	80g
Sat Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Total Carbohydrate		300g	375g
Fiber		25g	30g
Calories per gram:			
Fat 9	•	Carbohydrate 4	• Protein 4

7. If you ate the entire package of this food, how many carbs would you be eating?

- A. 13 grams
- B. 31 grams
- C. 62 grams**
- D. 280 grams
- E. I'm not sure

Scale 2: Activity

1. Exercise affects your glucose by:
 - A. Raising it
 - B. Lowering it
 - C. Exercise can raise and/or lower blood glucose**
 - D. I'm not sure

2. Before participation in sports, who should know how to treat high and low blood glucose?
 - A. Your good friend and teammate
 - B. Your coach
 - C. The athletic trainer
 - D. All of the above**
 - E. I'm not sure

3. Why does exercise cause lower blood glucose levels hours after exercising?
 - A. A lot of glucose is used up in exercise**
 - B. It makes you less sensitive to insulin
 - C. Your pancreas secretes extra insulin with exercise
 - D. I'm not sure

4. The best drink while exercising is
 - A. Gatorade or Powerade
 - B. G2
 - C. Water**
 - D. Juice box/Capri Sun
 - E. I'm not sure

5. Regular exercise will:
 - A. Increase your need for insulin (insulin resistance)
 - B. Decrease your need for insulin (insulin sensitivity)**
 - C. Not change your insulin requirement
 - D. Worsen blood glucose control
 - E. I'm not sure

6. Being active, for example walking or jogging for 60 minutes every day, will:
 - A. Keep your heart healthy
 - B. Increase muscle
 - C. Decrease fat
 - D. A and B

E. All of the above

F. I'm not sure

7. Intense exercise can cause low glucose levels (hypoglycemia)

A. During exercise

B. Two hours after exercise

C. At night when you are sleeping

D. All of the above

E. A and B

F. I'm not sure

8. You should always check your glucose level before exercise.

A. True

B. False

C. I'm not sure

9. If your glucose is greater than 300 mg/dL and you have trace ketones, it is ok to exercise.

A. True

B. False

C. I'm not sure

Scale 3: Supplies and Insurance

1. In an emergency, insulin and glucose test strips can be bought over the counter without a prescription for an affordable price (in Florida).
 - A. **True**
 - B. False
 - C. I'm not sure

2. The insurance premium is:
 - A. **The amount you pay every month to maintain your insurance policy**
 - B. The amount you pay when you have a doctor's visit and it covers your share of the cost of the visit
 - C. A fixed amount of money you have to pay each year before your insurance provider will cover the cost of doctor's visits and medications
 - D. I'm not sure

3. A co-pay is
 - A. The amount you pay every month to maintain your insurance policy
 - B. **The amount you pay when you have a doctor's visit and it covers your share of the cost of the visit**
 - C. A fixed amount of money you have to pay each year before your insurance provider will cover the cost of doctor's visits and medications
 - D. I'm not sure

4. A deductible is
 - A. The amount you pay every month to maintain your insurance policy
 - B. The amount you pay when you have a doctor's visit and it covers the cost of your share of the visit
 - C. **A fixed amount of money you have to pay each year before your insurance provider will cover the cost of doctor's visits and medications**
 - D. I'm not sure

5. Open Enrollment:
 - A. Is a period of time when you can enroll in a new insurance plan
 - B. Usually happens once per year
 - C. Is an opportunity to change insurance policies
 - D. **All of the above**
 - E. A and B
 - F. I'm not sure

6. All insurance plans cover the same services and medications.
- A. True
 - B. False**
 - C. I'm not sure
7. The insulin and test strips prescribed by the doctor will be automatically covered in my insurance plan:
- A. True
 - B. False**
 - C. I'm not sure
8. Some insurance policies require you to get some diabetes supplies (glucose test strips, insulin pump supplies, continuous glucose supplies) from a specific medical supply company:
- A. True**
 - B. False
 - C. I'm not sure
9. If the insulin or test strip that was prescribed is not a "preferred" brand by your insurance company, your doctor may have to complete more paperwork and there may be a delay in getting the medication.
- A. True**
 - B. False
 - C. I'm not sure

Scale 4: Hypoglycemia

1. Shaking, sleepiness, sweating, hunger and dizziness are signs of:
 - A. Hyperglycemia (High glucose)
 - B. Hypoglycemia (Low glucose)**
 - C. Ketones
 - D. Dehydration
 - E. I'm not sure

2. A low blood glucose is best treated with
 - A. Chocolate bar
 - B. Granola bar
 - C. Peanut butter
 - D. 4 oz of fruit juice**
 - E. I'm not sure

3. If your blood glucose is 60 mg/dL:
 - A. Treat with 10-15 grams of fast acting carbs**
 - B. Go ahead and eat your next meal early
 - C. Do nothing
 - D. Wait and check blood glucose in 30 minutes to see if blood glucose level is higher
 - E. I'm not sure

4. Symptoms of blood glucose level less than 40 mg/dl can include:
 - A. Appearing dazed and confused
 - B. Seizure
 - C. No symptoms
 - D. All of above**
 - E. I'm not sure

5. Emergency glucagon is given
 - A. For a blood glucose more than 250 with excess thirst and urination
 - B. For a blood glucose less than 60 with shakiness and sweating
 - C. For loss of consciousness with a very low glucose**
 - D. I'm not sure

6. If you have diabetes, when do you need to check glucose at 2 a.m.?
- A. When insulin doses, especially long-acting insulin, are being adjusted
 - B. Following strenuous exercise during the day
 - C. If severe or repeated hypoglycemia lows have occurred during the day
 - D. All of the above**
 - E. I'm not sure
7. If your blood glucose is 60 before taking your basal insulin (Lantus, Basaglar, Levemir, Tresiba or Toujeo), you should treat the low and
- A. Skip this dose of the basal insulin
 - B. Take half of the basal insulin
 - C. Take the full dose of the basal insulin**
 - D. I'm not sure
8. If you have a glucose level under 70 mg/dL during moderate to strenuous exercise, you should:
- A. Do nothing and continue to exercise
 - B. Eat 5-10 grams of rapid acting carbohydrate, wait 10 minutes, and check again
 - C. Eat 10-15 grams of rapid acting carbohydrate, wait 15 minutes to check, and eat more carbohydrate if you still feel low while you are waiting to check
 - D. Eat 10-15 grams of rapid acting carbohydrate, wait 15 minutes, and check again**
 - E. I'm not sure

Scale 5: Sick Days and Ketones

1. When are ketones made?
 - A. When the blood glucose gets too low
 - B. When a person with type 1 diabetes is sick
 - C. When a person with type 1 diabetes does not have enough insulin
 - D. When a person eats too much candy
 - E. B and C**
 - F. All of the above
 - G. I'm not sure

2. If a prescription or over the counter medicine is needed, a person with diabetes should:
 - A. Take the medication as prescribed/recommended
 - B. Ask the pharmacist how many carbohydrates are in each dose of the medicine
 - C. Check glucose levels more frequently, and call if they are high
 - D. All of the above**
 - E. I'm not sure

3. When children and teens with diabetes are sick with a cold, flu or infection and can't eat, they should
 - A. Take their scheduled basal insulin shots
 - B. Skip their insulin until they feel better
 - C. Get extra exercise instead of insulin
 - D. Call their diabetes care provider for advice
 - E. A and D**
 - F. I'm not sure

4. If a child/teen has moderate/large ketones, they should
 - A. Eat 30 grams of carbohydrates
 - B. Take extra fast acting insulin as directed by a diabetes care provider**
 - C. Take extra-long-acting insulin as directed by a diabetes care provider
 - D. All of the above
 - E. I'm not sure

5. How often should a child/teen with diabetes check for ketones **when they are sick.**
 - A. Every 4-6 hours, even if the blood glucose is not high
 - B. If their blood-glucose is > 240 mg/dL on a pump or > than 300 mg/dL on injections
 - C. If they are vomiting
 - D. A and C
 - E. All of the above**
 - F. I'm not sure

6. Diabetic ketoacidosis (DKA) is an emergency. Symptoms are
- A. **Stomach pain, vomiting, deep breathing, tiredness**
 - B. Frequent urination
 - C. Paleness, shakiness
 - D. Tingling in fingers and toes, shooting pain in legs
 - E. I'm not sure
7. If ketones are present, in addition to insulin you should
- A. Drink more juice
 - B. Eat more carbs
 - C. **Drink more water**
 - D. Eat fewer carbs
 - E. I'm not sure
8. If sick, when should you call your diabetes doctor?
- A. If ketones are moderate or large
 - B. If you can't eat and glucose is getting low
 - C. If you're vomiting
 - D. **All of the above**
 - E. I'm not sure
9. Diabetic ketoacidosis or DKA
- A. Is the high build up of acid in the blood from ketones
 - B. Causes deep breathing and fruity breath
 - C. Causes nausea and vomiting
 - D. **All of the above**
 - E. I'm not sure
10. Hyperglycemia is blood glucose levels below the target range.
- A. True
 - B. **False**
 - C. I'm not sure
11. Hypoglycemia is blood glucose levels below the target range.
- A. **True**
 - B. False
 - C. I'm not sure

Scale 6: Basic Management

- Hemoglobin A1C levels represent average blood glucose levels from:
 - The past month
 - The past 3 months**
 - The past week
 - The past 24 hours
 - I'm not sure
- Large air bubbles in the syringe/pen/tubing:
 - Are not a problem
 - Can damage red blood cells if they are injected
 - Could lower the amount of injected insulin by taking up space in the syringe/pen/tubing**
 - Are caused by bacterial contamination of the insulin
 - Can get into your blood vessels and go to your heart
 - I'm not sure
- How does insulin work?
 - Insulin lowers blood glucose by releasing it into the urine
 - Insulin lowers blood glucose by moving it from the blood into the cells**
 - Insulin raises blood glucose by keeping it from entering the cells so it stays in the blood
 - Insulin lowers the amount of glucose made by the stomach
 - I'm not sure
- What is true about Glucagon? Glucagon is ...
 - A hormone that raises the level of glucose in the blood
 - Can cause nausea and vomiting at high doses
 - Can be injected like insulin
 - All of the above**
 - I'm not sure
- Which of these is in the target range for fasting (first thing in the morning) glucose level
 - 55-70 mg/dl
 - 90-120mg/dl**
 - 150-200mg/dl
 - >200mg/dl
 - I'm not sure

6. Rapid acting insulin should be taken
- A. With no other type of insulin
 - B. Before meals and carbohydrate-containing snacks**
 - C. One time each day before bed
 - D. I'm not sure
7. If you are not using a CGM, it is important to check blood glucose levels a minimum of
- A. Twice a day
 - B. Three times a day
 - C. Four times a day**
 - D. I'm not sure
8. Injecting insulin into hard lumps under the skin:
- A. May cause highs and lows you can't predict
 - B. Is caused by rotating injection sites
 - C. Is not good because insulin won't absorb well
 - D. Both A and C**
 - E. All of the above
 - F. I'm not sure
9. Hemoglobin A1c of 9% means an average glucose of *** over the last 3 months?
- A. 150 mg/dL
 - B. 180 mg/dL
 - C. 210 mg/dL**
 - D. 240 mg/dL
 - E. 270 mg/dL
 - F. I'm not sure
10. Which is NOT a method that people with type 1 diabetes can get their insulin?
- A. Insulin pumps
 - B. Insulin syringes
 - C. Insulin pills**
 - D. Insulin pens
 - E. I'm not sure
11. An insulin injection with a syringe or pen should be:
- A. Pulled out quickly
 - B. Held in the body for 3 seconds
 - C. Held in the body for 10 seconds**
 - D. Held in the body for a minute

E. I'm not sure

12. *Frequent urination, thirst, and headache are often signs of*

A. Hyperglycemia

B. Hypoglycemia

C. Dehydration

D. I'm not sure

13. *You should wear a medical alert*

A. During the day but not at night

B. When you are traveling or going somewhere new

C. When you are going to your doctor's appointment

D. All of the time

E. I'm not sure

Scale 7: Insulin and Calculating Insulin Doses

- The main purpose of carbohydrate counting is to:
 - Help people with diabetes lose weight
 - Make sure that the same amount of carbohydrates are eaten at every meal
 - Help people with diabetes determine the amount of insulin they need with the meal**
 - None of the above
 - I'm not sure
- It is important for a person with diabetes to count carbohydrates in the foods they eat because:
 - Carbohydrates have the most immediate effect on blood glucose
 - Carbohydrates are bad for people with diabetes and should be eaten in very small amounts
 - Insulin dose depends on the amount of carbohydrates eaten
 - Both A and C**
 - I'm not sure
- Your insulin to carbohydrate ratio is 1 unit for every 10 grams of carbohydrate. You are eating 60 grams of carbohydrates. How many units of Humalog/Novolog/Apidra should you take for the amount of carbs you ate?
 - 60 units
 - 10 units
 - 6 units**
 - 1 unit
 - I'm not sure
- About how many carbs are in this meal (with a diet soda)?



- About 80 grams of carbs
- About 40 grams of carbs**

- C. About 2 grams of carbs
 - D. About 0 carbs
 - E. I'm not sure
5. Examples of 15 grams of fast acting carbohydrates to treat a low are
- A. One package of crackers how many crackers?
 - B. A small chocolate bar
 - C. 4 oz of fruit juice**
 - D. All of the above
 - E. I'm not sure
6. If insulin "leaks" from the injection site
- A. The needle is being pulled out too fast and may need to be left in longer**
 - B. The insulin dose is too high and needs to be lowered
 - C. The insulin is being injected into a lump under the skin and injection sites need to be rotated
 - D. it is normal and the insulin soaks back into the skin
 - E. I'm not sure
7. Your target Blood Glucose is 120 mg/dL. Your correction factor is 1:50. Your current blood glucose is 100. How many units of Humalog should you take?
- A. 50 units
 - B. 5 units
 - C. 1 unit
 - D. 0 units**
 - E. I'm not sure
8. Which are long acting basal insulins?
- A. Lantus, Levemir, Tresiba, Basaglar, and Toujeo**
 - B. Novolog, Humalog, and Apidra
 - C. Premix 70/30 and 75/25 insulins
 - D. I'm not sure
9. If a person with type 1 diabetes is taking Lantus/Basaglar/Tresiba/Toujeo/Levemir:
- A. They also need to give rapid-acting insulin with meals or snacks**
 - B. They need only to give insulin 1 time each day
 - C. They don't need to check their blood glucose as often
 - D. They will need to eat breakfast to cover the Lantus "peak"
 - E. I'm not sure

10. Humalog/Novolog/Apidra

- A. Should be taken with no other insulin
- B. Should be taken 15-30 minutes before eating**
- C. Should be taken immediately after eating the meal
- D. Should be taken 1 time each day
- E. I'm not sure

11. Your target blood glucose is 120 mg/dL. Your correction factor is 1:30. Your current blood glucose is 300 mg/dL. How many units of fast acting insulin should you take? (You can use a calculator to answer this question.)

- A. 15 units
- B. 10 units
- C. 6 units**
- D. 3 units
- E. I'm not sure

Scale 8: Complications

1. People with diabetes who smoke:
 - A. Will always have higher blood glucoses
 - B. Will always have lower blood glucoses
 - C. Are at increased risk for heart damage**
 - D. Do best when given inhaled insulin
 - E. I'm not sure

2. Proper care of diabetes can decrease the risk of:
 - A. Kidney problems
 - B. Eye problems
 - C. Heart problems
 - D. All of the above**
 - E. I'm not sure

3. High glucose levels, nausea, and abdominal pain can be symptoms of:
 - A. Diabetic Ketoacidosis
 - B. Hypoglycemia
 - C. Illness
 - D. A and C**
 - E. B and C
 - F. I'm not sure

4. All of the following increase the risk of damage to the eyes EXCEPT:
 - A. Smoking
 - B. Reading at night**
 - C. High blood pressure
 - D. Poor diabetes control
 - E. I'm not sure

5. Which tests are used to screen for kidney disease?
 - A. Urine test for protein
 - B. Cholesterol levels in the blood
 - C. Measuring blood pressure yearly
 - D. A and C**
 - E. All of the above
 - F. I'm not sure

6. Heart disease is a complication of diabetes. Other factors that increase this risk and need to be checked regularly are:

- A. High cholesterol levels
- B. High blood pressure
- C. Obesity
- D. Smoking
- E. Not exercising
- F. A, B, and C
- G. All of the above**
- H. I'm not sure

Scale 9: Diabetes Pathophysiology

1. If a person has an autoimmune condition like type 1 diabetes, it means their immune system does not work correctly and they are more likely to get colds and other common illnesses more often.
 - A. True
 - B. False**
 - C. I'm not sure

2. If a person has an autoimmune condition like type 1 diabetes, they may be at risk for some other autoimmune conditions like thyroid disease or celiac disease.
 - A. True**
 - B. False
 - C. I'm not sure

3. People with type 1 diabetes
 - A. Are born with it
 - B. Are genetically at risk, but do not get type 1 diabetes until something in the environment triggers the disease**
 - C. Almost always have another family member with type 1 diabetes
 - D. I'm not sure

4. Insulin is made by the
 - A. Lungs
 - B. Pancreas**
 - C. Liver
 - D. Kidneys
 - E. Stomach
 - F. I'm not sure

5. In type 1 diabetes, without insulin, glucose levels will
 - A. Stay about the same
 - B. Keep getting higher**
 - C. Keep getting lower
 - D. Fluctuate between high and low levels
 - E. I'm not sure

6. In type 1 diabetes, the immune system:
- A. **Attacks the pancreas**
 - B. Attacks the liver
 - C. Attacks the stomach
 - D. Attacks the kidneys
 - E. I'm not sure
7. Which of the following are associated with type 2 diabetes
- A. Obesity
 - B. Having a family member with diabetes
 - C. Being inactive
 - D. A and B
 - E. **All of the above**
 - F. I'm not sure
8. _____ unlocks the body's cells to let in glucose.
- A. Sugar
 - B. Carbohydrates
 - C. Water
 - D. **Insulin**
 - E. Glucagon
 - F. I'm not sure
9. Insulin is a hormone that
- A. Raises glucose levels
 - B. **Lowers glucose levels**
 - C. Makes you feel satisfied after meals
 - D. Helps you lose weight
 - E. I'm not sure
10. Glucagon is a hormone that
- A. **Raises glucose levels**
 - B. Lowers glucose levels
 - C. Makes you feel satisfied after meals
 - D. Helps you lose weight
 - E. I'm not sure

Scale 10: Diabetes Technology and Devices

1. The basal rate on an insulin pump refers to insulin delivery:
 - A. Given 20 minutes before a meal
 - B. Of small amounts of insulin delivered continuously over 24 hours**
 - C. That cannot be adjusted
 - D. That must be adjusted every week
 - E. I'm not sure

2. The type of insulin used in insulin pumps is
 - A. Humalog or Novolog or Apidra**
 - B. Lantus or Novolog or Basaglar
 - C. Humalog or NPH or Tresiba
 - D. NPH or Apidra or Lantus
 - E. I'm not sure

3. True or False: Insulin pump therapy totally eliminates the need to ever take insulin by injection.
 - A. True
 - B. False**
 - C. I'm not sure

4. Sites that can be used for insertion of the insulin pump's infusion set is:
 - A. the abdomen
 - B. the thighs
 - C. the buttocks
 - D. A and B
 - E. all of the above**
 - F. I'm not sure

5. The infusion set on an insulin pump should be changed
 - A. Daily
 - B. Every 2-3 days**
 - C. When it falls out
 - D. Every 4-6 days
 - E. I'm not sure

6. Bolus insulin in an insulin pump is
- A. given over 24 hours
 - B. used to correct a blood sugar above the blood glucose target
 - C. used to cover the carbs before a meal
 - D. A and B
 - E. B and C**
 - F. All of the above
 - G. I'm not sure
7. A person who wears an insulin pump and has a blood glucose of 240 mg/dl or more twice in a row must do what first?
- A. Must increase his water intake
 - B. Cannot eat until the blood sugar is within target goal
 - C. Check his/her urine or blood for ketones**
 - D. Must run around the track or do other aerobic exercise
 - E. I'm not sure
8. A continuous glucose monitor:
- A. Measures glucose from the blood, the same as a glucose meter does
 - B. Measures glucose from the fluid between the cells**
 - C. Measures glucose from the skin
 - D. I'm not sure
9. If the number on your glucose meter and continuous glucose monitor are not the same:
- A. That is to be expected because they measure glucose from different sites**
 - B. That is not a concern because there is a lag in glucose readings with a continuous glucose monitor
 - C. That is a concern because the numbers should be the same
 - D. I'm not sure
10. Your insurance company will usually approve a new insulin pump
- A. Any time a better device becomes available
 - B. Every 2 years
 - C. Every 4 years**
 - D. I'm not sure

11. Depending on your device, you can upload data from your meter, continuous glucose monitor, and insulin pump

- A. At the doctor's office
- B. At home
- C. Using an App on your phone
- D. A and B
- E. All of the above**
- F. I'm not sure

12. To benefit from using the device, a continuous glucose monitor should be worn

- A. As needed to detect trends in glucose levels
- B. At least 3 days per week
- C. At least 6 days per week**
- D. I'm not sure

13. If you plan to remove your insulin pump for exercise, when should you reconnect?

- A. In 1 hour**
- B. In 2 hours
- C. In 3 hours
- D. If you have hyperglycemia
- E. Depends on if you bolused before exercise
- F. I'm not sure

14. Match the device with the right description.

A. Insulin Pump	A small device that delivers insulin through a small tube inserted into the skin
B. Continuous Glucose Monitor	Measures glucose in real time using a sensor inserted under the skin, and alerts the user when glucose is too high or low
C. Artificial Pancreas	A device that uses an insulin pump and sensor (CGM) to partially automate insulin delivery
D. Flash Glucose Monitoring	Measures glucose in real time using a sensor inserted under the skin, no alerts are provided, fingersticks/blood glucose meter is not required
	e. I'm not sure

15. An insulin pump is implanted.

- A. True
- B. False**
- C. I'm not sure

Scale 11: Diabetes at School

1. A Diabetes Medical Management Plan (DMMP):

- A. Describes the actions a school will take to make sure the student with diabetes is safe, is treated fairly, and has the same access to education as other students
- B. The “doctor’s orders” provided by the child’s diabetes care team**
- C. Developed by the school nurse in partnership with the family and healthcare team
- D. Plans on how to treat hypoglycemia, ketones, and what to do in an emergency
- E. I’m not sure

2. An Individualized Healthcare Plan:

- A. Describes the actions a school will take to make sure the student with diabetes is safe, is treated fairly, and has the same access to education as other students
- B. The “doctor’s orders” provided by the child’s diabetes care team
- C. Developed by the school nurse in partnership with the family and healthcare team**
- D. Plans on how to treat hypoglycemia, ketones, and what to do in an emergency
- E. I’m not sure

3. An Emergency Care Plan

- A. Describes the actions a school will take to make sure the student with diabetes is safe, is treated fairly, and has the same access to education as other students
- B. The “doctor’s orders” provided by the child’s diabetes care team
- C. Developed by the school nurse in partnership with the family and healthcare team
- D. Plan developed by the school nurse related to how to treat hypoglycemia, ketones, and what to do in an emergency**
- E. I’m not sure

4. A 504 Plan:

- A. Describes the actions a school will take to make sure the student with diabetes is safe, is treated fairly, and has the same access to education as other students**
- B. The “doctor’s orders” provided by the child’s diabetes care team
- C. Developed by the school nurse in partnership with the family and healthcare team
- D. Plans on how to treat hypoglycemia, ketones, and what to do in an emergency
- E. I’m not sure

5. Some common things in a student’s 504 plan include:

- A. Multiple staff members are trained to check glucose levels and administer insulin and/or glucagon
- B. All school staff who interact with the student receive basic training
- C. Capable students are allowed to carry their diabetes supplies at all times

- D. Full participation in sports, activities, and field trips
- E. Permission to eat and go to the bathroom when necessary
- F. A, B, and C
- G. All of the above**
- H. I'm not sure

6. Your child's school will tell you if your child needs a 504 plan because not all students with type 1 diabetes are eligible.

- A. True
- B. False**
- C. I'm not sure

7. According to state and federal laws, a child with diabetes can participate school field trips and after school activities without a parent also attending as a chaperone.

- A. True**
- B. False
- C. I'm not sure

8. Who should provide diabetes supplies for the child to use at school?

- A. The diabetes care team
- B. The parent/child**
- C. The school nurse
- D. The social worker
- E. I'm not sure