

Guidance on the Administration of Glucagon in  
North Dakota Public Schools

1. Many students with insulin-dependent diabetes attend North Dakota public schools and participate in school-related activities.
2. Most students with insulin-dependent diabetes have episodes of low blood glucose (hypoglycemia). Most episodes of hypoglycemia involve mild to moderate symptoms. Most students can self-administer treatment for mild to moderate hypoglycemia.
3. Some episodes of hypoglycemia are severe. Symptoms of severe hypoglycemia may include unconsciousness, seizures, stupor, inability to swallow, and persistent resistance to taking food, drinks, glucose tablets, or gels. A student in severe hypoglycemia cannot self-administer treatment.
4. Immediate treatment of severe hypoglycemia is extremely important because a delay in treatment could cause neurological injury or death. Immediate treatment would minimize short-term consequences of severe hypoglycemia and might reduce the likelihood of long-term complications.
5. A student's physician orders the appropriate treatment of severe hypoglycemia for that student. If a student's physician orders glucagon as the treatment for severe hypoglycemia for a student, the school must make glucagon available. Neither the school board nor a school nurse can ignore or override a physician's medical treatment orders.
6. Glucagon is widely recognized as the appropriate treatment for severe hypoglycemia outside a medical facility. Glucagon can be made readily available in schools if medically appropriate for a specific student with diabetes.
7. Severe hypoglycemia is always a medical emergency. A North Dakota law exempts a person from the Nurse Practices Act (including the misdemeanor provisions) when that person is acting to provide help to a person in an emergency,
8. A person who is not medically credentialed can lawfully administer glucagon by injection to a student in school or at school-related activities in conformity with a physician's orders.