

Student Contract

_____ I have reviewed my diabetes health care plan with the school nurse.

_____ I have reviewed the importance of carrying treatment supplies at all times.

_____ I have reviewed the bloodborne pathogen concerns related to testing.

- Carry testing supplies (alcohol swabs, contained lancets, glucose monitor, testing strips and tissues)
- Testing can be completed at a desk.
- Clean finger to be tested with alcohol swab/soap & water.
- Use self contained lancets to obtain blood sample.
- Apply blood to test strip and use either alcohol swab or tissue to wipe blood from finger.
- Used test strips will be contained with testing equipment pouch until they can be exposed of properly.

_____ I will not carry ***exposed sharps*** at any time.

_____ I will dispose of my sharps properly.

_____ I will keep my diabetic supplies in a secure location; backpack, nurses' office, locker or purse.

_____ I will not allow peers to touch/tamper with my diabetic supplies.

_____ I will test before driving during drivers ed

Student signature: _____

Certified School Nurse Signature: _____

Date: _____