

Newly Diagnosed Child with Type 1 Diabetes: Referral into the Ambulatory Care Experience (ACE) Service from the Diabetes Specialist Team



A CYP 3 years old and over who has been newly diagnosed with Type 1 DM AND deemed ready to start essential education and training by the diabetes team including the named diabetes consultant on-call.



Call Children's ACE service on 01274 273354. Be ready to convey information regarding admission including history, current clinical condition, blood glucose management during admission and estimated date of discharge. Highlight any language, communication, or safeguarding issues that have arisen during the admission.



Is there capacity in ACE service?



Yes



Ensure parent/guardian has 1) received the newly diagnosed diabetes pack with all necessary information/equipment and 2) consented to share information with ACE



Formulate joint plan between Diabetes Consultant/ Diabetes team and ACE team to facilitate safe and timely discharge



No -> usual care on ward and with diabetes team

	Appropriate referral parameters
Age	>3years
Respiratory rate	3yr-7yr-20 to 30/min 8yr-11yr-15 to 25/min 12yr-16yr-12 to 24/min
Heart rate	3yr-4yr-80-135b/min 5yr-7yr-80 to 130b/min 8yr-11yr-70 to 130b/min 12yr-16yr-60 to 115b/min
Conscious level	GCS15/15
Blood ketone	<0.6mmol/litre
Blood gas	Ph>7.35, Bicarbonate>15

Additional input given in hospital or at home visit by ACE team

- Complete any outstanding initial nurse/ dietetic training support.
- Supporting injection therapy, blood glucose monitoring and accurate carbohydrate counting at meal times.
- Provide daily updates for the consultant diabetologist on call and the diabetes nurse/ dietitian at prearranged time

Exclusions

- Children less than 3years of age
- Children already known to have Type 1 diabetes mellitus
- Consider non Type 1 DM if optic atrophy, retinitis pigmentosa, deafness, or another systemic illness or syndrome
- Children with comorbidities that can make control more unpredictable e.g. eating disorders or who are receiving medication treatments that can effect glucose control e.g. corticosteroids
- Family where there are concerns about adherence with diabetes advice.
- Family are unable to guarantee telephone contact.
- if there are social or emotional factors that would make home-based management inappropriate, or if they live a long distance from the hospital