



Diabetes Questionnaire -Participant Section

You may complete your responses electronically. Type into the fields then digitally sign and email back.

Student Name: _____ **Course #:** _____

You indicated you have Diabetes. Please help us understand your condition by answering these questions. Conditions on Outward Bound® that could affect your Diabetes include: vigorous exercise, a change in diet, or other environmental factors that may affect your metabolism. You need to be in good physical fitness, have a stabilized condition and bring appropriate medications in order to participate. In a wilderness setting, insulin may be difficult to keep consistently cool. The information below is provided for our records in the event of an emergency. Please discuss your diabetes with your physician and with your Course Advisor so you can decide if you can participate safely.

1. Date (Year) first diagnosed with diabetes? _____
2. Please identify the type of diabetes: Type I (Insulin Dependent) or Type II (Non-insulin Dependent)
3. Is your diabetes controlled with insulin? Yes / No What is the dosage? _____
 If No, is an oral hypoglycemic drug used? Yes / No
 Which drug and at what dose? _____
4. What brand of insulin is used? _____
5. How often do you require insulin? _____
6. How is the insulin administered? Injector Syringe Pump Other _____
7. Are there any special conditions required for you to administer the insulin? Yes / No
 Please provide details if special conditions are required:
8. Are you able to adjust insulin dose with a change in activity level? Yes / No
 Please provide specific examples of times when you have done this in the past and include the last time such an adjustment was made.
9. Do you follow a specific diet? Yes / No
 Please list dietary requirements, identifying food groups and specific amounts from each group required as well as specific food items required, if any. Identify frequency of meals and snacks.

Meals: _____

Snacks: _____

Diabetes Questionnaire -Participant Section (*continued*)

10. Are there any food restrictions? Yes / No

Please provide details:

11. Have you had any experience with camps or wilderness expeditions? Yes / No

a. Have there been insulin reactions in this setting? Yes / No

b. Seizures? Yes / No

c. Please provide details if these experiences occurred.

Insulin Dependent Diabetic Student Statement of Understanding

I wish to enroll my child on an Outward Bound wilderness course. My child is a diabetic. Outward Bound has taken steps to assess their ability to participate in the course. However, I understand and acknowledge that I, in consultation with my child's physician, have the ultimate responsibility for determining whether they are capable of participating safely.

My child's physician and I understand the activities in which they will be engaging and the environment. The physician and I believe that they are capable of managing the diabetes on the course by themselves, that altitude will not impose additional hazards, and that the insulin can be kept cool despite potential high temperatures.

My child will bring glucagon. I ask that the Outward Bound staff administer glucagon to them in the event that they lose consciousness or do not wake up in the morning and the staff believe, in their best judgment, they would benefit from the glucagon. While Outward Bound staff have some education and training about diabetes, I understand they are not medical professionals trained to diagnose or treat diabetes and are not certified to administer glucagon.

I also understand that the course may be hours or days away from emergency medical care and that while Outward Bound carries communication devices on courses, Outward Bound may not be able to communicate with anyone in an emergency due to limitations on the use of communication devices in the wilderness. Outward Bound will attempt to provide additional information about diabetes to the staff working my child's course but I understand and assume any and all risks, hazards, injuries, and illness that might arise from having my diabetic child on this wilderness course, whether inherent or not, and whether explicitly mentioned here or not.

12. Who filled out this questionnaire? The applicant Parent/Guardian Other: _____

I have carefully read, understand and agree to all the information above.

Applicant Signature

Date

Parent/Guardian Signature

Date

(Required if applicant is under the age of 18 Or if applicant is a resident of Alabama and is under the age of 19 OR is a resident of Mississippi and is under the age of 21.)

NOTE If insulin is required, please bring double dosages and additional syringes. If your course involves temperature extremes, please review temperature control measures. Insulin should not be above 80°F for long periods of time and should not be allowed to freeze.

Please bring adequate testing supplies and an abundant supply of reaction treatments, including two bottles of glucose strips, foil-wrapped ketosticks, two glucagons kits and two blood glucose meters (one as a backup). Humidity may affect your blood glucose meter, so visual strips should also be brought either as a backup measure or in place of your meter.

Winter Camping Courses: Insulin can be taped to an inner layer of clothing, perhaps under the armpit, to prevent from freezing or you may wish to consider a pouch with a strap that can be secured to your body.