When you arrive in a country you do not know and you do not understand the language:

What may be the relevant questions?

ENGLISH FOR FAMILIES

1. Where is the local diabetes physician, who might be able to manage a child with diabetes?
2. Where is the nearest hospital?
3. My child is
   a. thirstier than usual
   b. urinating (going to the toilet to pee) more than usual
   c. wetting then bed
   d. very hungry
   e. super tired all the time
   f. feeling ill

4. My child has:
   a. persistent headaches
   b. unexplained weight loss
   c. nightmares
   d. fever
   e. persistent cough
   f. diarrhoea or stomach aches and pains

5. My child uses the following insulin(s): (These insulins may be known by another name in different countries)
   a. Actrapid
   b. Novorapid
   c. Insulatard
   d. Levemir
   e. Humalog
   f. Lantus
   g. Apidra
   h. Mixed rapid and NPH
   i. Other

6. I can show the insulin we use
7. My child has missed one or more insulin doses in the past 2 days
   Yes/No

8. My child injects
   a. 2 times per day
   b. 3 or more times a day
   c. Uses an insulin pump
   d. Uses a disposable pen
   e. Uses a cartridge
   f. Uses syringes

9. The dose of insulin
   a. Is the same every day
   b. Is adjusted depending on the food, activity or sugar levels

10. My child has a blood glucose meter and checks his blood sugar/glucose
    a. Once a day
    b. Before each meal
    c. During the night
    d. Before each meal and during the night
    e. Less than daily (too expensive)

11. My child’s blood sugar/glucose recently has between ___ and ___mg/dl
    (or ___ and ___ mmol/L) (mg/dl = 18 x mmol/l)

12. My child checks urine
    a. 1x/ day.
    b. Never

13. My child has a kidney problem
    a. Yes
    b. No

14. My child has an eye problem
    a. Yes
    b. No

15. My child takes medication for the thyroid –
    a. Yes/
    b. No
    If yes, I have enough medication with me for a week/month (circle one)

16. My child takes hydrocortisone for the adrenals –
    a. Yes/
    b. No
If yes, I have enough medication with me for a week/month (circle one)

17. My child has a low blood sugar / glucose (hypo – below …..3.9 mmol/L or 70 mg/dL)

18. My child has a very high blood sugar/glucose (above 12 mmol/L or 220 mg/dL) or would you say 15mmol/L OR 270 mg/dL?

19. My child needs to see a doctor immediately – I am worried about him/her

20. I have enough food to feed my child with diabetes for……days

21. I have enough insulin and testing strips for my child for…..days