



## University Health Services

Dear Student,

University Health Services has developed a program designed to assist students with diabetes mellitus in maintaining the highest level of health and productivity during the time they are on campus and beyond. The program consists of clinical and laboratory services, health education, and peer support.

We believe students with diabetes mellitus should be a part of a comprehensive system of clinical and lifestyle management supported by a partnership between the student and a health care professional, whether at home or at school.

Peer support for students with diabetes has been a significant factor in facilitating and maintaining a healthy adjustment to college life. We invite you to express your interest in participating in this activity. Please complete and return the attached form.

Please consider joining us in creating an individualized approach to assuring your good health while you are at Princeton and in the years ahead.

Sincerely,

*Janet Neglia, M.D.*

Janet Neglia, M.D.  
Director of Medical Services



## University Health Services

Dear Student,

Important guidelines issued by the Occupational Safety and Health Administration (OSHA) mandate protecting members of the Princeton University community, student and employees, from infectious agents transmitted by blood. Exposure may occur in many ways, including needle sticks.

It is imperative that syringes and needles be disposed of properly so that custodians emptying waste containers, and others, are not inadvertently injured.

Please come to UHS at the McCosh Health Center as soon as you arrive on campus and request a disposable container that meets these federal mandates. When this container becomes full you may return it to us and it will be secured and disposed of according to OSHA guidelines.

We thank you for your cooperation. If you have any questions, please call (609) 258-3129 during regular business hours.

Sincerely,

*Janet Neglia, M.D*

Janet Neglia, M.D.  
Director of Medical Services



**DIABETES MELLITUS MAINTENANCE INFORMATION FORM**

NAME \_\_\_\_\_ CLASS \_\_\_\_\_

1. Diabetes self-care skills

Skilled Need Help

- |       |       |   |
|-------|-------|---|
| _____ | _____ | 1. Home glucose monitoring and record keeping |
| _____ | _____ | 2. Insulin dose adjustment                    |
| _____ | _____ | 3. "Sick day" insulin and diet management     |
| _____ | _____ | 4. Hypoglycemic reaction management           |
| _____ | _____ | 5. Use of glucagon                            |
| _____ | _____ | 6. Diet management                            |
| _____ | _____ | 7. Exercise management                        |
| _____ | _____ | 8. Safe syringe and needle disposal           |
| _____ | _____ | 9. Special challenges of college life         |
| _____ | _____ | 10. Other _____                               |

2. Source of on-going monitoring and management

\_\_\_\_\_ I will continue to use my present source of on-going monitoring and care.  
Name/Address/Telephone number of health care provider:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note: Please have your health care provider send us a summary letter of your current management plans, and review your plan annually.

\_\_\_\_\_ I would like to transfer on-going health care management to University Health Services (UHS). (We will contact you when you arrive at Princeton University for the new semester.)

\_\_\_\_\_ I would like to meet with the Director of Medical Services at UHS prior to the beginning of the semester.

\_\_\_\_\_ I am interested in participating in a peer support group for students with diabetes.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please complete and return to Janet Neglia, M.D., Director of Medical Services at University Health Services.