



MiniMed™ insulin delivery systems

School employee guide

A guide to understanding the basics when supporting a child on insulin therapy.



Introduction and diabetes technology

My name is _____. My child _____
was diagnosed with type 1 diabetes _____ years ago.

We use the following devices to help manage their diabetes:

☐

Insulin pump

The pump delivers insulin to my child through a small tube attached to their body.

☐

Smartphone and/or watch

Mobile apps allow my child and I to view their sugar and insulin levels in real time.

☐

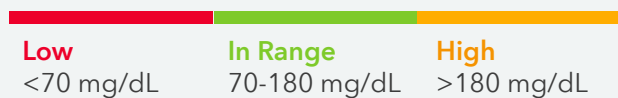
Continuous glucose monitor (CGM)

The CGM tracks my child's sugar levels and sends readings to the pump every 5 minutes.

Blood glucose (BG) meter: The meter allows my child to test their glucose, if needed.

Checking sugar levels with a blood glucose (BG) meter

If my child expresses or is displaying symptoms that are different than their CGM reading, please test their glucose using a blood glucose meter.



To check a BG level using a BG meter

- 1 Wash hands
- 2 Insert test strip into meter
- 3 Draw blood from a fingertip using lancing device
- 4 Apply blood to test strip and wait for reading
- 5 Check glucose levels against the range to the left

Managing low glucose

My child could experience a **low glucose (hypoglycemia)** while at school.

For children living with diabetes, glucose is considered **low** when it falls **below 70 mg/dL**.

Low	In Range	High
<70 mg/dL	70-180 mg/dL	>180 mg/dL

Common symptoms

Some common signs of a low glucose are:



LETHARGY



DIZZINESS



COLD SWEATS



CONFUSION



INTENSE HUNGER

My child's symptoms

I've also identified these symptoms as indicating a low glucose for my child:

Low glucose can be very dangerous if untreated.

For **low glucose (hypoglycemia) below 70 mg/dL**, please treat my child with fast-acting carbs as outlined below and then notify the school nurse.

- | | |
|---|--|
| ☐ My child has a CGM to monitor their sugar levels and is using SmartGuard™ technology. <ol style="list-style-type: none">1. Have my child consume 5-10 g of fast-acting carbs* (for example, 2 oz. juice or 2 glucose tabs).2. Wait 15 minutes and check my child's glucose again.3. If still below 70 mg/dL, repeat steps above every 15 minutes until they're back in range. | ☐ My child uses a BG meter to check their sugar levels and/or is using Manual Mode. <ol style="list-style-type: none">1. Have my child consume 15 g of fast-acting carbs (for example, 4 oz. juice or 3-4 glucose tabs).2. Wait 15 minutes and check my child's glucose again.3. If still below 70 mg/dL, repeat steps above every 15 minutes until they're back in range. |
|---|--|

***Note:** SmartGuard™ technology delivers less insulin before and during lows, so my child will need less sugar when treating lows.



If my child experiences an extreme low and is unable to eat or drink, glucagon can be given by injection or by using nasal spray. Always connect with the school nurse if this occurs.

Managing high glucose

Because my child does not produce insulin, they can experience **high glucose (hyperglycemia)** while at school.

For children living with diabetes, glucose is considered **high** when it rises **above 180 mg/dL**.

Low <70 mg/dL	In Range 70-180 mg/dL	High >180 mg/dL
-------------------------	---------------------------------	---------------------------

Common symptoms

Some common signs of a low glucose are:



EXCESSIVE THIRST



FREQUENT URINATION



NAUSEA



FATIGUE



HEADACHE

My child's symptoms

I've also identified these symptoms as indicating a low glucose for my child:

Whenever my child eats a snack or meal, their glucose may rise. Insulin should be given **15 minutes before** eating to help keep their sugar levels in range. Giving insulin for food is often referred to as a "bolus."

For step-by-step instructions for how to bolus on a MiniMed insulin delivery system, refer to the system's School Nurse Guide:

- MiniMed 780G system page 7
- MiniMed Flex system page 8

High glucose is most common after meals and can be dangerous if left untreated. If my child is experiencing any unexplained sugar levels **above 180 mg/dL**, please connect with the school nurse to determine what is needed to correct the **high glucose**.



Additional instructions for my child:

Exercise

Physical activity can also impact my child's sugar levels. While everyone is different, aerobic activities (such as running or cycling) are more likely to lead to a **low glucose**, and anaerobic activities (such as weightlifting) are more likely to lead to a **high glucose**.

I've found this activity _____
_____ (noun) makes my
child go _____
_____ (adjective).



Before starting any physical activity (such as recess, sports, or gym class), please work with my child to either:

☐ Enable their Temp Target

This changes my child's SmartGuard™ target from 100, 110, or 120 mg/dL to **150 mg/dL** for the duration of the activity.

It's best to start the **Temp Target** 1-2 hours before beginning the activity and stop it immediately afterward.

For step-by-step instructions on how to set and cancel a Temp Target, refer to the system's School Nurse Guide:

- MiniMed Flex system page 10
- MiniMed 780G system page 10

☐ Disconnect from their pump

My child removes their pump and will not receive any insulin during physical activity.

When my child is disconnected from their pump for physical activity, it's important to **Suspend All Delivery** to make sure the pump doesn't continue giving insulin. This setting should be used any time my child needs to be disconnected from their pump – even if it's for a short period of time.

For step-by-step instructions on how to suspend insulin delivery, refer to the system's School Nurse Guide:

- MiniMed Flex system page 9
- MiniMed 780G system page 11



Please note:

While the insulin delivery is suspended, the pump will beep and/or vibrate (depending on the audio settings) every 15 minutes to indicate insulin is not being delivered.

If you're unsure what to do in any situation, please connect with the school nurse. If you have any questions, you can call / text me at _____ (number).

If you cannot reach me, please contact _____ (name & relation) at _____ (number) or dial 911.

QR CODE
PLACEHOLDER

MiniMed 780G system
School Nurse Guide

QR CODE
PLACEHOLDER

Flex School Nurse Guide

Important safety information

MINIMED FLEX™ SYSTEM WITH SMARTGUARD™ TECHNOLOGY WITH SIMPLERA SYNC™ SENSOR AND INSTINCT SENSOR

The MiniMed Flex™ system is intended for the continuous delivery of basal insulin at selectable rates, and the administration of insulin boluses at selectable rates for the management of type 1 diabetes mellitus in persons 7 years of age and older, and of type 2 diabetes mellitus in persons 18 years of age and older requiring insulin. The system is also intended to continuously monitor glucose values in the fluid under the skin.

The MiniMed Flex™ system includes SmartGuard™ technology, which can be programmed to automatically adjust insulin delivery based on continuous glucose monitoring (CGM) sensor glucose values and can suspend delivery of insulin when the SG value falls below or is predicted to fall below predefined threshold values. The system is intended for use with connected sensors, including the Simplera Sync™ sensor and integrated continuous glucose monitors, including the Instinct sensor, each of which has different wear-time, form factor, insertion site, and other distinguishing characteristics that relate to sensor performance. Consult the appropriate sensor user guide when using the system. Discuss treatment decisions with your HCP.

WARNING: Do not use the SmartGuard™ feature for people who require less than 8 units or more than 250 units of total daily insulin per day. A total daily dose of at least 8 units, but no more than 250 units, is required to operate in the SmartGuard™ feature.

WARNING: Do not use the MiniMed™ Flex system until appropriate training has been received from a healthcare professional. Training is essential to ensure the safe use of the MiniMed™ Flex system.

WARNING: Do not use SG values to make treatment decisions, including delivering a bolus, while the pump is in Manual Mode. When the SmartGuard™ feature is active and you are no longer in Manual Mode, the pump uses an SG value, when available, to calculate a bolus amount. However, if your symptoms do not match the SG value, use a blood glucose (BG) meter to confirm the SG value. Failure to confirm glucose levels when your symptoms do not match the SG value can result in the infusion of too much or too little insulin, which may cause hypoglycemia or hyperglycemia.

Pump therapy is not recommended for people whose vision or hearing does not allow for the recognition of pump signals, alerts, or alarms. The safety of the MiniMed Flex™ system has not been studied in pregnant women or in persons using other anti-hyperglycemic therapies that do not include insulin. For complete details of the system, including user guides and important safety information such as indications, contraindications, warnings and precautions associated with system and its components, see <https://bit.ly/MiniMedRisks>.

MINIMED™ 780G SYSTEM WITH SMARTGUARD™ TECHNOLOGY WITH INSTINCT SENSOR, SIMPLERA(TM) SYNC SENSOR, AND GUARDIAN (TM) 4 SENSOR

The MiniMed™ 780G system is intended for continuous delivery of basal insulin at selectable rates, and the administration of insulin boluses at selectable amounts for the management of type 1 diabetes mellitus in persons 7 years of age and older, and of type 2 diabetes mellitus in persons 18 years of age and older requiring insulin. The system is also intended to continuously monitor glucose values in fluid under the skin. The MiniMed™ 780G System includes SmartGuard™ technology, which can be programmed to automatically adjust insulin delivery based on the continuous glucose monitoring (CGM) sensor glucose values and can suspend delivery of insulin when the sensor glucose (SG) value falls below or is predicted to fall below predefined threshold values.

The Instinct sensor can be used one time and has a life up to 15 days. The Instinct sensor is not intended to be used directly to make therapy adjustments while the MiniMed™ 780G system is operating in manual mode. All therapy adjustments in Manual mode should be based on measurements obtained using a blood glucose meter and not on values provided by the Instinct sensor. The Instinct sensor has been studied and is approved for use in patients ages 7 years and older and in the arm insertion site only. Only apply the sensor to the back of your upper arm. The sensor may not work properly in other areas.

The Medtronic MiniMed™ 780G System consists of the following devices: MiniMed™ 780G Insulin Pump and the Instinct sensor. The system requires a prescription from a healthcare professional.

WARNING: Do not use the SmartGuard™ feature for people who require less than 8 units or more than 250 units of total daily insulin per day. A total daily dose of at least 8 units, but no more than 250 units, is required to operate in the SmartGuard™ feature.

WARNING: Do not use the MiniMed™ 780G system until appropriate training has been received from a healthcare professional. Training is essential to ensure the safe use of the MiniMed™ 780G system.

WARNING: Do not use SG values to make treatment decisions, including delivering a bolus, while the pump is in Manual Mode. When the SmartGuard™ feature is active and you are no longer in Manual Mode, the pump uses an SG value, when available, to calculate a bolus amount. However, if your symptoms do not match the SG value, use a blood glucose (BG) meter to confirm the SG value. Failure to confirm glucose levels when your symptoms do not match the SG value can result in the infusion of too much or too little insulin, which may cause hypoglycemia or hyperglycemia.

Pump therapy is not recommended for people whose vision or hearing does not allow for the recognition of pump signals, alerts, or alarms. The safety of the MiniMed™ 780G system has not been studied in pregnant women or in persons using other anti-hyperglycemic therapies that do not include insulin. For complete details of the system, including user guides and important safety information such as indications, contraindications, warnings and precautions associated with system and its components, see <https://bit.ly/MiniMedRisks>.

US-NA-2600240 ©2026 Medtronic MiniMed, Inc. MiniMed and MiniMed logo are trademarks of Medtronic MiniMed, Inc. The sensor shape and appearance, Abbott, and "a" logo are marks and/or designs of the Abbott group of companies in various territories and used under license. Sensor image ©2026 Abbott. TM*Third-party brands are trademarks of their respective owners.

18000 Devonshire Street
Northridge, CA 91325 USA
1-800-646-4633
(24-hour Technical Support for
Healthcare Professionals)

minimed.com

