

# Medical Certificate

This is to certify that

Name

Date of birth

has **DIABETES MELLITUS.**

They are taking (x)

insulin injections  
GLP-1 analog injections  
oral medication

and have to carry insulin cartridges or vials, insulin pens / syringes / insulin pump, needles, blood glucose meter / Continuous Glucose Monitoring System (CGM) / Flash Glucose Monitoring System (FGM) and glucagon vials with them into the aircraft cabin.

They have type 1 diabetes and need a carbohydrate snack / drink with them into the aircraft cabin.

Insulin type

Medical device

Other medication

Place and date

Doctor's name

Healthcare unit

Phone

Signature