| Name: | IC | D: | Department: |
|-------|----|----|-------------|
| | | | |

VALIDATOR EVALUATION: 1= Independent W/O Errors 2= Independent w/ Minor Errors 3= Verbal Prompts w/ Errors

Competency: Staff will properly use the Accucheck Inform® to obtain Point-of Care Glucose measurement

| Skill/Steps | Rationale | | Validator | |
|--|---|------|-----------|---|
| Performs high and low quality control tests | Annual re-certification may be done and recorded electronically through glucose meter | | 2 | 3 |
| Checks expirations dates of supplies, discarding outdated Performs QC each day or when meter error is suspected Turns meter on and scans own OPERATOR ID barcode (i.e. UMID#). Selects CONTROL TEST then Level 1 or 2 Scans & verifies lot number of Control Solutions Scans test strip vial code & verifies match on screen Removes strip, recaps vial immediately, inserts strip when indicated on display Applies 1 drop control solution to strip's yellow dosing area when indicated Notes result, runs next control level FAIL: enters appropriate comment(s), correct potential causes, repeats control test Continued "out of range", reports to Charge Nurse, removes from service, exchanges meter at Chemistry Dept. or local lab | Control solutions are relabeled with current day, month, day, and year & 3-month expiration date upon opening. Use until that or printed expiration date, whichever occurs soonest. DO NOT SHAKE CONTROL SOLUTIONS Strips expire on manufacturer's date if tightly closed in original vial QC prior to testing patient samples to ensure accuracy 5, 6. Manual entry of data increases risk of error | Comm | ments: | |

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| Skill/Steps | Rationale | | Validator | |
|---|---|------|-----------|---|
| Accurately measures and records capillary blood glucose reading following Infection Control guidelines | This may be completed with a test reagent or patient sample. Current Accu-chek Inform users may | | 2 | 3 |
| Cleans the meter with proper wipe (Oxivir or Bleach) prior to each use Checks expirations dates of supplies, discarding outdated Identifies patient with 2 identifiers | describe steps2. Strips expire on manufacturer's date if tightly closed in original vial | Comn | nents: | |
| 4. Instructs patient re: procedure and to wash hands, if able 5. DOES NOT perform finger stick on patient's with low perfusion/BP 6. Turns meter on and scans own OPERATOR ID barcode (i.e. UMID #) 7. Ensures wireless connection is accessed, if available | 4., 7, 8. Manual entry of data increases risk of error. | | | |
| 8. Selects PATIENT TEST 9. Scans patient's bar coded CSN on the wristband at bedside & verifies that PATIENT ID# on screen matches wristband's CSN | 7. Carefully enters CSN manually, only in areas that do not use ID band MRN is not correct entry for glucose meter | | | |
| 10. Scans then verifies that test strip code on vial and meter match11. Removes strip, recaps vial immediately, inserts strip into meter when displayed on screen | Note- CORD Blood is not acceptable | | | |
| 12. When indicated, obtains pure blood capillary, venous, or arterial sample: a. Allows alcohol to dry, if used for prep | 11. Avoid contamination | | | |
| b. Gently squeezes, pricks side of fingertip or heel with lancet at shortest levelc. Wipes away first drop of blood with dry gauze | 14. Spraying, immersing, or cleaning with dripping cloth can damage meter. | | | |
| 13. Touches blood ONLY to strip's yellow dosing area14. Notes results and enters comments, if applicable15. Presses check icon to transmit results | Wireless base charges battery only Wired base re-establishes wireless connection; transmits and receives data | | | |
| 16. Notifies physician/nurse of results appropriately (See values/actions below)17. AFTER EACH USE, washes hands and wipes meter surface with Oxivir (C diff pts only: 1:10 bleach wipe) | 17. Submits MCIT Remedy Ticket for base/dataport connectivity issues | | | |
| 18. Allows to dry then places meter in wired or wireless base to recharge and/or transmit data, responding appropriately to connection problems 19. Documents results per unit guidelines. | | | | |

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| Cor | npetency AccuChek Inform II Glucose Testing Employee Name_ | | UMID | | | | |
|--|---|----|--|---|-----------|---|--|
| | Skills/Steps | | Rationale | V | alidato | r | |
| Takes appropriate action for normal, critical, and out-of range values | | | | | Validator | | |
| 1. | States range of "normal" readings | 1. | 1. Normal =73-100 mg/dL Critical Ranges (CR) = Inpatient age 1yr-adult: < 50 or > 500 Inpatient Peds > 3mos -1yr: <40 or >500 Outpatient 1yr-adult: <40 or >500 Newborns (0-3months old) < 40 or > 200 | | 2 | 3 | |
| 2. | Stays with Patient while notifying STAT nurse/physician of critical values | | | | Comments: | | |
| 3. | Out-of-range for patient: Enters "comments" as needed; Retests; Notifies nurse/physician ASAP for unusual results | | | | | | |
| 4. | Intervenes as ordered | | 2. Retest/notify =< 70 or >150, or per call parameters | | | | |
| 5. | Retests 15 minutes after treatment to determine effectiveness | ۷. | Netest/notify = < 10 of > 130, of per call parameter | | | | |
| 6. | Documents hyper or hypoglycemic episode, interventions, and that resolution occurred within 30 minutes | 6. | CMS required | | | | |

This employee has satisfactorily completed the above competency

| Employee | Signature | Initials | Date |
|-----------|-----------|----------|------|
| Validator | Signature | Initials | Date |

This competency has not been achieved. Action Plan and expected date of completion as follows:

| Validator | Signature | Initials | Date |
|-----------|-----------|----------|------|
| | | | |

Resources:

Point of Care Policy

Accu-Chek Inform II Quick Reference Guide

AccuChek Inform II Operator's Manual

Glucometer Cleaning Guideline

Lab Handbook- Onsite POC

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