Inform II Training & Competency Module







Course Objectives

This course will cover the following information about the Accu-Chek Inform II glucose meter:

- Requirements of the Accu-Chek Inform II glucose meter, base unit, test strips & QC
- Charging and downloading the meter
- Meter Screens
- Operator ID requirements
- Patient ID requirements and how to perform patient testing
- Proper technique for fingerstick and use of the lancet
- Adding Comments
- Actions required when patient test results fall into critical range and/or HI or LO
- Meter Limitations
- Hospital Policy requirements
- Infection Control requirements

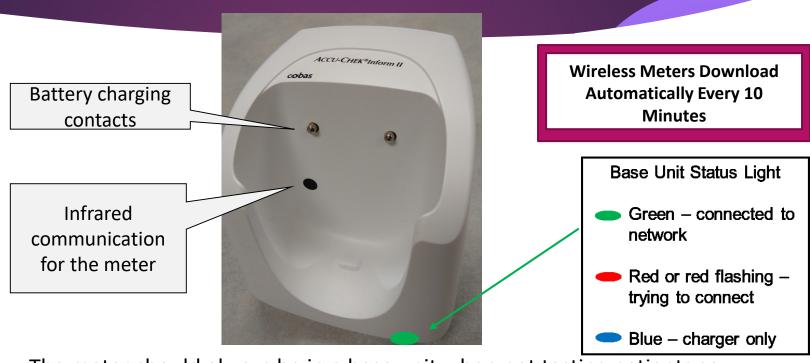


Meter Features





Recharger/Downloader Base Unit Design



- The meter should always be in a base unit when not testing patients so that battery stays charged.
- Some base units download results and recharge the battery
- Some base units only recharge the battery.

Test Strip Vial Requirements

- Expiration date is the manufacturer expiration date printed on vial
- Store at room temperature
- Make sure vial is tightly closed at all times.
- Discard code key when opening a new box of test strips.

Inform II strips





- Center edge dosed strip
- Re-closable flip top lid



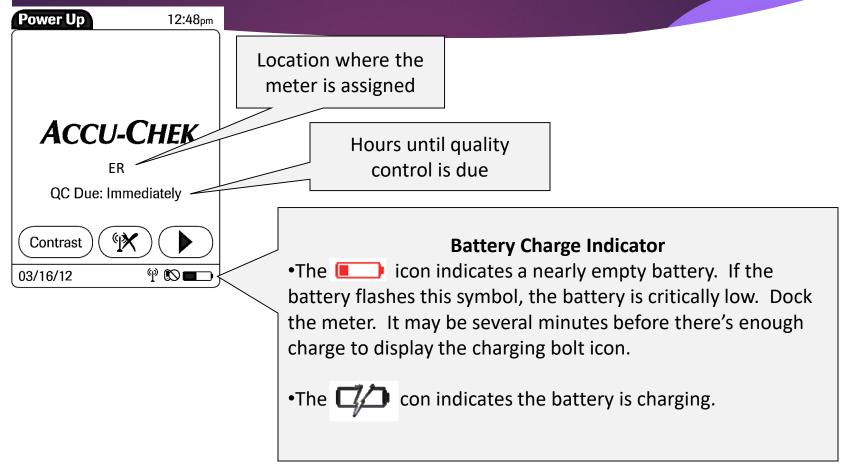
Control Bottle Requirements



- Label control bottle with open date and expiration (discard) date.
- Controls expire <u>three months</u> after opening or at manufacturer's expiration date if it is sooner.
- Include the full date on the bottle for discard date: mm/dd/yy.
- Store at room temperature.

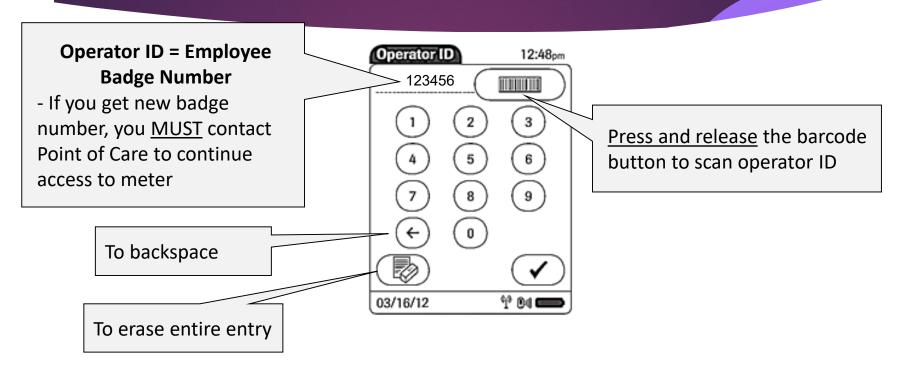


Meter Screens



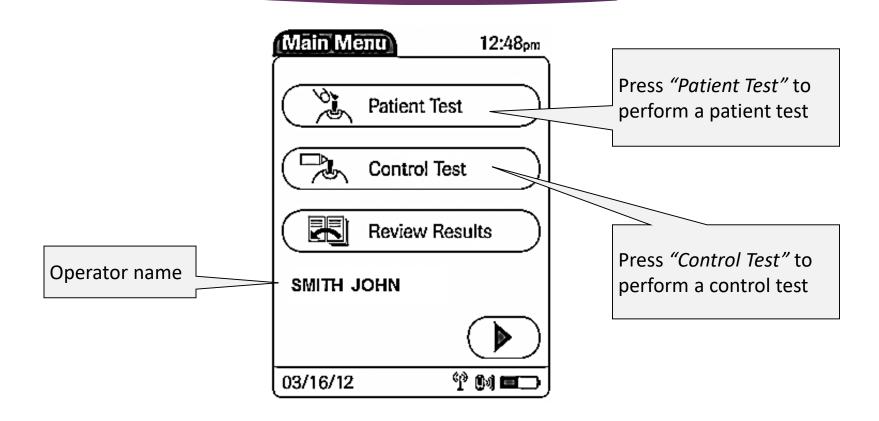


Meter Screens-Input Operator ID



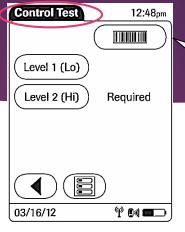
To scan, position meter a few inches away from bar code on employee ID badge

Meter Screens-Main Menu



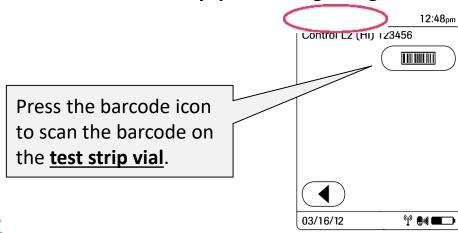


Preparing to Run Controls



Press the barcode icon and scan the <u>barcode</u> on the <u>control bottle</u>

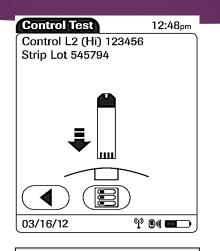
<u>REMEMBER:</u> Two levels of control must be run at least <u>once every 24</u> hours and <u>when opening a new vial of strips</u>. If 2 lots of strips are in use, QC should be performed on both lots every 24 hours. QC should also be run if a meter is dropped or damaged in any way, or if there is any question regarding the accuracy of meter results.



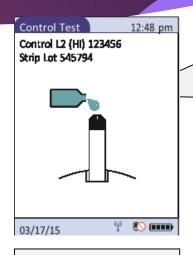
Screens While Running Controls



Code Key Checks



Insert Strip



Do not add sample until the icon appears.
Wipe tip of control vial before and after use.

Apply Sample

Apply to the front edge of the yellow target area and fill the yellow window – DO NOT PLACE SAMPLE ON THE TOP OF THE STRIP.



Squeeze small drop of QC solution; keep the meter level to prevent solution from entering the test strip port area.



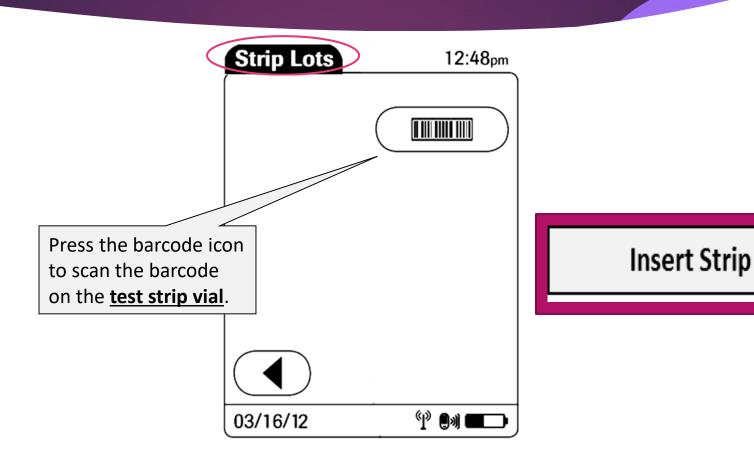
Control Results



- Comments are <u>required</u> for QC that "FAIL"
- Both levels of QC must pass before patient testing is allowed.

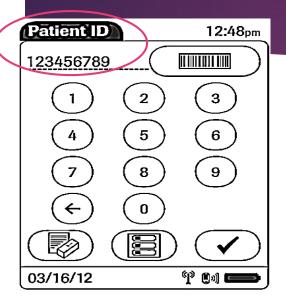


To Run a Patient Test





To Run a Patient Test



Scan the barcode on the patient's wristband to enter the patient's medical record number (MRN)

Operators may also manually enter using the numeric keys –
Enter carefully and verify! If entered incorrectly the
result will NOT appear in the patient's EPIC chart
If MRN is <7 digits, manually enter MRN with a leading "0"

- For Inpatient/ER/OR: Scan patient wrist band
 If wristband is damaged obtain a new wristband.
 If wristband is inaccessible during a procedure scan EPIC label.
- For Outpatient: Scan EPIC label

How to Collect a Proper Fingerstick Sample

1. SELECT THE FINGER SITE

Select the side of the fingertip that has not been lanced recently.

Each test should be performed from a new skin puncture. The middle or ring finger is preferred. Do not use an old puncture site.



2. DISINFECT THE PUNCTURE SITE

Cleanse the puncture site. <u>Scrub</u> using 70% alcohol wipe. Allow the alcohol dry before puncturing.

It is very important to make sure the puncture site is dry. Alcohol may interfere with the glucose test and cause an inaccurate result.



3. WIPE AWAY THE FIRST DROP OF BLOOD WITH A GAUZE PAD.

Hold the puncture site downward and gently apply intermittent pressure to the surrounding tissue. Strong repetitive pressure (milking) should not be applied; it may cause tissue-fluid contamination.

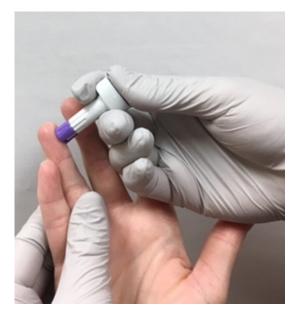


How to Use the ACCU-CHEK® Safe-T-Pro Plus Lancet Single-Use "Twist and Press"



Hold the lancet and twist off the purple cap.

DO NOT use if cap has previously been removed.

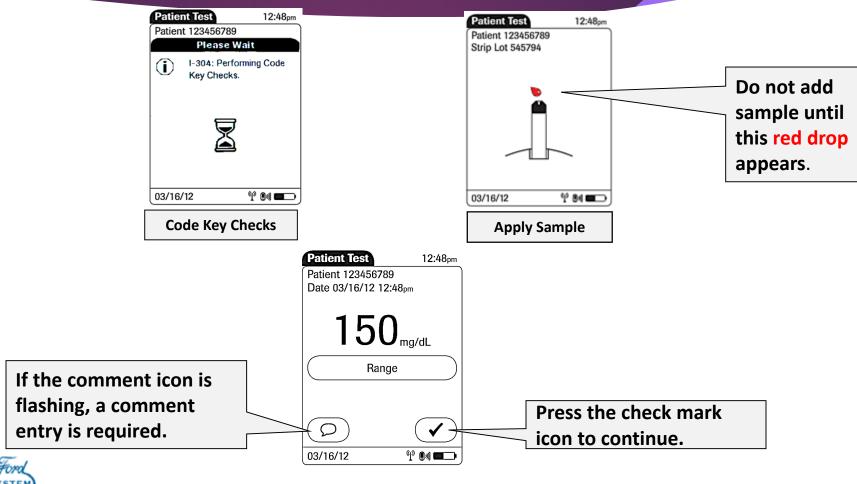


Place lancet against the side of the fingertip and press the purple button.

AFTER USE, DISPOSE IN SHARPS CONTAINER.



Screens While Running a Patient Test

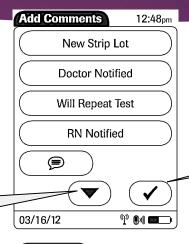


Screens Used For Adding Comments After A Patient Test

Select up to 3 pre-defined comments. To de-select a comment, press it again.

Use Down Arrow icon to scroll for more comments.

Comments selected display



Press check mark icon to go to summary screen.

Patient Test
Patient 123456789
Date 03/16/12 12:48pm

220
mg/dL

Out of Normal Range

New Strip Lot
Doctor Notified
Will Repeat Test

03/16/12

Summary Screen

ALWAYS press check mark icon when finished.



Critical Glucose Meter Results and Repeat Testing

Critical Glucose Meter Results for patients:

A glucose meter result in the critical range can have life threatening consequences if left untreated or treated improperly. It is important to confirm critical values to ensure proper treatment.

Adult Critical Range: less than 40mg/dL or greater than 400mg/dL

Neonatal Critical Range: less than 45mg/dL or greater than 125mg/dL

Critical Glucose Meter Results and Repeat Testing

Critical values must be <u>repeated</u> to ensure a correct result AND repeat results must be <u>within</u> the following limits:

Adult Critical Values less than 40 mg/dL:

- Repeat result must be within 15mg/dL of first result. For example:
- Acceptable repeat:
 1st result = 35 mg/dL; 2nd result = 20 mg/dL
- Unacceptable repeat:
 1st result = 35 mg/dL; 2nd result = 15 mg/dL

Adult Critical Values greater than 400 mg/dL:

- Repeat result must be within 20% of first result. For example:
- Acceptable repeat:
 1st result = 450 mg/dL; 2nd result = 455 mg/dL
- Unacceptable repeat:
 1st result = 450 mg/dL; 2nd result = 120 mg/dL



Action Steps for Critical Glucose Results

When a patient result falls into a critical range:

- A comment will be required before proceeding to next step.
- The same operator should perform another test on the same meter within 5 minutes
 - If the two results meet acceptability criteria, the result is successfully confirmed
 - 2. If the two results do not meet acceptability criteria, perform a third test or send a patient sample to the lab immediately for Stat Glucose Notify RN or physician of critical result.
- Do not withhold treatment if clinical symptoms warrant immediate intervention.
 Proceed with repeat testing, as soon as possible, after treatment has been administered.
- Critical Results can be manually charted in EMR outside of POC working hours.



Action Steps - LO and HI

<u>LO</u> means the result is <10 mg/dL <u>HI</u> means the result is >600 mg/dL

The LO or HI message indicates a result that is beyond the meter's ability to measure.

THEREFORE

send a STAT specimen to lab for numerical value.

Specimens Requirements

- Approved for capillary, venous, arterial and neonate samples. No Cord Blood!
- Only acceptable sites for obtaining capillary whole blood: Finger or neonatal heel stick.
- If patient circulation is impaired, collection of capillary blood is not acceptable. The results may be inaccurate. This may occur if the patient is:
 - Dehydrated
 - Hypotensive (Adult systolic blood pressure less than 75 mmHg)
 - In shock
 - In heart failure
 - Has peripheral arterial occlusive disease
 - Collect a venous or arterial sample and send to laboratory.
- Caution should be taken to clear arterial lines before blood is drawn.



Meter Limitations

- Acceptable <u>Hematocrit</u> Range: 10-65%.
- The following can falsely increase glucose results:
 - Triglycerides greater than 1800 mg/dL
 - Ascorbic acid administered intravenously resulting in blood concentrations of greater than 3 mg/dL.
 - Galactose concentrations of greater than 15 mg/dL.
- Neonates with suspected galactosemia should have their glucose readings confirmed by sending a specimen to the laboratory for testing.

Hospital Policy Requirements

- All operators must know how to locate the Inform II Glucose Meter procedure on OneHenry. Contact local POCC for help accessing procedure.
 - PRC-PALM-5.82-pro1: WHOLE BLOOD GLUCOSE-ROCHE INFORM II SYSTEM PROCEDURE
- Results obtained on patient's personal meters should not be used to make treatment decisions. (This includes Continuous Monitoring Systems)
- Use of Inform II glucose meters is limited to patients currently receiving care under a Henry Ford Health System provider. Do not use Hospital meters for self testing, testing other employees or visitors.
- It is a violation of Hospital policy to use the operator ID of another employee, or to loan out your operator ID.
 - SYSTEM-WIDE CONFIDENTIALITY AND INFORMATION SECURITY HR POLICY NO: 5.18



Infection Control Requirements

- Perform Hand Hygiene before and after wearing gloves.
- Always wear a new pair of clean gloves for each patient.
- Use appropriate PPE when performing testing on isolation patients.
- After each patient use, clean the meter as follows:
 - Super-Sani Cloth: Squeeze excess solution from the wipe before using on meter. Contact Time: 2 minutes
 - <u>Clorox Germicidal</u> (Contact Plus Isolation only): Squeeze excess solution from the wipe before using on meter. **Contact time:** 3 minutes. Remove bleach residue by wiping with damp gauze; dry.
- Note: Avoid getting liquid into the test strip port when disinfecting the meter.
- Do not allow liquid to pool on the touch screen as severe damage to the system may occur.



You have completed the Inform II Training & Competency Module





