

I-STAT ANALYZER TRAINING









- Understand the components of the i-STAT analyzer
- Correctly handle a specimen for blood gas analysis (ABG) and PT/INR
- Perform both ABG and PT/INR testing on the i-STAT
- Perform daily maintenance on the i-STAT







- The use of the i-STAT allows quantitative blood gas analysis and PT/INR test results at the patient's bedside.
- In order to ensure accurate, reliable patient results, all personnel utilizing an i-STAT must be properly trained and that training must be documented.







- Training frequency is initial, at six months, at one year and annually there after.
- Initial training consist of lecture, hands-on and written exam. A competency checklist is also a part of the training; initial, 6 months, 1 year and annually.











Handheld: Bottom

Handheld: Top





Battery charging

Infrared

communication

window

compartment

ISTAT COMPONENTS



Downloader/Recharger

- Used to charge Handheld and spare batteries
- The Handheld must be properly placed in Downloader/Recharger
- Spare battery must be properly placed in the battery charging compartment
- Red or green status light illuminates when charging
- The handheld must be properly aligned with the infrared communication window to transmit results to the Data Manager.







Abbott rechargeable battery pack









- Use the spare battery compartment
- Red dot facing up; gold contact pads facing the foot
- Green light near the battery compartment illuminates when charging

Important Note: Batteries can be left in recharger- they will not overcharge!















Replacing Battery

- Slide open the battery compartment
- Tilt the Handheld to slide out the battery
- For <u>9-volt batteries</u>: remove batteries from battery carrier and replace with NEW 9-volt batteries
- Insert new battery pack/battery carrier with gold dots facing down and red dot facing the screen
- Slide the battery compartment cover back into place













Portable Printer

• The printer can receive data directly from the analyzer via Infra-red (IR) transmission.

To print results

- While viewing the results hold down the print button on the handheld while pointing at the IR window on the printer.
- The results will begin to print.
- The printer is recharged using a power adapter connect to an outlet



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CARTRIDGES



Sample chamber



- Number 14 and a "d" = 14 days room temperature storage
- Number 2 and a "m" = 2 months room temperature storage





CARTRIDGES







***DO NOT RETURN CARTRIDES TO THE REFRIDGERATOR ONCE AT ROOM TEMPERATURE** Put room temperature expiration date HERE

Put room temperature Exp.: expiration date HERE





- When collecting a syringe sample from an arterial stick, venipuncture, etc., care should be taken to prevent the introduction of ambient air into the sample when it is collected.
- If using a syringe, expel all air bubbles. Cap or seal the end of the collection device.

NOTE: If air bubbles are present in the sample, results may be invalid for O2. If small air bubbles are present, please annotate it on the final report in the patient's chart.





Sample Collection and Handling: Syringe







Sample Collection and Handling: Syringe



Avoid Quality Check Codes!

- Mix the sample thoroughly and gently
- Discard first few drops
- Fill to the fill mark
- Close the closure to seal





If the cartridge is not sealed, the handheld will return an *Unable to Position Sample* Quality Check Code.





closure is closed-



Sample Collection and Handling: Fingerstick

• Use a skin puncture device that provides free-flowing blood.





- Gently squeeze the finger to develop a hanging drop of blood.
- Use the first sample of blood to perform the test.





Sample Collection and Handling: Fingerstick





Fill cartridge to the fill mark



- Bring PT/INR cartridge up to the finger
- Immediately close the cartridge







- STEP 3: Scan your operator ID using your barcoded badge.
- STEP 4: Scan the patient's ID number using the patient's armband. If this is not feasible, manually

enter.





Per Hospital policy all patients must be identified with two identifiers Full Name and Date of Birth



REMEMBER



Scanning is everything

- Scanning prevents manual entry errors and results going to the wrong patient chart.
- If you must manually enter a number, double check it before you press the enter button.



SAMPLE TESTING



• Step 5: Scan Lot number on the cartridge pouch. The analyzer will prompt you to insert the cartridge.









Insert cartridge into the handheld promptly.



SAMPLE TESTING



 At the end of the procedure, remove the i-STAT cartridge and insert the i-STAT analyzer into the docking station.





If a result is flagged with "<" or ">", the result may be outside the cartridge's measuring range. If a result is flagged with "^{***}", the cartridge sensor may have been compromised. In either case, repeat test with new cartridge.



HANDHELD CLEANING





- 1. Clean the display screen with
 - PDI[®] Super Sani-Cloth[®]
- 2. Rinse using gauze pad moistened with water
- 2. Allow to dry



Decontaminating the handheld

- 1. Use 1:10 bleach solution
- 2. Soak gauze pads, remove excess solution
- 3. Soften, then remove dried blood; do not scrape
- 4. Clean entire surface twice
- 5. Rinse with gauze pad moistened with tap water

Important note: Do NOT let liquid enter the cartridge port or battery compartment.









• The i-STAT analyzer will automatically perform electronic quality control & complete the testing.



INTERFERENCES



ANALYTE	INTERFERENCE	INTERFERENCE CONCENTRATION	EFFECT ON ANALYTE RESULT
Sodium	Bromide	37.5 mmol/L	Increase (1) Na
Ionized Calcium	Acetominophen Magnesium Acetylcysteine Bromide Lactate	1.32 mmol/L 1.0 mmol/L 10.2 mmol/L 37.5 mmol/L 6.6 mmol/L	Decrease (↓)iCa Increase (↑) iCa by 0.04 mmol/L Decrease (↓) iCa Increase (↑) iCa
	Salicylate (Therapeutic)	0.5 mmol/L	Decrease (↓) iCa by 0.07 mmol/L
	Salicylate	4.34 mmol/L	Decrease (↓) iCa by approx 0.03 mmol/L Decrease (↓) iCa







ANALYTE	INTERFERENCE	INTERFERENCE CONCENTRATION	EFFECT ON ANALYTE RESULT
Hematocrit	White Blood Count (WBC) Total Protein	Greater than 50,000 WBC μL For measured Hct<40% For each g/dL below 6.5 For each g/dL above 8.0 For measured Hct >40% For each g/dL below 6.5 For each g/dL above 8.0 Abnormally high	May increase (1) hematocrit Decrease (1) Hct by 1% PCV Increase (1) Hct by 1% PCV Decrease (1) Hct by 0.75% PCV Increase (1)Hct by 0.75% PCV
			Increase (1) Hct



INTERFERENCES



ANALYTE	INTERFERENCE	INTERFERENCE CONCENTRATION	EFFECT ON ANALYTE RESULT
PCO2	Propofol (Diprovan®) Thiopental Sodium		For patients administered propofol or thiopental sodium i- STAT recommends the use of G3+, CG4+, CG8+, EG6+, and EG7+ cartridges, which are free from clinically significant interference at all relevant therapeutic doses. I- STAT does not recommend the use of EC8+ cartridges for patients receiving propofol or thiopental sodium



 It is a work rule violation to test yourself or co-workers.

 Exception to this is an emergency, the person will need to go to the Emergency Room for assistance.



PROFICIENCY TESTING



- Proficiency Testing (PT) will be delivered 3 times per year.
- Each sample will need to be performed on all meters on your unit.
- Independently, run samples in PROFICIENCY TESTING mode, a POCT Staff member will be present to assist.
- Record the results on the form provided.
- Results will NEVER be compared amongst the departments.
- If an operator's performance results in an out-ofrange PT, the POCT staff will observe, using the same specimen, to re-assess their competency.











For more information or if you have any questions, review the •iSTAT Blood Gas procedure manual or contact •the POCT Staff at •787-8359 or 706 830 1621





• Print out the documentation showing you have passed the test.

Step Two

• Let your Unit POCT Trainer know you have completed this portion of your training and present him/her with documentation.

Step Three

• Demonstrate your performance of a i-STAT Arterial Blood Gas for your trainer. Have the training documented on your glucose competency sheet and have your Unit POCT Trainer submit a memorandum to the POCT Staff so your information can be updated in the system.

Step Four

Place all certificates and training records in your CAF Folder.

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