



### Point of Care Testing: ACCU-CHEK<sup>®</sup> Inform II Glucose Meter







- The use of blood glucose meters by untrained staff, without adequate management supervision of the equipment and without the use of quality control procedures, can lead to misleading results, adversely affecting the treatment of patients"
- Newcomers must have competency assessed: initially at 6 months, 1 year and annually thereafter.



### **Accu-Chek Inform II**





Accu-Chek Inform II



Base Unit (BU)

•Automatic data transfer and battery charge.

•Green light – standby

•Red light – data transfer



Tote Box

Meter, strips, Control 1 & 2, lancets

### **Accu-chek Inform II**







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On/Off Button



#### **Accu-chek Inform II**









#### •Code Key information loaded by POCC

- •Stored @ Room Temperature
- •Test Strip Code, Quality Control Range, Expiration and Lot # Bar Code is on each vial
- •Scan or verify lot number with each use
- •Once opened initial and date
- •Replace cap immediately after each use
- Expiration date on vial is valid for "open" or "closed" vial expiration date





# **Accu-chek Inform II Stips**





Sample volume detection

Robust End Dosing Strip

Fast 5 Second Result

0.6µL sample size



### **Accu-Chek Inform II**



#### **Power up screens**







**Step 1:** Press and release the On/Off button . The system is now on.

Step 2: The Power Up screen appears.



**Step 3:** Scan operator ID. Operator ID is unique to user and needed for all activities

\* Do not share your operator ID/badge with other staff!





- What is an Operator ID?
  - Your DoD ID is your Operator ID and is used to identify you as the person performing a glucose test.
  - Scan the bar-code on the front of your badge.
  - If your ID comes up "Operator ID is invalid" try docking your meter and try again. If it still does not work, contact POCT Staff.









#### 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. This should be a rare issue.





### **Main Menu Screen**







#### When opening a new box of ACCU-CHEK® Controls,

- record the open date and 3 month expiration date on the vial
- Circle the manufacturer's expiration date printed on the label, if less than 30 days.
- Prior to performing QC, check the expiration date on the control vials.
- Store glucose control solutions at room temperature (less than 90°F, 32°C). Do not freeze.



Must write date when opened and 3 months to Discard along with initials









- Control testing must be performed at the following times:
- Every 8 hours/every shift, or meters will lock out patients testing.
- When a new vial of test strips are opened
- When a vial of strips has been left opened
- If the meter has been dropped



## **Quality Control Screens**







#### Touch the scan symbol on the screen to enter the lot # of the Control/Strips



Scan the lot number on the control vial

Scan the lot number on the test strips





"Flashing Arrow" symbol appears. Insert test strip into test strip port.

#### "Flashing Drop" symbol appears.

- Meter is ready for QC sample.
- Remove cap and apply control solution.





#### **Result Screen**







- If "FAIL" appears touch to 3 comments.
- Repeat failed control.
- For "FAIL" control result consider the following.
  - $\,\circ\,$  The test strip vial has been left opened for a period of time

. You may enter up

- Procedural error
- The test strip or controls have been exposed to very high or low temperatures
- $\,\circ\,$  The control solutions are expired and/or contaminated.

NOTE: Report two consecutive failures to laboratory Point of Care Coordinator (POCC)706-787-8359



### **Start Patient Testing**



- Scan your Operator ID Badge
- Select "Patient Test" on the screen.
- Scan the patient's armband
- Note: If the patient's armband cannot be scanned, carefully enter the patient's ID number manually, and verify the identification in the meter before accepting the entry.









- Per Hospital policy all patients must be identified with two identifiers
  - -Full name and date of birth



### **Patient Testing**





- **Step 1:** Select patient test from menu
- Step 2: Select Glucose Test
- **Step 3:** Scan in Patient hospital number. (Meter will prompt you to confirm patient details)
- Step 4: Scan in Test strips



### **Patient Testing**





Check test strip code and insert strip.



### **Patient Testing**





\* Make sure to wipe away the first drop of blood.







#### From main menu screen touch '*Review Results*'. (Patient/QC)

Stored test results are displayed in a sequential list.



Touch ( )

or

 $(\mathbf{v})$  to scroll up or down in the list. Results are grouped by date.



### **Review Results Cont.**





• Touch an entry in list to display related details.

•Touch '*Patient'* symbol to display results for a specific patient only – Test results available with date and time of test only, no Patient specific ID.



- It is a work rule violation to test yourself or coworkers.
- Exception to this is an emergency, the person will need to go to the Emergency Room for assistance.





#### Meter, Base Unit, and Carrying Case Cleaning Procedure:

- Meter must be turned off and the base unit must be unplugged prior to cleaning.
- Clean the outside of the Accu-Chek Inform II System with hospital approved disinfecting wipes only. With the meter upside down begin cleaning the device, avoiding the strip opening. Moisten all surface areas of the meter ensuring to remove all visible soil. Allow to dry according the hospital policy to be fully disinfected.
- Follow the same guidelines for cleaning the base, avoiding contact with the electrical leads





### **Interpretation of Results**

#### **Reference Ranges**

#### POC Glucose Ranges

• Normal 70-100 mg/dL

#### **DDEAMC** Reference Ranges are:

- Critical LO= Less than 50 mg/ dL
- Critical HI= greater than 450 mg/dL

(If you get any of these values, it indicates the results are outside the reading range and you must repeat the test.)

If you get a value that exceeds the normal range value but in within the high and low parameters please ensure you notify the HCP and notate this value in the patients record.

**\*\*NOTE**: The meter will read as low as 10 mg/dL and will be indicated by a reading of "LO" on the meter display. It will read higher than 600 mg/dL and will be indicated by a "HI" reading on the meter display.\*\*







Search by Order date	04 Jul 17	- 13 Jul 17	Dis	Display by Date							
Military Unit: UNKNOWN											
	PLASMA										
STAT	Hcp:			Req Loc: EMERGENC							
Ordered Panel Test: CMP											
Performing Lab: MAIN LAB	BLD 300,FT	GORDON									
170713 CHM 146937											
GLUCOSE	H*	(70-100)	mg/dL	C:HLM13Jul17@0750							
1025.	9										
Result Comment:											
Critical value read back	by authoriz	ed receiver.	TELEPHONIC	ALLY NOTIFIED TO							
DR AKERS @ 0749 HM											
BUN 62.3	Н	(6.0-23.0)	mg/dL	C:HLM13Jul17@0725							
CREAT 4.3	Н	(0.3-1.2)	mg/dL								
_Interpretations:											
+ Reference Range Source:	SIEST.G.ED.,	Reference Va	lues in Hu	man Chemistry;							
new <mark>I</mark> nquiry pgDn pg <mark>∪</mark> p	Print eXi	t <mark>H</mark> elp									



#### **Data Manager**



Alere	RALS	System					All Instituti	ons - Bl	RENDA ARNE	TT Settings H	elp Logout
Status	Results	Devices (	Consuma	bles Operators	Locations	Tas	ks Adminis	stratio	ı	www	v.RALS.com
Flagged	Results	Results R	Review	Levey-Jennings	Linearit	y	Proficiency R	leview			
Device Type	ACCU-C	HEK® Inform I	I	Date Range	07/12/2017	15 To	07/13/2017	15	Sample Stat	cus All Flagge	ed
Location	All Locat	ions	T	Reason For Failure	All Failures			V	LIS Upload F	Failure All Upload	l Failures
Apply	Re	view	Edit	Upload to LIS	rride Do N	Not Upl	Actual result	ivents	ê 🖂	📋 🖬 🚿	' 🔆 ?
Date and Ti	me	Patient ID	Location	Operator	Result C	Commer	1025.9	Reason	For Failure	Sample Status	Strip Lot #
07/13/2017	7 06:34:13	30255138095	ED		HI		mg/dL	Dutside / Critical V	AMR (High), 'alue (High)	EVALUATE	475310
07/12/2017	7 16:45:19	20416423780	11W		84 mg/dL	ſ		Repeated	d Test	EVALUATE	475310
07/12/2017	7 16:41:21	20416423780	PCU		401 mg/dL			Repeated	d Test	EVALUATE	475310
07/12/2017	7 14:44:44	9999999999999	ED		110 mg/dL					UPLOAD FAILED	475310







\*\*\*\*All alert values must be repeated using a fresh sample from new stick.

Actions taken must be documented in the meter by entering a comment.

- Report to caregiver or provider, and follow his/her recommendations.
- Alert values obtained must be reported immediately to the care nurse for assessment of the patient.
- Results must be verified by the clinical laboratory if requested by the provider.



### Limitations



Due to medical conditions:

- Hematocrit should be 10-65%
- Lipemic samples (triglycerides) >1800 mg/dl
- Galactose blood concentrations >15 mg/dL
- Impaired peripheral circulation

# For further information refer to Test Strip package insert or SOP



# **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.
- If an operator's performance results in an out-of-range PT, the POCT staff will observe, using the same specimen, to reaccess their competency.









#### • Finger stick:

- ✓ Remove/dry all alcohol form puncture site.
- ✓ Wipe first drop of blood off and use second drop for testing.

#### • Applying Sample:

- $\checkmark$  Make sure the yellow target area is filled with blood.
- ✓ Do not lay meter on soft surfaces.

 Repeat test if results are critical or if they appear inconsistent with patient's symptoms.

• Close lid containing strip promtly.







Step One documentation show

 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 ACCU-CHEK® Inform II Glucose test 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.







- POCT 5.4 WHOLE BLOOD GLUCOSE TESTING ACCU-CHEK INFORM® II SYSTEM
- POCT 5.0 Quality Control/Quality Improvement Policy







<b>POINT OF CA</b>	RE TE	STING (F	OCT)	) COMPF	TENC	Y ASS	ESSM	ENT CH	ECK-L	IST					
Source of Performance	Stan	dard: Cะ	are of	Patient	s-Con	tinuu	m of (	Care- Po	oint of (	Care	Testi	ng			
monstrates Point of Care Testing competenc	y relate	ed to speci	fic skil	lls and pr	ocedure	es IAW	Point	of Care T	esting st	tandar	rds.				
¥¥			Type of Assessment												
			Initial				Six Month					Annu	ıal		
CRITICAL BEHAVIOR	* Self	+ Evaluation	Pass	Initia	ls		Pass (Y/N)	Initials			Pass	Ini	itials		
(SOURCE OF PERFORMANCE STANDARD)	Assess	Method	(Y/N)	Operator	Trainer	Date		Operator	Trainer D	Date	(Y/N)	Operator	Trainer	Date	
	ODITI														
ACCU-CHEK INFORM II GENERAL FORMATION	CRITIC	CAL THINKI	<u>ING:</u> P	erform proce	edures and	l evaluate	e results.								
Read Standard Operating Procedure (SOP).															
. Obtained 80% or above on a written assessment.		W, L, PE	Y		<u> </u>	9/10/14								+	
. Identifies equipment parts and supplies.		W, L, PE	Y			9/10/14								11	
. Demonstrates knowledge of ON/OFF features of the Accu-Chek Inform II meter		W, L, PE	Y			9/10/14									
. Knowledge of instrument (LOCK OUT) when the Accu-Chek Inform II information has not been downloaded to the database.		W, L, PE	Y			9/10/14									
. Knowledge of the location of the Owner's Manual and the Error Code interpretations.		W, L, PE	Y			9/10/14								$\square$	
. Understands and perform appropriate instrument Maintenance.		W, L, PE	Y			9/10/14								$\square$	
ACCU-CHEK INFORM II QUALITY	CRITIC	CAL THINK	ING: Pe	erform proce	edures and	l evaluate	e results.								
ONTROL (QC)															
Read Standard Operating Procedure (SOP).															
. Knowledgeable about stability and storage of control strips and liquid control solution.		W, L, PE	Y			9/10/14									
. Understand calibration (Code Key) procedures and understands when Code Key is necessary.		W, L, PE	Y			9/10/14									
<ul> <li>Understands proper troubleshooting when control is not within the acceptable range.</li> </ul>		W, L, PE	Y		<u> </u>	9/10/14									
. Knowledge of proper documentation of any QC issues.		W, L, PE	Y			9/10/14									

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