KINGSTON GENERAL HOSPITAL

NURSING POLICY & PROCEDURE

SUBJECT	Glucose Monitoring (Bedside) Using the Nova StatStrip™ Glucose Meter: Advanced Competency (AC) for Nurses (Registered Nurses and Registered Practical Nurses)	NUMBER PAGE ORIGINAL ISSUE REVIEW	G-4730 1 of 15 2008 September
	 A. Limitations of Use B. Reagents C. Quality Control D. Specimen Collection E. Reference Ranges F. Patient Testing G. Cleaning the Meter H. Reviewing Results on the Meter I. Changing the Battery J. Troubleshooting 	REVISION	2014 May

Introduction:

Blood glucose meters provide convenient, rapid results that benefit patient management of glucose levels. This type of testing at the patient's bedside is known as 'point-of-care testing' (POCT). It is important for all diagnostic medical laboratory examinations to be reliable, including POCT. Since 2003, Ontario Lab Accreditation (OLA) has provided accreditation services to licensed Ontario medical laboratories. In 2010, Accreditation Canada added Point of care Testing to their standards. These accreditation processes ensure that hospitals meet explicit quality management criteria and are competent to carry out laboratory examinations. The following policy and procedure is guided by the POCT requirements for quality and competence accreditation standards.

The Nova StatStripTM test strips contain an electrode that measures glucose. When the glucose in a whole blood sample mixes with the reagent in the strip, it produces an electrical current. The amount of current depends on the amount of glucose in the sample and is measured by the electrode. The result displayed is the plasma equivalent so that results will correlate with the laboratory glucose result. The sample required is 1.2 μ L of arterial, venous or capillary blood. The Nova StatStripTM does not require any calibration as there is no variance between lot numbers of strips.

The Nova StatStrip[™] connects with the hospital network when placed in the docking station. The bidirectional interface allows the meters to upload patient and operator information and to send approved patient results to the electronic medical record.

Policy:

- 1. The Nova StatStrip[™] glucose meter is the only glucose meter approved for use at Kingston General Hospital.
- 2. Only nurses (RNs and RPNs) who are certified may use the Nova StatStrip[™] glucose meter (see Nursing Policies A-1250 and A-1257 for certification requirements and competency to perform).
- 3. Students may not use glucose meters at this time.
- 4. If requested and ordered, patients may perform self-testing with their own glucose meter however clinical decisions must not be based on patient self-testing devices or test results.

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- 4.1 The benefits of patient self-testing are recognized, however the laboratory cannot validate the use of each individual device or testing mechanism to assure that it has been maintained as required by the manufacturer, or that test results are comparable to existing hospital-owned POCT devices or test results provided by the laboratory.
- 4.2 Self-testing results are not documented in the patient's electronic record or paper chart.
- Users who are non-compliant with glucose meter policies may be locked out of the glucose meters.
 5.1 The operator, along with his/her manager and Clinical Educator, is notified of the non-compliance.
- 6. Non-functioning glucose meters are removed from service and the POCT Department is notified. Do not send meters to Maintenance or Clinical Engineering.
- 7. Infection control practices are followed (see Kingston Hospitals Infection Control Manual).
- A patient care order is required for:
 8.1 measuring blood glucose with a glucose meter
 8.2 obtaining a blood sample for STAT glucose measurement by the chemistry lab
 8.3 any action based on a glucose meter result
 NOTE: Authorized nurses may implement Medical Directive 15-01 Oral Management of Hypoglycemia in Patients with Diabetes (Adult) as appropriate.
- 9. Waste is discarded as per hospital biohazard waste disposal guidelines.
- 10. Documentation of electronic results is traceable to the operator logged into the meter at the time of the test. Sharing of login information or using a meter under another operator's identification is strictly prohibited.

A. Limitations of Use of the Nova StatStrip[™] Glucose Meter:

- Use only whole blood.
 1.1 Do not use serum or plasma.
- 2. Test results may be affected when the meter is used outside the temperature range of 15° to 40 °C, or outside the relative humidity range of 10 to 90%.
- 3. Do not test blood collected in fluoride/oxalate (gray top tubes), EDTA (lavender top tubes), or citrate (blue top tubes). Sodium heparin (dark green tops) is the only acceptable anticoagulant.
- 4. The Nova StatStrip[™] exhibits no interference from the following substances up to the following concentration levels:

TESTED INTERFERING SUBSTANCE	TESTED CONCENTRATION LEVEL
Acetaminophen	662 µmol/L
Ascorbic Acid	568 µmol/L
Bilirubin	256 µmol/L
Cholesterol	13.00 mmol/L
Creatinine	530 µmol/L
D+ Galactose	19.25 mmol/L
Hematocrit	0.20 - 0.65
Ibuprofen	2328 µmol/L
Oxygen	All concentrations
Salicylate	2.2 mmol/L
Triglyceride	8.25 mmol/L
Uric Acid	1180 µmol/L

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B. Reagents

Test Strips:

- 1. Keep the Nova StatStrip[™] Glucose Test Strip vial tightly closed when not in use.
- 2. Store test strips in the original vial at room temperature, between 15° and 30 °C.
- 3. Once opened, record the 180 day expiry date on the vial.
- 4. Discard opened vial after 180 days or by the manufacturer's expiry date, whichever comes first.

Control Solutions:

- 1. Store Nova StatStrip[™] Glucose Control Solutions between 15° and 30 °C.
- 2. Once opened, record the 90 day expiry date on the vial.
- 3. Discard opened vial after 90 days or by the manufacturer's expiry date, whichever comes first.

C. Quality Control

There are 2 levels of Quality Control (QC) Glucose Solution that are used to confirm that the meter and strips are working correctly. The solutions have known values of glucose that are programmed into the meters. If a QC result falls outside of the programmed range, the meter cannot be used for patient testing.



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Procedure:

- Login to meter.
 1.1 Scan barcode on your identification (ID) badge.
- 2. From Patient Test screen, select QC soft key.
- 3. Enter strip lot number by pressing the OK key and scanning barcode on vial.
- 4. Enter QC glucose solution lot number by pressing the OK key and scanning barcode on vial. **NOTE:** There are three reasons you may see an error message indication an invalid lot number.
 - i. The wrong item is being scanned (e.g. strips instead of QC).
 - ii. the item has passed the manufacturer's expiry date.
 - iii. The incorrect date is set in the meter. Dock the meter to synchronize the date and time with the network or access the date/time change option by pressing the following keys: Menu, Admin, Set Time.
- 5. Insert test strip as shown below.
 - 5.1 Avoid touching white end.
 - 5.2 Once test strip is correctly inserted, meter will display "Apply Sample".



- 6. Gently mix level 1 QC glucose solution and discard first drop to avoid contamination.
- 7. Keeping the meter flat, squeeze a drop of control solution from bottle and touch it to end of strip until it draws solution into well.

NOTE: Holding the meter flat prevents the QC solution from dripping into the strip port. The strip port can be damaged if this is not prevented.

- 7.1 Meter will beep when enough sample is drawn into the strip.
- 7.2 Screen will display a clock as it counts down 6 seconds.
- 7.3 Result will display as "Pass" or "Fail".



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- To continue, press the OK button or key to accept.
 8.1 If level 1 QC failed, repeat steps 2 through 7.
 8.2 If level 1 QC passed, repeat steps 2 through 7 for level 3 QC glucose solution.
- Manually log out of meter by pressing Logout key or button, or place the meter in the docking station to automatically log out.
 9.1 Turning power off will not log user out.

Reporting and Recording:

1. Quality control results will be automatically synchronized with the Laboratory Information System when the meter is placed in the docking station.

D. Specimen Collection

Equipment:

Alcohol Swabs Gauze Lancet (for capillary samples) Syringe and blunt needle (for samples from hemodialysis catheter ports)

Procedure:

NOTE: If sampling from a syringe, recommended anticoagulants are sodium heparin, lithium heparin or ammonium heparin. Samples should be tested immediately. Storing samples on ice is not recommended.

- 1. Wash hands then apply gloves.
- 2. For capillary samples:
 - 2.1 Select appropriate site:
 - 2.1.1 <u>Adult patients</u>: Use side of the fingertips or thumb where there are more capillaries and fewer nerve endings.
 - 2.1.1.1 This will minimize discomfort to the patient.
 - 2.1.1.2 Preferred fingers are middle finger or ring finger.
 - 2.1.2 <u>Neonatal and pediatric patients:</u> See Nursing Policy and Procedure B-4585 Capillary Blood Sampling by Heel Puncture (Neonatal and Pediatric) (AC for Nurses).
 - 2.2 Ensure site is warm.
 - 2.2.1 Blood flow to area can be increased by hanging hand below level of heart or by applying a warm, moist cloth on site for a few minutes.
 - 2.3 Cleanse selected site with an alcohol swab, or have patient wash his or her hands in warm soapy water.

NOTE: If site is not properly cleansed, it can alter results (e.g. fruit juice on hands).

2.4 Ensure site is dry.

NOTE: If site is still wet when punctured it can alter results and will cause blood to flatten out at the site as opposed to forming a drop.

NOTE: Milking finger or thumb may cause interstitial fluid to dilute blood sample and alter results.

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- 2.5 Use a single-use lancet to puncture site.
 - 2.5.1 Twist to remove protective end.
 - 2.5.2 Firmly press pressure-activated lancet to site to puncture the skin.
 - 2.5.3 Once triggered, lancet retracts below surface.
- 2.6 Dispose of used lancets in sharps container immediately after use.
- 2.7 Wipe away the first drop of blood with clean gauze.
- 3. For samples from hemodialysis catheter ports:
 - 3.1 Wipe arterial sample port with an alcohol swab and ensure port is dry
 - 3.1.1 If port is still wet when punctured; it can affect result.
 - 3.2 Withdraw a drop of blood using a syringe and blunt needle
 - 3.3 Dispose of syringe and needle in sharps container immediately after use

E. Reference Ranges

NOTE: Most glucose meters are programmed with the reference range for a random glucose, except meters regularly used on newborns (Connell 5, Kidd 5, and NICU). These meters are programmed with newborn specific ranges. All results will be documented in the patient care system with the random reference range. If a result needs to be documented as fasting, a Fasting Blood Sugar (FBS) must be ordered and a sample sent to the laboratory for testing.

Reference ranges are established by the laboratory based on healthy non-diabetic subjects and describe where results from 95% of healthy subjects are expected to fall. These ranges are different from 'intervention thresholds', which identify glucose concentrations at which clinicians should consider interventions, e.g. Medical Directive 15-01 Oral Management of Hypoglycemia in Patients with Diabetes (Adult), Canadian Pediatric Society (CPS) Guidelines.

Random Glucose	All Ages*	3.5 - 11.1 mmol/L
Fasting Glucose	14 years or older	3.5 - 6.1 mmol/L
	3 months to less than 14 years	3.3 - 6.0 mmol/L
	1 day to less than 3 months*	2.8 - 4.5 mmol/L
	Less than 1 day	Refer to Neonatal Practice Guideline:
		Blood Glucose Monitoring for Hypoglycemia
		and Hyperglycemia

F. Patient Testing

Equipment:

Nova StatStrip[™] Glucose Test Strips Nova StatStrip[™] Glucose Meter Single-use lancet Alcohol swab Gauze

Procedure:

- Login to meter.
 1.1 Scan the barcode on your ID badge.
- 2. From Patient Test screen, select the OK key.

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- 3. Enter glucose test strip lot number by pressing the OK key and scanning barcode on vial.
- 4. Enter patient's 7 digit CR (Chart Registration) number when prompted.
 4.1 Start with zeros if CR number is less than 7 digits.
 4.2 Best practice is to scan the barcode on the patient's identification band
- 5. Patient demographics will display on the screen. Press the OK key or button to accept if this is the correct patient.
 - 5.1 If it is not the correct patient, press the left arrow key to go back and re-enter the CR number.

Confirm Patient ID op: 8636 Name: NICU-1 € 13:42
194546646 is a valid Pt ID
Confirm Patient ID
Patient Name: Smith, Darryl ^{Bed:} 823W
Back Accept

NOTE: "Invalid Patient ID" message will appear in some situations with a valid ID. It may occur if the patient has recently had a status change (Inpatient, Outpatient, Emergency patient) or if the patient has been in for an extended period (more than 24 hours in Emergency or weeks on an inpatient floor)

- 5.2 If the invalid message appears, confirm the correct CR# is entered and select the New Patient Override key.
- 5.3 During network downtime5.3.1 Confirm the CR number is correct and select the Downtime Override key.



EXCEPTION: It is expected that the patient's correct CR# will be used when performing a test. On rare occasions when a patient requires a STAT blood glucose, but do not yet have a CR Number, enter "0000000" as the CR Number. The only areas to utilize this process are the Emergency Department, Connell 5, the Cath Lab and Burr 0 in the Cancer Centre. It may only be used when the delay in obtaining the CR Number will put the patient at risk. This ID will display as "Invalid Patient ID" therefore, select the New Patient Override key to continue. In this situation it is <u>essential</u> that POCT Non-Registered Patient Form (Appendix A) be completed and sent to POCT or the Core G-4730

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Lab within 48 hours. This allows POCT to link the glucose meter result with the patient's actual CR Number once it has been established.

NOTE: It is never appropriate to use a fictitious CR number.

- 6. Insert test strip as shown in Section C, step 5 for QC.
- 7. Screen will display "Apply Sample" (see Section D for specimen collection procedure).
- 8. Touch end of test strip to blood drop until well is full and meter beeps.
 - 8.1 The screen will display a clock and count down 6 seconds.
 - 8.2 The result will be displayed in mmol/L.

NOTE: If test strip does not fill completely before it is pulled away from drop, do not attempt to fill it again. Discard strip and start over with a new one.



- 9. When the result displays on the screen, reconfirm that the correct CR number was entered. Accept or reject results (see Section E for Reference Ranges).
 - 9.1 Press the Accept key or button if result is perceived as correct or the Reject key or button if validity is in question.

NOTE: If after accepting the result it is discovered that the incorrect CR number was used, complete a Mislabeled Point of Care Test Form (Appendix B) and send to POCT.

10. Interpret results.

- 10.1 A single up arrow displays for an abnormal high result.
- 10.2 A double arrow up displays for a critically high result.
- 10.3 A result of "HI" indicates result of greater than 33.3 mmol/L.
- 10.4 A single arrow down displays for an abnormal low result.
- 10.5 A double arrow down displays for a critically low result.
- 10.6 A result of "LO" indicates result is less than 0.6 mmol/L.

NOTE: Meters identified under the Location field on the home screen as Newborn are programmed with intervention thresholds for newborns. Meters for all other Locations (In-Patient, Out-Patient, Emergency), are programmed with random glucose ranges. It is important to remember that the ranges for fasting patients vary based on their age. This will not be reflected on the meter. Refer to Section E: Reference Ranges.

NOTE: All results at the Point of Care are electronically documented with the random glucose range.

13. Responding to results:

13.1 For <u>critical results</u> (less than 2.5 mmol/L or greater than 25.0 mmol/L) repeat glucose meter test, notify physician, and obtain patient care order to send blood sample STAT to chemistry lab for glucose testing.

EXCEPTION: For neonates, refer to Neonatal Practice Guideline: Blood Glucose Monitoring for Hypoglycemia and Hyperglycemia.

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13.1.1 Obtain a blood sample to send to the lab STAT to confirm.

NOTE: Patients exhibiting signs and symptoms of hypoglycemia should be treated prior to sending the blood sample to the lab as per Medical Directive 15-01 Oral Management of Hypoglycemia in Patients with Diabetes (Adult).

EXCEPTION: If the patient regularly produces a critical result, only the first critical sample of the day must be confirmed with the laboratory.

- 13.2 For inconsistencies between glucose meter results and patient's signs and symptoms:
 - 13.2.1 Repeat glucose meter test using same meter, or a different meter.
 - 13.2.2 If repeat test was done with same meter and is also not consistent with patient's symptoms, repeat test with a different meter, if available.
 - 13.2.3 Notify physician if inconsistencies remain between patient's signs and symptoms and repeat glucose meter result(s).

NOTE: Repeat glucose meter measurements are done to verify that the correct specimen sampling and/or meter testing technique have been used.

14. Return meter to docking station when not in use.

Reporting and Recording:

- 1. Place the meter in the docking station to connect it to the network.
 - 1.1 Connection is successful when meter display reads "Data Transfer Complete."
 - 1.2 Patient results that were accepted on the meter will transfer to the electronic record.
 - 1.3 Patient results that were rejected on the meter will not transfer to the electronic record, but are monitored in the system by the POCT department.
 - 1.4 It is recommended that the meter be placed in the docking station when not in use. After 4 hours it the meter will display a reminder to dock the meter. This will ensure that the patient list is current and that patient results are transferred in a timely manner.
- 2. Report to physician:
 - 2.1 Critical test results
 - 2.2 Test results causing concern regarding patient status or treatment
- 3. Document on the Comprehensive Patient Care Record or unit-specific flow sheet:
 - 3.1 Date and time
 - 3.2 Glucose meter result in mmol/L
 - 3.3 Initials
 - 3.4 Mark with an asterisk any result requiring elaboration in the Interprofessional Progress Notes
- 4. Document in the Interprofessional Progress Notes:
 - 4.1 A glucose meter result requiring action and/or elaboration

G. Cleaning the Meter

- 1. After every use, clean meter with a hospital-grade disinfectant (e.g. disposable wipes). If using a spray disinfectant, do not spray meter directly but spray a cloth or paper towel.
- 2. Allow meter to air dry.
- 3. If the disinfectant leaves a film on the touch screen, also wipe with a water-dampened cloth.

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H. Reviewing Results on Meter

- Login to meter.
 1.1 Scan the barcode on your ID badge.
- 2. From Patient Test screen, select the Review key or button to display the Review Results screen.
- 3. Select how to sort results by pressing one of the following keys: ID, Time/Date, or Type. **NOTE:** Results are automatically sorted by Time/Date with the most recent result at the top.
- 4. Use the Page Up or Page Down buttons or keys to scroll through list.
- 5. Select result by touching it on the screen. This will highlight it.
- 6. Press the View key or OK button to see highlighted result.

I. Changing the Battery

Each docking station has an extra rechargeable battery. The user has 2 minutes from time battery is removed to insert a charged one or the date and time will need to be reprogrammed. It is imperative that the meter has the correct date and time. An inaccurate date can result in a message indicating that the test strips or control solutions are invalid. Newer models will keep the date and time in the memory and will not require the user to set it.

Procedure:

- 1. Press Power button to enter sleep mode.
- 2. Remove battery cover by pressing down on 2 latches. Newer covers only have one latch.
- 3. Push up on battery latch to release drained battery.
- 4. Replace with a charged battery by inserting bottom first, and then push in the top.
- 5. If the battery is swollen, please contact the POCT department for a replacement.
- 6. If the meter requires the date and time to be set, login to the meter and it will automatically display the screen to set the date and time. From the drop down menus, select the correct date and time. The meter will then ask to be placed in the docking station to confirm the correct information was entered. Either place the meter in the docking station or press the power button to remove this message.
- 7. Place drained battery in the slot on the docking station to recharge it. Ensure it is positioned correctly so the charging indicator light comes on.

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J. Troubleshooting



Continue

Analysis Error

Bad Strip

Temperature Error

Low battery message.

Change battery or place meter into the docking station.

Temperature Error.

Meter will only work between 15° and 40 °C

Bad Strip. Replace Strip

Insert another test strip and repeat the test. Ensure that QC solution did not enter the strip port.



Continue

Transfer Failed.

Please redock the meter until the data transfer is complete.









Test Strip Removed.

Test has been cancelled.

Bad Sample.

Insert another test strip and repeat the test. This is usually due to the test strip not filling in one fluid motion.

Flow Error.

Either insufficient sample or the sample was applied incorrectly. Repeat with a new test strip.

Transfer Failed.

Please redock the meter until the data transfer is complete.

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Other Messages or Alerts on the Home Screen may include:

MESSAGE / ALERT	SOLUTION
"Memory Full, Dock Meter Immediately"	Contact POCT department
"Dock Meter (hhmm)"	Dock meter to charge battery and transfer data.
"Battery Low"	Charge or replace battery
"QC Due (hhmm)"	Perform High and Low QC to avoid lockout before time indicated.
"Glu LOCKED" or "QC Lockout"	Perform required QC to unlock meter
"Invalid Operator ID"	Confirm with your educator or manager that you have completed the required certification (inservice and test). Contact POCT to activate your ID.
"Set Date and Time Before Testing"	Login to the meter and it will display the screen to set the date and time using a drop down menu. If it is set incorrectly, the meter may indicate that strips or QC solutions are invalid.
"Meter Not Configured" or "Unassigned"	Dock meter until "Data Transfer Complete" message appears.
Touchscreen or scanner not working	Remove battery to reboot
"is not a valid QC Lot #. Try again" or "is not a	Ensure the correct item is being scanned.
valid strip Lot #. Try again."	Ensure the correct date is set (Login, Menu, Admin, Set Time).
	Ensure the item expiry date has not passed.

Related Documents:

Kingston Hospitals Infection Control Manual

Medical Directive 15-01: Oral Management of Hypoglycemia in Patients with Diabetes (Adult) Nursing Policy and Procedure B-4585 Capillary Blood Sampling by Heel Puncture (Neonatal and Pediatric) (AC for Nurses)

Nursing Procedure G-4735 Glucose Monitoring (Bedside): Split Sample Analysis for the Nova StatStrip[™] Glucose Meter: AC for Nurses (RNs and RPNs)

Neonatal Practice Guideline: Blood Glucose Monitoring for Hypoglycemia and Hyperglycemia

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References:

- Ministry of Health and Long Term Care (April 2007). *Point of Care Testing Policy and Guidelines for Hospitals with a Licensed Laboratory.*
- NCCLS, C30-A2, 2002 Point-of-Care Blood Glucose Testing in Acute and Chronic Care Facilities; Approved Guideline- Second Edition

Nova StatStrip[™] Hospital Glucose Meter Instructions for Use Manual.

- Quality Management Program Laboratory Services, Ontario Laboratory Accreditation (OLA) Division, OLA Requirements, Version 6.0, Released December 2013
- Clinical and Laboratory Standards Institute: Procedures and Devices for the Collection of Diagnostic Capillary Blood Specimens; Approved Standard – Sixth Edition, H06-A6 Volume 28, Number 25.

Director, Professional Practice – Nursing Signature

Date

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Appendix A

POCT NON-REGISTERED PATIENT FORM ONLY FOR USE WHEN CR#0000000 HAS BEEN USED

Testing Date YYYY/MM/DD:			Patier	nt Addressograph	
Testing Time HHMM:					
Unit:					
Test Strip Lot Number					
Test Strip Expiry Date					
Printed Operator Name					
Designation					
Signature					
Date YYYY/MM/DD					
Time HHMM					
Patient Result in mmol/L					
Please Circle One:	Random	Fasting			_

For troubleshooting call the Point of Care Technologist at KGH Ext. 3712 Please send completed forms in an envelope to POCT at KGH, Douglas 3





HDH Stores # N/A KGH Stores # N/A

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Appendix **B**

LAB USE Time stamp:	
Received by:	

Mislabeled Point of Care Test Form

Section A To be completed by person who detected the incident. Please fill in section A completely.				
Date (YYYY/MM/DD) and Tir	ne (ннмм) of Mislabeled Sp	ecimen:		
Date (YYYY/MM/DD) and Tir	ne (ннмм) of Report:			
Name of person comp	leting report:			
Patient Name:				
Patient CR#	P;	atient Location		
Please circle one:	Arterial Blood Gas	Capillary Blood Gas		
	Venous Blood Gas	Glucose Meter Test		
Brief description of inc	ident:			
Immediate Action Take	en:			
Caregiver must be not	ified. Name and designati	on of who was notified:		
If sample was mislabe Send completed form	led, who was it mislabeled to Point of Care, Douglas	d by? (please circle one) Physician RN RPN RT 3.		
If this is for a blood gas If results are in the wro	s, please attach analyzer ong patient's file, this need	printout. Is immediate attention. If POCT is not available, please		
call the Core Lab at 7806 and send this completed form to them.				
<u>Section B</u> To be completed by Point of Care or, after hours, the Core Lab.				
If patient result was filed under the incorrect patient, please follow the Sunquest procedure: Crediting a Test (LIS 2-120.01) to remove the results. If sample type is incorrect, it can be left for POCT to correct.				
Please leave all documentation for POCT.				
Results credited in Sunquest by:				

Z:\MANUALS\Point of Care Testing\Section 6 Blood Gases\POC-6-10 A-1 Mislabeled POCT Form.doc Appendix Revised 28 May 2012.

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