

**GLUCOMETER COMPETENCY ASSESSMENT – 2021-2022**

**NAME: \_\_\_\_\_ EMPLOYEE #: \_\_\_\_\_ DEPT/UNIT: \_\_\_\_\_**

**Please write your name and employee number legibly.**

**1. Accurate bedside glucose results rely on good circulation, and the number of red blood cells, going to the fingers and the feet. Severe dehydration, hypotension and shock, and hematocrits >70 or <20, are some conditions that could affect circulation and red blood cells, resulting in inaccurate glucose results.**

**a) True**

**b) False**

**2. You discover that your badge access to the glucometer has expired -- or the Xceed Pro Meter displays "Upload Required." What first three steps may you need to take?**

**a.**

**b.**

**c.**

**3. How often should the glucometer be docked for data transfer?**

**4. If your Xceed Pro Meter is malfunctioning, where do you take the meter to obtain a replacement?**

**a. Clinical engineering**

**b. Laboratory**

**c. Stockroom**

**d. Your charge nurse**

**5. Is it permissible to use someone else's badge if your access is denied? Yes or No**

- 6. Please describe the steps taken to identify the patient before performing a glucometer test.**
- 7. If a patient has not been assigned an admissions number and a glucose is needed in an emergency situation (newborns, urgent ED situations, etc.). Which steps should you take?**
- a. Use the patient's Medical Record Number.**
  - b. Use the patient's Date of Birth.**
  - c. Use the patient's Year of Birth.**
  - d. Use the code 5150 until the patient is registered – then scan the patient armband (preferred) or use the patient's encounter number.**
- 8. The barcode scanner fails to scan the patient's ID band. What can you do to troubleshoot the problem? Please select all that apply.**
- a. Clean the laser scanning window with a very soft cloth (like a glasses cleaning cloth). [could this be a 2x2 gauze?]**
  - b. Check to see if the batteries in the glucometer need to be replaced. If they are low, the scanner may not scan.**
  - c. If you have tried all the troubleshooting tips, enter the correct patient ID number manually, using the number on the arm band that begins with "10." If the problem still persists, call the lab's glucometer hotline, x3199, and leave a message about the problem for the POCT lab representative.**
- 9. Which fingers are preferred for a fingerstick collection?**
- a. Ring finger or middle finger of the non-dominant hand**
  - b. Thumb and index finger**
  - c. Middle, ring, or little finger**

**10. Finger punctures should be performed on which of the following sites?**

**Please select the best one answer**

- a. Side of the finger**
- b. Side of the finger pad (fleshy side of the finger)**
- c. Any part of the finger is acceptable**
- d. Middle of the finger**

**11. Alcohol must be allowed to dry completely before collect of the blood sample. What could occur if the alcohol does not dry completely?**

**12. Is it acceptable to use test strips that have damage to the foil package?  
Yes or No**

**13. Why should the first drop of blood be wiped from the finger with gauze and the test performed on the second drop?**

- a. The first drop of blood is too thick for the sample strip.**
- b. To assure the finger was cleaned properly**
- c. To make sure tissue fluid does not dilute the sample**

**14. Within a few seconds of applying a drop of blood to the test strip, the Xceed Pro Meter should beep and say, "SAMPLE INDICATED." If this message does not appear, how long do you have to apply more blood?**

- a. 20 seconds**
- b. 30 seconds**
- c. More blood cannot be applied.**
- d. Within one minute**

**15. To get an accurate glucose result, any glucose above (>) \_\_\_\_\_ mg/dl or below (<) \_\_\_\_\_ mg/dl requires a [venous] lab draw.**

**16. How often must you run both levels (LO or HI) of quality controls?**

- a. Once a month**
- b. Once a week**
- c. Every shift change**
- d. Every 24 hours**

**17. When you open a new bottle of quality control, you must label each bottle with the expiration date. The controls expire \_\_\_\_\_ days from the date you open them.**

**18. What steps would you take if the Quality Control tests fail? Please select all that apply.**

- a. Check the quality control bottles and make sure they have not expired. Replace them if they are expired.**
- b. Check to ensure the correct control (LO or HI) was analyzed.**
- c. Remix the control, making sure no air bubbles are placed on the strip, and rerun the control.**

**19. What is the importance in keeping the glucose meter flat (horizontal) when running controls or a patient test?**

- a. You will get an error code if you do not keep the glucometer flat.**
- b. Holding the glucometer upright can cause the control solution or patient specimen to enter the test port, which will result in the meter having to be replaced by the manufacturer.**
- c. The meter will take longer to provide a result if not kept in the horizontal position.**

**20. When is the glucometer cleaned with a Super Sani-Cloth germicidal wipe?**

- a.**
- b.**
- c.**

**Direct Observation of Routine Testing:**

<b>Observation:</b>	<b>Yes</b>	<b>NO</b>	<b>Comments:</b>
Places the glucometer on a flat surface			
Verifies patient identification against patient orders			
Verifies patient identification verbally with patient, using 2 patient identifiers.			
Scans their operator barcode			
Scans patients armband (if applicable) or uses appropriate identification per hospital or clinic protocol			
Scans the Glucometer Test Strip and correctly inserts it into the machine			
Cleans the correct patient finger with alcohol and allows finger to dry completely			
Demonstrates proper finger stick techniques / does not squeeze finger excessively to obtain an adequate sample, being sure to wipe off the first drop			
Places sample on correct area of test strip and waits for the beep to sound.			
Ensures patient's finger has stopped bleeding before leaving and bandages the site if needed			
Wipes down the glucometer with the appropriate cleaning wipes before placing back into carrying case			
Disposes of all wrappers, lancets and used materials in their appropriate waste containers			
Follows All required safety measures			

**Wet Analysis: Unknown Specimen Result:** \_\_\_\_\_

**Evaluator:** Employee competent to perform procedure: \_\_\_\_\_ YES \_\_\_\_\_ NO.

If no, state why not:

**Observed by** \_\_\_\_\_ **Date** \_\_\_\_\_

**Employee:** By signing below, I agree to follow the policy and procedures set forth by Mad River Community Hospital in the use of the Glucometer for Point of Care Testing.

**Employee Name :** \_\_\_\_\_ (print please) **Date:** \_\_\_\_\_

**Employee ID#** \_\_\_\_\_ **Dept.** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_

**For Laboratory Use only:**

**Review of Records/Monitoring Results and Records**

**(Evaluator) Review of records (i.e. proficiency testing, test results, QC .....)**

**I certify that my monitoring of glucometer reports during the last ( ) 6 months, ( ) 12 months indicate that the above listed staff member has demonstrated competency in perform glucometer testing.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Necessary Remedial Action:**

**Corrective Action Required:**

**Follow-up Verification:**

**Conclusion of Assessment:**

**Date Remedial Action Completed: \_\_\_\_\_**

**Documented by: \_\_\_\_\_**

**Date entered into Glucometer User Data Base: \_\_\_\_\_**

**Entered in by:**

**\_\_\_\_\_ Date: \_\_\_\_\_**