Clinical Practice Procedures:
Assessment/Blood analysis – Glucometry

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<table>
<thead>
<tr>
<th>Date</th>
<th>April, 2017</th>
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<tbody>
<tr>
<td>Purpose</td>
<td>To ensure a consistent procedural approach to Blood analysis – Glucometry.</td>
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<td>Scope</td>
<td>Applies to all QAS clinical staff.</td>
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<tr>
<td>Review date</td>
<td>April, 2019</td>
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<td>Information security</td>
<td>This document has been security classified using the Queensland Government Information Security Classification Framework (QGISCF) as UNCLASSIFIED and will be managed according to the requirements of the QGISF.</td>
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Blood analysis – Glucometry

Point of care (POC) glucometry is a quick and convenient, quantitative assessment of a patient's blood glucose level (BGL) used to identify hypo/hyperglycaemia. ‘Normal’ blood glucose levels vary, however 3.9–5.8 mmol/L (millimoles per litre) is considered within the normal reference range.

**NOTE:** chronic or poorly controlled diabetics may be hypoglycaemic despite a BGL ≥ 4 mmol/L.

**Indications**
- POC glucometry analysis

**Contraindications**
- Routine use in newly borns unless clinically indicated

**Complications**
- Nil in this setting
**Procedure – Blood analysis – Glucometry**

1. Confirm test strip is within expiry date and remove from packet.
2. Insert the three (3) black lines at the end of the test strip into the strip port.
3. Push the test strip into the test port until it stops, the glucometer will turn on automatically.
4. The glucometer will sequentially display the following information:
   - **Display check** – all character /symbol markings
   - **Time, month and day.** (If date and time is not set, dashes will show instead of numbers).
   - **LOT number** for the box of glucose strips being used.
   - **Apply sample message**, indicating that the glucometer is ready.

**Prepare Accu-Chek® Safe-T-Pro® Plus lancet:**

1. Twist off sterility cap
2. Set the desired penetration depth setting (low (1.3 mm), medium (1.8 mm) or high (2.3 mm) depending on skin softness).
3. Press the lancet device firmly against the desired puncture site.
4. Push the lancet release button (lancet needle will automatically retract) and immediately dispose of in ‘sharps container’.
5. Touch the blood drop to the white area at the end of the test strip.
6. Continue to touch the blood drop to the end of the test strip until the glucometer begins to test.
7. At the end of the countdown, the BGL result will be displayed in the display window.
8. Remove the test strip from the strip port. The glucometer will turn off automatically.
9. Cover the wound as appropriate.

**Additional information**

- The Optium Xceed glucometer utilises a single disc battery for operation. To mitigate the risk of inadvertent battery dislodgement, all glucometers used by the QAS are required to have their battery compartments secured with Tamper Resistant Tape in accordance with Equipment Notification 02/2017.
- The Optium Xceed glucometer requires a control solution test every 30 days (refer to Manufacturer’s Instructions).
- The use of an antiseptic swab prior to lancing is only indicated if the skin is visibly soiled.
- BGL readings should not be interpreted in isolation, but with consideration of the other clinical signs and available history.
- In the rare situation a newly born requires glucometry, the outer surface of the heel is the preferred puncture site.