**Blood Glucose Monitoring Skill Competency Test**

**Student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade/Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Person trained: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Initials: \_\_\_\_\_\_\_\_**

**Person training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initials: \_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Skills** | **Initial Demonstration** | | **Return Demonstration** | | | | |
| **Date:** | **Date:** | **Date:** | **Date:** | **Date:** | **Date:** | **Date:** |
| 1. Position student to provide as much privacy as possible |  |  |  |  |  |  |  |
| 1. Explain the procedure to the student at his/her level of understanding |  |  |  |  |  |  |  |
| 1. Encourage the student to assist in the procedure as much as he/she is able to help student learn self-care skills |  |  |  |  |  |  |  |
| 1. Gather supplies and place on a clean surface |  |  |  |  |  |  |  |
| 1. Check expiration date on testing strips |  |  |  |  |  |  |  |
| 1. Ensure strips are contained in a tightly sealed container and show no signs of discoloration |  |  |  |  |  |  |  |
| * 1. Discolored test strips should be discarded |  |  |  |  |  |  |  |
| 1. Perform quality control on equipment per manufacturer’s instructions |  |  |  |  |  |  |  |
| * 1. Or verify that appropriate quality control has been completed |  |  |  |  |  |  |  |
| 1. Wash hands |  |  |  |  |  |  |  |
| 1. Put on gloves |  |  |  |  |  |  |  |
| 1. Have student wash hands or clean the student’s fingertip with warm wet cloth, let it dry |  |  |  |  |  |  |  |
| 1. Insert the monitor specific test strip into meter |  |  |  |  |  |  |  |
| * 1. Calibrate meter by matching test strip code to code on the meter (if required) |  |  |  |  |  |  |  |
| 1. Insert new lancet into lancing device (per lancet devise manufacturer’s instructions) |  |  |  |  |  |  |  |
| 1. Using lancing device on the side of student’s fingertip or other specified location (per meter specific or medical order), to get a drop of blood |  |  |  |  |  |  |  |
| * 1. Do not use pads of fingers |  |  |  |  |  |  |  |
| 1. Gently squeeze or massage finger until a drop of blood forms |  |  |  |  |  |  |  |
| 1. Touch and hold the edge of the test strip to the drop of blood, and wait for the result |  |  |  |  |  |  |  |
| 1. Blood glucose level will appear on the meter’s display |  |  |  |  |  |  |  |
| * 1. Meters do not only display numbers |  |  |  |  |  |  |  |
| * 1. Some display “Lo” or “Hi” for results outside of the meter’s parameters |  |  |  |  |  |  |  |
| * 1. Some display error messages |  |  |  |  |  |  |  |
| 1. Special Considerations: |  |  |  |  |  |  |  |

**Plan for monitoring blood glucose testing:**

**School Nurse Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Trainee’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Nurse’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**