

Clinical Instructor Orientation Module

Welcome

- Agenda items
 - Review of website, student orientation information, meeting rooms, parking, cafeteria, ID badges and dress code
 - Glucose Meter education
 - Restraint review
 - Safe Patient Handling overview
 - Collection of signed forms
 - Alaris and Enteral Nutrition pump operation
 - Cerner training

Location of Orientation Material

- www.stlukeshospital.com
- Healthcare Professionals Tab
- Follow instructions listed on website

Reference Material

Our SLH home page / My Work / Applications

- Micromedex
- Lippincott
- PolicyStat

- Due to limited space and available online resources, encourage students to not bring book bags, backpacks, etc.

Computer Information

- One WOW per clinical group
- MedSelect form and log-in process
- Cerner training

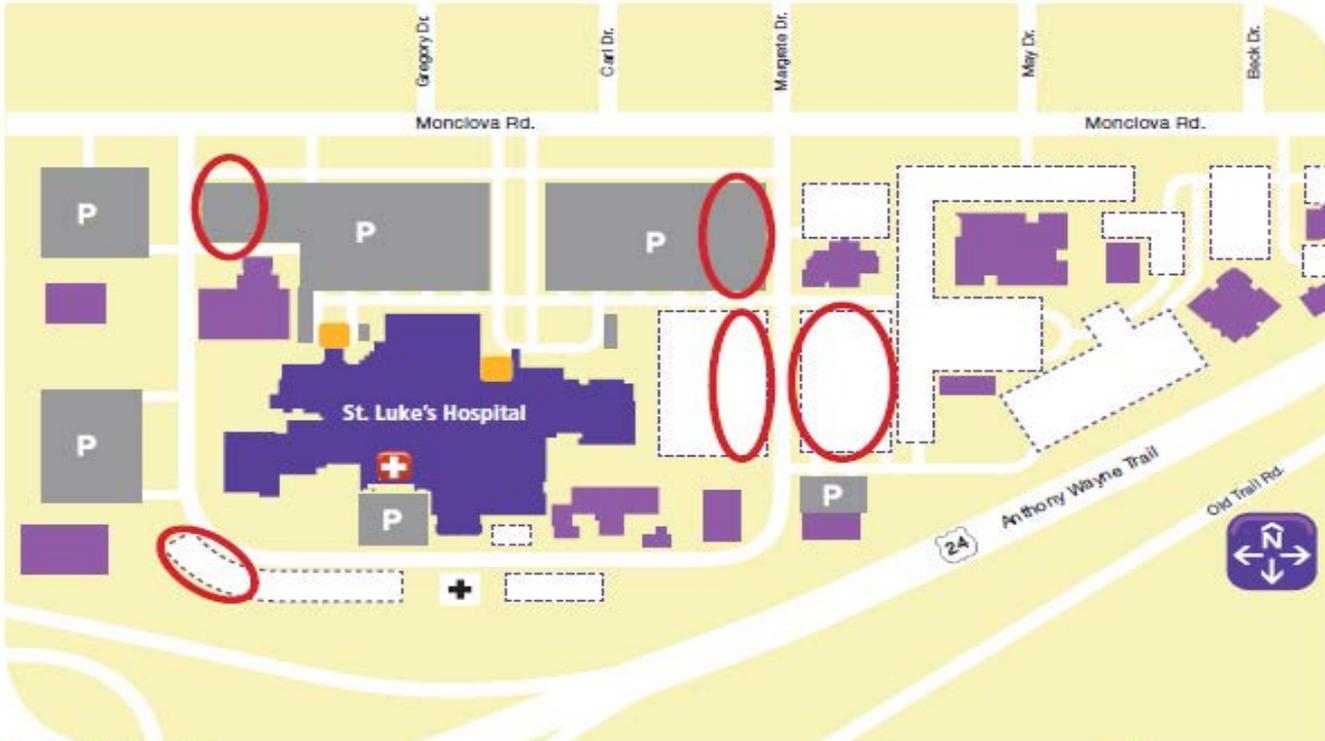
Meeting Rooms

- 3 East classroom will no longer be available to students
- Education office space
- Utilize employee locker rooms on units
- Do not bring valuables

Post Conference Space

- Check with unit manager for room availability on unit
- Book post conference room Student/Faculty Intake Coordinator
- Think HIPPA before using public space
 - Ex. Cafeteria

Employee/ Student Parking



-  St. Luke's Hospital
-  Visitor and Patient Parking
-  Entrances

Employee and Student Parking is circled in red

Badges

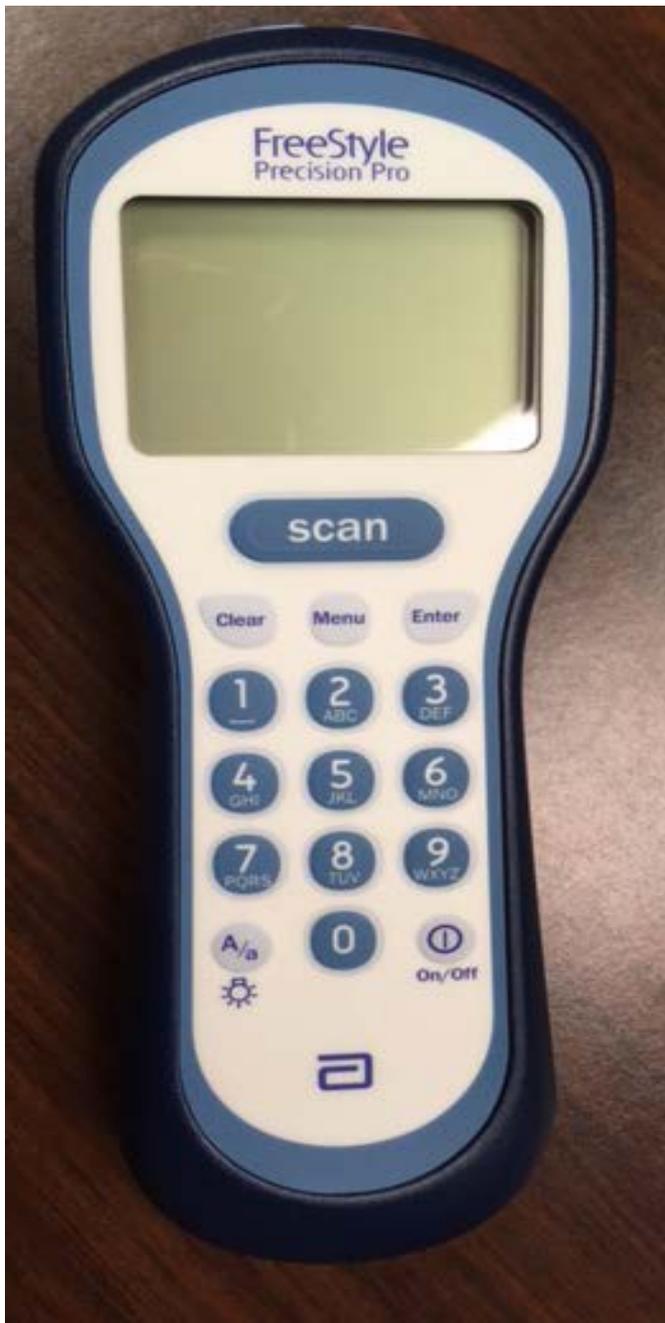
- Badges expire after 2 ½ years
- Report Lost Badges to Human Resources
- Obtain new badge for a fee
- Return badge to HR after last learning experience in program of study

Dress Code

- Research and Clinical Day – School uniform dress code
- Must wear ID Badge
- Employees need to change into school uniform before researching patients

Role Definition

- Employees must always use Instructor or Student Badges/Passwords
- If working at St. Luke's in another role (example: Nursing Assistant or RN), must separate your roles
- Current Licensed nursing staff that are also student nurses functions as any other nursing student



Point of Care Testing

Bedside Glucose Meter

Regulatory Overview

- Bedside glucose is a point of care lab test and **YOU** are performing this lab test under the lab's CLIA license.
- All lab tests are regulated by the government.
- Point of Care testing is inspected during the hospital inspection process.
- Lab Point of Care Staff monitors for compliance and serves as technical resources.
- Unit educators and PCS are resources.
- Yearly re-certification in February is required for everyone.

Glucose Meter System Parts

Provided by lab:

- Glucose Meter Carrying Case
- Docking Station or Cable

Provided by testing area:

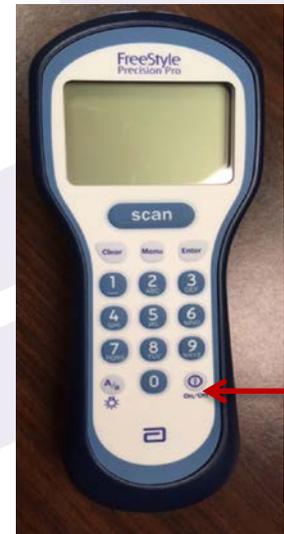
- Testing supplies
- AA Batteries

Meter Parts

- Display screen – prompts action and displays information
- Test Strip Port – where test strip is inserted for testing.
- Connector Pins – connects with docking station or cable to relay information
- Battery compartment – holds 2 AA batteries
- Display screen has battery icon to indicate charge

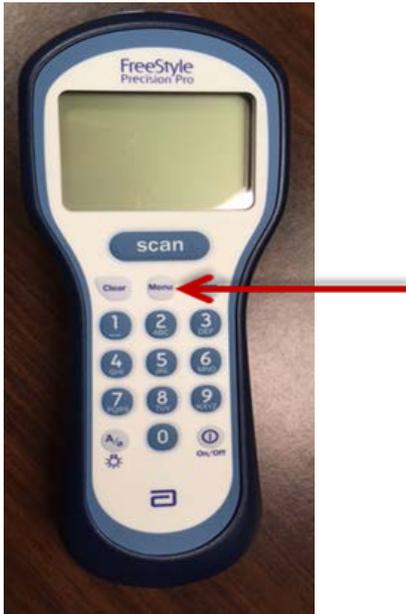
Meter Keypad ON/OFF

- Press once to turn on meter
- Press and hold for 3 seconds to turn meter off
- Meter will turn off automatically after 4 minutes to preserve battery power.



Meter Keypad Menu

- Will toggle you back and forth between testing menu and review results menu



Enter

- Use to enter information into the meter after typed into the keypad

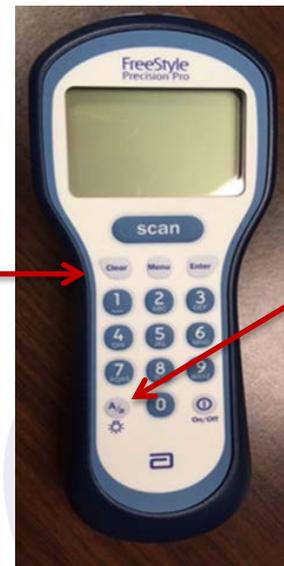


Meter Keypad Clear

- Will back up one space while entering numbers
- Will delete a barcode
- Will return you to a previous screen
- Used to delete info entered incorrectly

Backlight

- Press and HOLD lower left key (under 7) for 2 seconds to activate the backlight then release.



Scanner Use

Used to scan the barcode of the item you will be using.

- Press and hold scan key to activate laser scanner
- Move the scanner over barcode 3-12 inches away to allow meter to take a picture of the barcode
- Listen for beep



Troubleshooting Scanner

- Check battery power
- Clean scanner window with soft cloth
- Scanner works best if test strips and armband barcode is flat
- Meter will turn off scanner if scanner key depressed too long.

Patient ID's and Glucometers

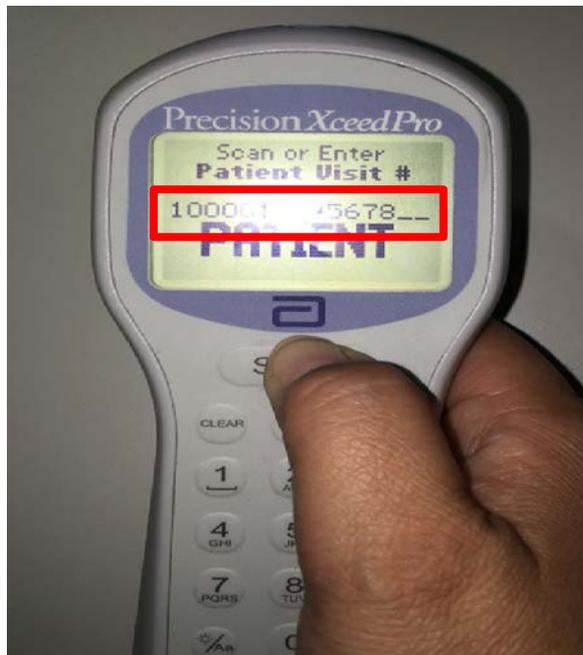
You must verify the number after scanning.

- There are two times during testing that you can verify the patient ID –
 - 1) When scanning the ID, hold the scan button down after scanning the barcode and review the account number on the screen.
 - 2) Once the test is completed the result will be displayed with the patient ID.



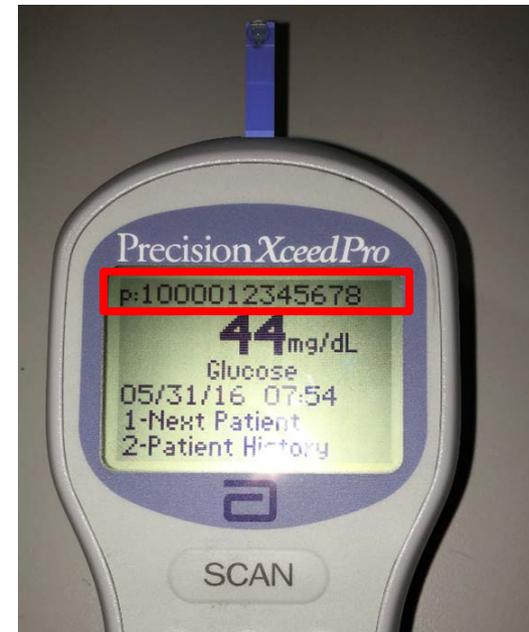
METHOD ONE: hold down scan button and review account number on the screen immediately after scanning.

If the scanned ID is incorrect, press clear to delete the ID and try scanning again.



METHOD TWO: Review the account number at top of the screen when result is viewed.

If the ID is incorrect use the POC Corrected Report form to get the patient ID corrected.



Battery replacement XP

Instructions for the XP style meter:

- To remove the battery cover
 - Release the battery cover by squeezing the latch.
 - Lift upward and remove cover.
 - Remove old batteries and position new batteries in meter following '+' and '-' guides.
 - Reinsert the battery cover

Battery Replacement

- To remove the battery cover
 - Using both hands, press down firmly
 - Position one thumb on rubber tab and other on raised lines .
 - Push to slide the cover down, then lift up and away from the meter.
 - Remove old batteries and position new batteries in meter following '+' and '-' guides.



Battery compartment cover

- Reinsert the battery cover:
 - Align battery cover with the slots on the meter, then slide up and into place.
 - Do not snap it down as it will break off the tab.



GLUCOSE CONTROL EXPIRATION DATE

Controls expire 90 days after opening

1. Write Revised Expiration date

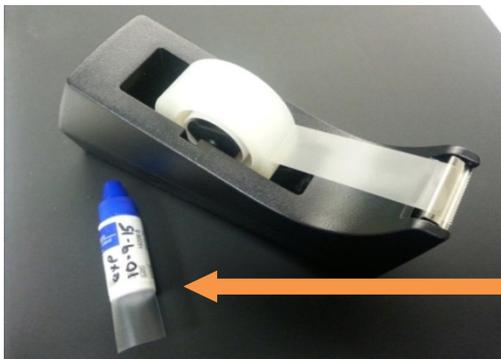


Write 90 day expiration date with permanent marker. If manufacturer's expiration date is sooner than the 90 day expiration date – use manufacturer's date and circle it. Do not write over bar code

Manufacturer's expiration date

Date it!

2. Place Tape over the expiration date



The expiration dates get rubbed off even if permanent marker is used. Use tape to protect the expiration date.

Tape it!

Running Quality Controls

- Press ON/OFF
- Press 2 Control Test
- Scan or enter Employee ID
- Scan Control Barcode
- Scan Test Strip Barcode on wrapper
- Insert Test Strip from the wrapper you scanned
- Mix controls by gently inverting prior to use. Do No shake.
- Apply drop of control solution – **Keep meter flat! Do not allow liquid to enter strip port. It will damage the meter.**
- 5 second countdown
- PASS or FAIL
- Both levels (LO & HI) must be run each day of patient testing

Reasons Controls Fail

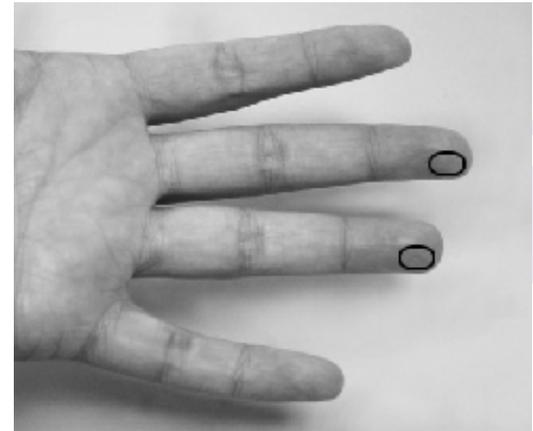
- Controls are expired – check date on vials
- Wrong level of control was run
- Controls not mixed
- Air Bubbles in nozzle of vial

Prior to performing a patient test:

- Verify that you have the correct patient using the patient armband.
- Verify that the armband is for the correct facility with current MRN and Visit number (VS#)
- Verify the patient using two patient identifiers.
- **If patient is transferred from another facility, the wristband must be updated.** Test results will not be transmitted if old VS# is used.
- Always scan the barcode when available to ensure correct visit number entry into meter. *Scan if you can.*

Fingerstick collection

- Choose a spot that is on the bottom side of the tip of one of the center fingers of either hand.
- Clean finger with alcohol prior to poking and allow to dry.



Fingerstick collection

- Gently squeeze across the entire finger at the last joint.
- Do not 'milk' finger.
- **Always wipe off the first drop of blood** after poking finger and apply second drop to test strip.



Applying sample to test strip

- Apply sample to top or end of application area until you hear a 'beep' indicating enough sample has been applied.
- If no beep, remove the test strip and depress the 'clear' key to start over with new test strip.
- **You may not add more sample to the test strip!**

Sample Application

- If using a syringe, apply blood sample to the test strip with the syringe pointing **away** from the meter.
- Remember to keep the glucose meter **flat** when running controls or patient tests so sample does not flow into meter.



Patient Testing

- Press ON/OFF
- Press 1 – Patient Test
- Scan or enter your employee ID
- Scan or enter patient Visit Number (VS) from armband
- Use all 9's if no Visit Number (do not make-up numbers) Only use when patient not yet admitted so no VS# available. eg: new babies, ER urgent situation
- Confirm patient Visit Number if prompted

Patient Testing

- Scan barcode on test strip wrapper and insert test strip into glucose meter
- Collect blood sample and apply to target area on test strip. **Keep meter flat!**
- “Sample Accepted” will display and 5 second countdown
- Test results will be displayed with patient information
- Review patient information and test result for accuracy.

Critical Values

High Critical Values will have an arrow pointing up ▲ before the result.

Low Critical Values will have an arrow pointing down ▼ before the result.

ACTION:

Repeat if questionable and follow critical value notification process. Treat for hypoglycemia if appropriate.

Examples: ▲ 425
▼ 35

Out-of-Range Results

- Results that are too high for the meter to read will appear as **>500**. (greater than 500)

ACTION: Recheck if questionable and **order lab test to confirm result**.

- Results that are too low for the meter to read will appear as **<20**. (less than 20)

ACTION: Recheck if questionable and treat patient for hypoglycemia.

Comment Code #4

- If you made an entry or testing error, enter “4” while the patient result is on the screen.
- Entering “4” will stop the results from going to the patient record.
- If you do not enter a comment code, be sure to press ENTER to complete the test cycle.

Don't 4-get to use code 4
to 4-get that result.

Troubleshooting Patient results

- If the blood glucose result appears to be inconsistent (lower or higher than expected), there may be a problem with the test strip, collection technique, or patient condition.
- Repeat the test using a new test strip.
- Results that are incorrect may have serious medical consequences.
- Order a lab performed glucose if bedside glucose is questionable.

Neonatal glucose

- As a matter of good clinical practice, caution is advised in the interpretation of neonatal glucose values below 50 mg/dL.



Disease States which lower results

- Severe dehydration
- Severe hypotension
- Edema of draw site
- Shock
- Hyperglycemic-hyperosmolar state
 - With (DKA) or without ketosis
- Alcohol remaining on the puncture site.

Repeating a patient test

- If you question a test result, run the test again on the same glucose meter.
- Run the second test within 5 minutes of the first test.
- Do not download the glucose meter between tests.
- Only the second test will be sent to the patient record if the above points are followed.

Meter Cleaning/Care

- Clean the meter after **each** patient use
- Clean the supply case if blood is visible
- Wear gloves when cleaning the meter
- If blood is visible on gloves, change them before cleaning the meter
- Use only hospital approved disinfectant wipes and allow meter to air dry
- Do NOT write on the meters

Review Patient Results

- Press MENU
- Choose 1 –Data Review
- Enter Employee ID Number
- Choose 1 – ‘Patient by OperID’ to review previous patient results by current operator
- Choose 2 – ‘Patient by Pat ID’ to review previous patient results by patient ID #
- Choose 3 – ‘All Patient Data’ for all previous patient records
- After selecting review option Press 1-Previous
- Press 2-Next to review more recent results

Result Documentation

- Electronically transmit results into Electronic Medical Record by placing glucose meter onto the docking station or docking cable.
- The rotating circling arrow indicates transmission.
- Do Not remove meter from docking area while the arrows are circling.
- The glucose meter will automatically turn off when docking is completed.

RESULT DOCUMENTATION (CONT.)

- If download is unsuccessful “Last Upload Incomplete Re-dock Meter” will display.
- Download meters after each patient test or group of patient tests as appropriate.
- Manually document results into Electronic Medical Record during downtime.
- “Test Memory Upload Required” displays when meter has not been downloaded for 8 hours.

Docking Stations and Cables

- Docking stations are located in nursing station areas.
- Some units may have multiple docking cables available.



Docking station

Place the glucose meter gently into the docking station sliding into place. Meter will turn on when properly positioned. Do not force it on.

Docking cable instructions

- Insert the cable connector into data port on the bottom of the glucose meter. Guide it in gently, Do Not force
- Meter will turn on. 
- Lay on a flat surface while downloading.



Troubleshooting Downloading

If the circling arrows do not rotate, test results are not transmitted.

- Check battery power by turning on meter and observe battery icon. If low replace batteries.
- If problem continues, take meter to closest docking station to download.
- Contact IT Service Desk to report problem with downloading and to receive assistance.

Results not in EMR after docking

- You may have scanned an old Visit Number or one from another facility. Document manually.
- If you manually entered Visit Number you may have entered incorrectly. Document manually.
- If Lab Information System or EMR is down, or if there are network problems, results will not transmit. Document manually.
- Results will usually populate into EMR within 2-5 minutes.
- Contact IT Service Desk to report problem and receive assistance if needed.

Meter Replacement

- Clean meter with disinfectant wipe
- Return meter to lab and state problem
- Lab will issue you replacement
- DO NOT send meters through the pneumatic tube!

Patient visit number not available

- You may enter 9999999999 as PT ID when a STAT glucose is needed on a patient that has not yet been given an admission number.

Example: ER patient, Newborn or Direct Admit patient not given admission number yet.

Only use when patient not yet admitted and no VS# available.

POC Corrected Result Form

- You must fill out the POC Corrected Result form and send it to the Laboratory whenever:
 - You enter all 9's as the patient ID
 - You need patient results corrected for any reason

POC Corrected Results Form

- Complete all sections of the form. Include patient information once the visit number has been assigned. Forward to laboratory when completed. This process must be completed to ensure patient glucose results are in the EMR.



Point of Care Testing -- Request for Corrected Patient Report

Date/Time of error: _____ Floor/Unit: _____

For bedside glucose enter result here
For all other testing, attach a copy of incorrect patient test results to this form.

Reason corrected report requested: (Check appropriate choice)

- All #'s entered as patient ID
- Incorrect patient ID entered into instrument

Please provide the correct patient information: (fill in or apply patient sticker)

Name- _____
Visit # - _____
MRN # - _____

_____ Test(s) performed in error (List WRONG tests)

_____ Other _____

Describe how incident occurred: _____

Name of patient caregiver notified of the error: _____

Name of person requesting corrected report: _____

***Forward this form ASAP to the LAB via pneumatic tube - Station #121.**

The following section is to be completed by laboratory:
Corrective Actions: _____

Signature: _____ Date: _____

Lab: Attach a copy of the corrected report and send to lab.

QUESTIONS?

Jennifer Rand, BS, MT(ASCP)
Point of Care Coordinator, Laboratory
jennifer.rand@stlukeshospital.com



5901 Monclova Road
Maumee, OH 43537
Phone: 419-893-5947 ext. 6167
Fax: 419-891-8033
StLukesHospital.com



Alternatives to Restraints

- Diversion, music, attempts to reorient
- Approach in non-threatening manner, use simple terms
- Offer to walk, ROM, sit with patient
- Increase observation, move closer to nursing station, or involve families
- Utilize positioning aids, cushions and pads
- Review medications for side effects
- Snacks (if diet allows)

Signs of Escalation

- Threatening comments to others
- Increasingly loud or boisterous behavior
- Begins to lose control
- Harmful or dangerous behavior
- Be alert to changes in a person's behavior
- Pay attention to what is being said and take it seriously

Restraints

▪ Non-violent

Behavior:

- *Pulling at tubes*
- *Getting out of bed*
- *Discontinuation of artificial airway*

Possible Restraint Methods:

- | | |
|--------------------------|----------------|
| ➤ <i>Soft Restraints</i> | <i>Mittens</i> |
| ➤ <i>Four side rails</i> | <i>Net Bed</i> |



Restraints

■ *Violent*

Behaviors

- *Physical threatening self or others*
- *Threatening violence*
- *Explosive behavior*
- *Suicidal ideation*

Possible Restraint Methods

- *Four point soft*
- *Four point humane*
- *Two point humane*



Restraints

■ Seclusion

- *Involuntary confinement of an individual in a room alone for any period of time*
- *The individual is physically prevented from leaving*



Safe Patient Handling

- Maxi Slides
- Maxi Move 500
- Sara Steady
- Sara Plus
- Maxi Ceiling Lift

OUCH!

- Know your schools needle stick/exposure procedure
 - Injured follow OUCH Line instructions
 - Student will be billed for treatment
- Report to St. Luke's
 - Safety Event Risk Management Reporting
- Additionally follow your school policy regarding the exposure

Impaired Student/Faculty

- Impaired students or faculty immediately removed from the patient area
- School must be contacted
- Since the impaired student/faculty cannot drive, the school must assume responsibility for the student or faculty which includes arranging transportation.

End of Shift

- All students are required to report off to the primary RN prior to leaving
- Faculty please provide unit with phone number
- **Co-sign** all student documentation, IV & medication administration. Confirm that all Dual sign-off on High risk medicate have been completed in McKesson.

Instructor Forms

- Signed Clinical & Non Clinical Attestation Form
- Health Requirements Form
- Instructor Information sheet
- Instructor Orientation Summary (New or Returning)
- Signed MedSelect Form
 - Provide Instructor Badge number
 - 85_____
- New unit orientation forms Fax to:
Scarlet.D'Amore@stlukeshospital.com

Alaris and Enteral Nutrition Pump Operation

- Provided for anyone who needs training

Alaris Pump Operation

- Set up Primary Infusion
 - Turn the pump on “system on”
 - Choose if it is a new patient or not
 - Choose the type of unit (med surg, crit care, etc.)
 - Press “Channel Select”
 - Refer to policy
 - Set the VTBI
 - Watch the drip chamber to make sure that it is dripping
 - Verify that the right fluid is infusing at the right rate
- Follow the tubing to the patient's IV site to make sure that it is WNL

Alaris Pump Operation

- Give an IV push medication
 - Pause infusion
 - Clamp tubing above port
 - Clean the port and/or remove orange cap
 - Give the flush or medication through the port
 - Put an orange cap on the port
 - Unclamp the tubing
 - Restart the infusion

Alaris Pump Operation

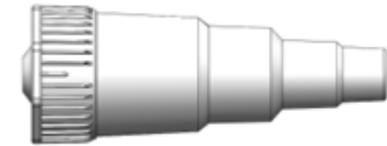
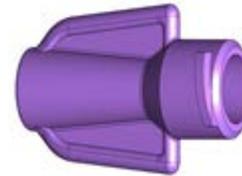
❖ Little Reminders

- An Orange light means that the tubing is occluded in some way and is not running
- A green light indicates that the IV is infusing
- Stickers should go on the IV tubing and bags
 - Continuous infusion tubing (96 hours)
 - Intermittent infusion tubing (24 hours)
 - IVF and IV Medication bags (24 hours)
 - PCA Syringes (48 hours)

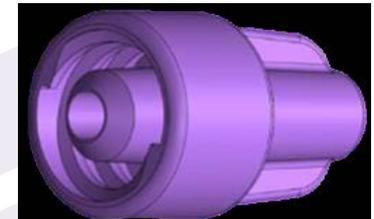
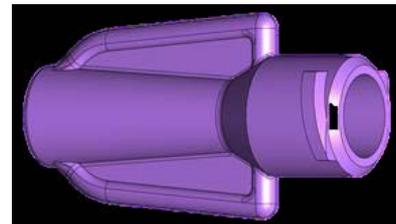
Alaris Pump Operation

- Little Reminders
 - Infusing medications using the “wild card” where guardrails are not used should be avoided if possible. Most all of our medications should be programmed into the pumps. Look for the right medication and dose
 - Provide patient and family education
 - Patients can alert you when the machine beeps
 - Patients are not to push buttons on the machine!

Enteral Nutrition Pump



Temporary Connector



Future connection

Cerner Class

- Provided for anyone who needs training

Cerner Co-Sign

- Preferred Method – Co-sign each entry
- High Alert Medications
 - Student/Instructor
 - Staff nurse is 2nd Licensed Nurse

Questions

