## Abbott i-STAT – Initial Training Worksheet

EMPLOYEE (Operator) NAME (Print)		
TRAINER/OBSERVER NAME (Print)		
LICENSE NUMBER:	HOME UNIT:	
I (initials) READ AND UNDERSTAND THE Abbott iSTAT 1 Glucose Test		
PROCEDURE AND CHANGES THEREIN.		

## Prepare the i-STAT for testing:

- 1. Press  $\square$  on the bottom right of the keypad to turn on the i-STAT 1 analyzer.
- 2. Press 2 i-STAT Cartridge.
- 3. Scan or enter your Operator ID.



4. Scan or enter the Patient ID.



5. Scan the Cartridge Lot Number on the cartridge pouch.



- Scanning Tips:
  - Hold the handheld 3-12" away from barcode
  - Press and hold the SCAN key
  - Laser should cover the entire length of the barcode
  - Wait for the beep or the laser to disappear

### Collect the sample and dose the cartridge:

6. Mix the sample gently and thoroughly, discard the first few drops, and fill to the fill-mark.



7. Close the cartridge closure to seal, and then insert the cartridge into the i-STAT.



Place the i-STAT on a level, non-vibrating surface; do not move the handheld during testing

- 8. When the results are available, remove and correctly dispose of the cartridge.
- 9. Read and respond to the results.
- 10. Transmit the results and return the i-STAT to the docking station.
  - a. Press the "menu" key; press 6-Transmit Data, and select 1-Most Recent

# Abbott iSTAT – 1: Glucose Competency Assessment (G cartridge)

□ Initial Training □ 6<sup>th</sup> Month

🛛 Annual

Operator: Print Name \_\_\_\_\_\_ License #: \_\_\_\_\_

# Trainer/Observer: Print Name \_\_\_\_\_

Operator will complete the steps below by demonstrating 6 elements of assessments:		
Methods:   1. DO= Direct Observation of routine testing : beginning to reporting   2. M= Monitoring of records/results   3. R= Review QC   4. DOM=Direct observation PM   5. A=Assessments test performance   6. P=Eval problem solving/ test	Operator Initial	Method of Assessment: DO, M, R, DOM, A, P
All materials for sample collection brought to test area		DO
Correctly demonstrates ability to perform electronic simulator testing (EQC)		DOM
Patient identified correctly		DO
Specimen collection prepared correctly		DO
Operator ID, patient ID, and cartridge barcode entered/scanned correctly		DO
Cartridge handled, filled and inserted correctly		DO
Instrument remains on level, non-vibrating surface during testing		DO
Cartridge removed and contaminated items disposed of correctly upon completion of test		DO
Policy and procedure for reporting non-critical results, *** flags, < and/or > flags followed correctly		Μ
Policy and procedure for reporting critical results followed correctly		Μ
Correctly demonstrates ability to recall stored results, add comments, and cancel a test		Μ
Correctly demonstrates procedure to transmit results to patient record		Μ
Correctly demonstrates procedure for downtime reporting of results		Μ
Demonstrates understanding of cartridge storage requirements and cartridge expiration date policies		DOM
Demonstrates understanding of Quality Control requirements (EQC and LQC), including verifying correct acceptable ranges, verifying results within acceptable ranges, and correctly responding to out of range results		R
Analyzer disposable batteries changed correctly or rechargeable battery recharged correctly		DOM
Decontamination of analyzer performed correctly with approved cleaning method		DOM
Hands On : Testing a sample or QC material		
Blind Sample ID# / Proficiency ID# / or Liquid Control Fluid Level		
Sample ID: Date performed:		А
Result generated: Expected result value / range:		
Verified by (Trainer initial): Pass		
Demonstration of Understanding of Problem-Solving Requirements		
Operator demonstrates understanding of action to be taken in response to Quality Check Codes		۲
Operator demonstrates understanding of correct response to analyzer messages indicating low battery and unsent patient records		Ρ
Operator demonstrates understanding of correct response to Internal Electronic Simulator Lock Out		Р

#### Answer and Complete Competency Test: Passing minimum score of 80% **Circle:**

- 1. Which of the following is / are true regarding i-STAT testing?
  - A. Micro clots and air bubbles will not affect testing quality
  - B. You must scan the actual cartridge packet barcode to avoid a cartridge ID error
  - C. The instrument must be on a flat, non-vibrating surface until the result is displayed
  - D. An under filled and/or under mixed specimen can affect the quality of the result
  - E. All of the above
  - F. B, C, and D only
- 2. The i-STAT analyzer should not be removed from the network downloader when:
  - A. The display screen is blank
  - B. While the Communication in Progress message is displayed
  - C. Either the Test Menu or Administration Menu are displayed
  - D. All of the above
- 3. The scanning can/should be used for:
  - A. Operator ID
  - B. Patient ID
  - C. Cartridge Lot Number
  - D. All of the above
- 4. Rechargeable batteries are
  - A. Recharging any time the analyzer is not performing a patient test
  - B. Recharging only when the analyzer is idle in the downloader/recharging station
  - C. Recharging when the red light is steady or flashing while the analyzer is in the downloader/recharging station
  - D. Can be removed from the handheld and placed into the recharging compartment of the downloader
  - E. B, C, and D
- 5. The Operator not in Certified Operator List message displays after scanning an operator ID. What action should be taken?
  - A. Press the 1 key to continue testing
  - B. Scan another employee's badge
  - C. Contact your Point of Care Coordinator to complete re-certification
  - D. None of the above
- 6. The iSTAT-1 Glucose non-waived test is under an IQCP. IQCP stands for this and has these 3 elements:
  - A. Individualized Quality Control Plan; risk assessment, guality control plan, and guality assessment
  - B. Important Quality Control Program; risk assessment, guality control plan, and guality assessment
  - C. Individualized Quality Control Plan; risky business, quality control plan, and quality assessment
  - D. Important Quality Control Program; risky business, guality control plan, and guality assessment

Signatures of both operator and assessor or designee have acknowledged completion of the i-STAT Training Course.

Operator Signature		Date
Trainer/Observer Signature_		Date
Certification Assessment Comp	pleted By Assessor/Designee:	
Name:	Signature:	Date:
This operator has completed the i-ST Glucose (G) Cartridge Verified	FAT training, and has demonstrated compete	ence in the indicated area(s) of assessment:
		i-STAT CompetencyAssessmentForm 02152021msf

i-STAT CompetencyAssessmentForm 02152021msf.cts

Fail

Pass