

ACCU-CHEK INFORM II BLOOD GLUCOSE DETERMINATION

Competency Exam

This exam is to be performed for Semi-Annual and Annual Competency assessments only (NOT for Initial Competency assessments).

PRINTED Name:	License #:	Home Unit:
DATE of Test:	TIME of Test:	
Test Strip Lot #:	QC Lot #:	
QC Level 1 or Level 2 Result:		

Written Exam – Circle either T = statement is true or F = statement is false

T	F	1. Sharing barcode IDs and/or making up MRNs is allowed in an emergency.
T	F	2. QC must be performed and pass every day – before a patient can be tested.
T	F	3. Cleaning and disinfecting the meter is required between every patient.
T	F	4. Result documentation is the responsibility of the one who tests the patient.
T	F	5. The Inform II system will now automatically notify the MD of any critical result.
T	F	6. Blood samples are to be applied to the top of the test strip, not on edge of strip.
T	F	7. If I bring the case into the patient room, I do NOT have to disinfect the case after I use it.
T	F	8. If I enter the CSN number and the demographics do not display, then I must verify that I used the correct patient identifier.
T	F	9. When inserting test strip in meter, place the “Accu-Chek” words facing down.
T	F	10. If I mistrust any patient result I should repeat the patient test prior to treatment.
Passing Score is 100% - If you do not pass, reread policy and repeat exam.		Passed
		Failed

I <u>performed</u> this test. Printed Name:	I <u>observed</u> this test being performed. Printed Name:
Signature:	Signature:

Please email completed forms to Francis Corteza (francis.corteza@sfdph.org) and Cassius Santiago (cassiusmicho.santiag@sfdph.org) or bring to mailbox B25 3rd floor H3041