

**DIABETES SKILLS CHECKLIST  
RETURN DEMONSTRATION**

Trained Staff Member: \_\_\_\_\_ School/Grade: \_\_\_\_\_

GLUCOSE MONITORING	Training Date	Attending Staff Initials	Licensed Trainer Initials
<b>A. States name and purpose of task</b>			
<b>B. Identifies supplies</b> <ol style="list-style-type: none"> <li>1. Insulin syringe</li> <li>2. Medication-Insulin</li> <li>3. Gloves</li> <li>4. Alcohol wipe</li> <li>5. Tissue or cotton ball</li> <li>6. Sharps container or disposal plan</li> </ol>			
<b>C. Procedure:</b> <ol style="list-style-type: none"> <li>1. Wash hands</li> <li>2. Gather supplies (Insulin, insulin syringe, gloves, alcohol wipe, tissue or cotton ball)</li> <li>3. Check 7 Rights of medication administration               <ul style="list-style-type: none"> <li>✓ Right STUDENT</li> <li>✓ Right TIME</li> <li>✓ Right MEDICATION</li> <li>✓ Right DOSE</li> <li>✓ Right ROUTE</li> <li>✓ Right DOCUMENTATION</li> <li>✓ Right REASON</li> </ul> </li> <li>4. Check insulin expiration date and appearance-clear, colorless, and free of clumps</li> <li>5. First time vial is used remove cap</li> <li>6. Clean rubber stopper with alcohol</li> <li>7. Remove needle cap</li> <li>8. Pull plunger back to pull air into syringe until the tip of the plunger is at the line for the number of units required for the dose</li> <li>9. Push the needle through the rubber stopper-making sure the tip of the needle is not in the insulin</li> <li>10. Press the plunger to push air into the vial of insulin.</li> <li>11. Turn the vial and syringe upside down so that the tip of the needle is in the insulin</li> <li>12. Holding the vial with one hand, pull back on the plunger to pull insulin into the syringe until has reached the line of the proper dose</li> <li>13. Check for large air bubbles-if there is push insulin back into the syringe and repeat step 11.</li> <li>14. Double check if plunger at line marking of proper dose</li> <li>15. Student assists in selecting site-rotate (change) sites</li> <li>16. If student using alcohol pad, clean selected site and allow to dry</li> </ol>			

<p>17. Pinch a large area of skin and push the needle straight into the skin all the way, at a 90-degree angle</p> <p>18. Push the plunger all the way down to inject insulin</p> <p>19. Release pinched skin, and count to 5 slowly, and pull the needle straight out</p> <p>20. Safely dispose of used needle and syringe in sharps container</p> <p>21. Remove gloves and wash hands</p>			
<p><b>D. Post Procedure</b></p> <p>22. Inspect area for blood spills and follow district/program protocols for cleaning</p> <p>23. Put insulin and supplies away</p> <p>24. Document procedure-including date, time, site of injection and amount of insulin administered. Sign/initial documentation.</p>			
<p><b>FOLLOW THE PREVIOUS STEPS ABOVE</b></p> <p><b>E. Insulin Pen:</b></p> <ol style="list-style-type: none"> <li>1. Remove the cover from pen needle</li> <li>2. Attach pen needle to the insulin pen</li> <li>3. Dial up and Prime to 2 units</li> <li>4. Dial up the correct insulin dose Give the appropriate dose of insulin following appropriate insulin injection procedure (same as above)</li> </ol> <p><b>F. Baqsimi-Nasal Glucagon</b></p> <ol style="list-style-type: none"> <li>1. Lay the student on either their side or back</li> <li>2. Hold Baqsimi with thumb on bottom of plunger and first and middle fingers on either side of the nozzle</li> <li>3. Insert the tip of the nozzle into 1 nostril until fingers on either sided of the nozzle are against the bottom of the student’s nose, block other nostril with other hand</li> <li>4. Press the bottom of the plunger firmly with thumb to give</li> <li>5. Throw away nasal spray device after use or give to EMS</li> <li>6. Remove gloves and wash hands</li> </ol> <p>• <b>Review type Glucagon your student has at school</b></p> <p><b>G. EPINEPHRINE Administration: Please Review/watch video on the Site for your student’s medication:</b>  <a href="#">EPIPEN® (epinephrine injection, USP) Auto-Injectors  How to use</a>  <a href="#">How to Use AUVI-Q® (epinephrine injection, USP)</a></p>			
<p>• <b>Competency Statement: Demonstrates correct performance of insulin administration via syringe and pen.</b></p> <p><b>Licensed Trainer Initials:</b> _____</p>			
<p>• <b>The above named, staff member demonstrates correct performance of glucose monitoring, insulin administration via syringe and pen.</b></p> <p><b>Licensed Nurse Signature:</b> _____ <b>Initials:</b> _____ <b>Date:</b> _____</p> <p><b>Signature of Trained Staff:</b> _____ <b>Initials:</b> _____ <b>Date:</b> _____</p>			