The commencement of continuous subcutaneous insulin infusion (CSII) and continuous glucose monitoring (CGM) remotely – A DTN-UK guideline

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<tr>
<td>Version:</td>
<td>1.1</td>
<td>Date published:</td>
<td>October 2020</td>
</tr>
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<td>Review date:</td>
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<td>Target audience:</td>
<td>Multi-disciplinary team:</td>
<td>Diabetologists, diabetes</td>
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<td>nurses, dieticians</td>
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Purpose of the guideline

- This document aims to provide healthcare professionals who work in diabetes, with guidance for commencing both glucose sensors (continuous glucose monitoring (CGM)) and insulin pumps (continuous subcutaneous insulin infusion (CSII)) in a remote setting.

Urgent need for remote training

The COVID-19 pandemic has presented significant challenges for the delivery of both community and specialist diabetes services. As poorly controlled diabetes appears to be associated with worse outcomes in patients who are acutely unwell with COVID-19, it is clear that the provision diabetes care to inpatients and outpatients with diabetes must not be compromised [1]. As the COVID-19 pandemic peaked in the United Kingdom (U.K) in March 2020, most routine clinical activity was suspended. Many healthcare professionals (HCPs) working in specialist services were redeployed to provide acute medical care and the burden of illness and need for self-isolation amongst HCPs resulted in reduced resources available for service delivery. The need for additional physical space to facilitate social distancing in hospitals further limited the ability to provide outpatient specialist care. As the inevitable second wave of the pandemic now looms, there is an urgent need to re-structure and re-organise our diabetes services.

A recent publication from an international panel of experts recommended the use of telemedicine and connected health models to continue regular reviews of patients with diabetes as well self-management education programmes [2]. Since routine outpatient activity re-commenced in June 2020, clinic appointments by default are conducted virtually, and now only a minority of patients attend for face-to-face visits. Virtual consultations support the COVID-19 response by reducing the need for patients to travel into hospital and allowing some HCPs to work from home if feasible. Telemedicine consultations in diabetes have been shown to be effective in the pre-COVID-19 era [3]. Health care providers in diabetes are fortunate to have access to a range of technologies which can facilitate remote healthcare delivery, easing the burden on both patients and clinicians. Data management platforms that collect glucose and insulin data for example, maximise the value of virtual consultations and hence ensuring appropriate patients continue to have access to the most suitable technologies is of the utmost importance at this time.

The provision of diabetes technologies to patients satisfying the relevant National Institute for Health and Care excellence (NICE) criteria for funding, has been negative impacted by the COVID-19 pandemic. The commencement of new patients on CSII and CGM, as well as the renewal of insulin pumps, has been significantly delayed. Considering the patients who require CGM and CSII, are often those with problematic hypoglycaemia, the delay these
patients are experiencing whilst waiting to start technology, is a safety concern as they are at increased risk of adverse outcomes.

Although diabetes technologies have changed the management of type 1 diabetes, devices alone are not useful unless the patient receives education, training, follow-up and ongoing evaluation [4]. Diabetes specialist nurses (DSNs) and dieticians are often tasked with delivering this time-consuming service. In the pre-COVID era, education and training sessions for new devices could take place in groups. For example, traditionally, insulin pump starts were facilitated by a DSN and/or a dietician and an industry representative who delivered the clinical and technical training respectively, to a group of approximately 4 patients, over 120-180 minutes. Similarly, for pump renewals, patients attended 1 information session, in groups, where all pump options were discussed, prior to making a decision on their pump upgrade. With ongoing COVID-19 precautions and the limited resources available as a result of COVID-19, individual face-to-face pump starts and information sessions are unlikely to be feasible in busy centres with large cohorts of patients with type 1 diabetes (T1DM) for the foreseeable future.

To date, there has been widespread variation in access to and reimbursement of CGM systems for patients with T1DM across the UK [5]. Whilst funding has been the predominant barrier to the adoption of CGM in clinical practice, developing a pathway for CGM starts is particularly relevant at this time as NHS England have recently granted approval for their use in pregnancy. As CGM has proven benefit in pregnancy, it is imperative that pregnant women are commenced on CGM without delay and remote starts are the best way to facilitate this.

Although we are operating in very challenging time in healthcare, this pandemic has given us the opportunity to develop virtual pathways that may change the way we deliver diabetes care entirely in the future. We must now focus on utilising the technology available to us, as well as the expertise of both industry and clinical staff to ensure efficient and effective use of our limited resources in providing ongoing equitable access to diabetes technologies for those patients in whom they are indicated.

Aims of the guideline

• To provide diabetes services a DTN and industry approved pathway to them to enable people with diabetes to access technology - responding to limitations placed by Covid-19
• To create a platform that facilitates patient choice across all available technologies
• To allow for “renewals” for the thousands of patients whose pumps are now out of warranty during the ongoing Covid pandemic
• To access to “ new to technology” patients where this has been reduced or stopped due to Covid restrictions.
• To facilitate the use of industry specialists and integrate with specialist nurses to maintain diabetes technology services anticipating that specialist nurse time will be significantly reduced in the coming months
Choice of diabetes technology

For an individual living with diabetes, the choice of diabetes technology is key. This is a big decision for them, and for items such as tethered insulin pumps, they need to live with these devices and interact with them multiple times a day for a 4 – year period. The technology is changing very rapidly and there are many factors that can influence their choice of device.

In normal times, it would be usual for them to speak to a healthcare specialist about the choice of device, or many centres run “shop and tell” sessions where industry partners allow users to have a look and hold these devices and understand key differences between them before they make their choice. However the ongoing pandemic and restrictions enforced have prevented that from happening.

DTN has been working with industry colleagues to create an on-line virtual showroom that will act as a repository for information from the different providers that can act as a place where patients can go and review information from the manufacturers on different devices, that may help them make a decision.
Flow chart for commencing CGM remotely

Decision made by MDT to commence CGM → Virtual consultation to direct to online resources [DTN website] → Online resources - DTN Discussion with clinical team → Decision re device and mode of training agreed with patient*

- Face-2-face training
  - As per local protocol

- Virtual training session**
  - Clinical team
    - Order for device sent to company
    - Consent form sent to patient for completion
    - Completed consent form and settings sent to industry rep.
    - Date/time of virtual training session agreed with patient
    - Clinical training with DSN
    - Checklist completed
    - Joint sign-off
    - Follow-up

- Industry
  - Device sent to patient directly
  - Confirmation of settings by industry rep
  - Technical start with industry rep.
  - Checklist completed

*Decision on Face-2-face Vs virtual training; (i) access to required technology (computer, camera, microphone) (ii) patients technical literacy (iii) patient preference

**Consider patient suitability for group training Vs 1:1 training
Pathway for commencing CGM remotely

- Decision made by multidisciplinary team (MDT) that CGM is indicated
- Virtual consultation with the patient to discuss decision, to inform of the benefits of CGM and to direct the patients to online resources to gather information on different devices available
- Online resources include the DTN website (Virtual showroom when available) and individual company websites
- Patient liaises with diabetes team by phone or email confirming their choice of CGM device. Discussion with patient regarding preferred mode of training on CGM device. Consider – access to technology (computer, camera, microphone), technical literacy and patient preference

- **Option 1 - Face to face training**
  - As per local protocol

- **Option 2 – Virtual training session**
  - Order for CGM device sent by HCP to company
  - Company sends CGM device directly to patient or to clinic depending on whether for virtual or face-to-face start respectively.
  - Consent form sent to patient. The consent form should indicate that the patients contact details and relevant clinical information will be shared with the company providing the CGM for the purpose of virtual training
  - Patient returns completed consent form to the diabetes team and confirms preferred contact details
  - HCP sends the consent form, patient contact details and the pre-determined settings for the CGM device (e.g. alarm thresholds) to the industry representative via secure email or password protected document
  - Industry representative provides written confirmation that the settings have been received and confirms settings again with HCP
  - Date and time for virtual training session agreed with patient, DSN and industry representative; This may be a joint training session or may be conducted separately, but ideally on the same day
  - Technical training conducted with industry representative
  - Clinical training conducted by DSN
  - Industry representative completes technical training checklist (*Supplementary material*) confirming they are happy for the patient to proceed using the device and that the following components of training have been covered;
    1. Settings
    2. Insertion and disposal
    3. Charging
    4. Connections to devices
(v) Arrows and alerts
(vi) Data sharing options
(vii) Wearing (adhesives)
(viii) Troubleshooting and helplines

- DSN completes clinical training checklist (*Supplementary material*) confirming they are happy for the patient to proceed using the device
- Patient completes checklist (*Supplementary material*) confirming they have understood the training and feel comfortable to proceed using the device
- Dedicated HCP to conduct follow-up phone consultation within 1 week
Flow chart for commencing CSII remotely

Patient meets criteria for CSII/patient due pump upgrade

DEVICE CHOICE

Device choice and mode of training agreed with patient

Device ordered from company and sent directly to patient

Face to face training

Time agreed with DSN/Industry representative

Patient attends diabetes centre for training

Joint training session with DSN and industry rep.

Clinical checklist completed by DSN

Technical checklist completed company rep.

Decision to proceed

Follow up day 3,5,7 with HCP

Virtual training (Group of 2)

Consent completed by patient and returned to diabetes centre

Written confirmation of settings sent by industry rep. to HCP

Data arranged for virtual training

Technical training session delivered (2 hours 30mins)

Checklists completed by company rep/DSN/patient

Decision made at T1DM MDT to proceed with CSII

Manufacturers:

- MEDTRONIC
- OMNIPOD
- TANDEM
- ACCU-CHEK
- SOOIL
- YPSOMED

Decision to proceed

Follow up day 3,5,7 with HCP

CGM and CSII remote start pathway. Version 1.1, October 2020
Decision as per local protocols, that CSII is indicated

- Virtual consultation with the patient to discuss pump options. Patient to be directed to online resources including the DTN website and individual industry webpage
- Patient liaises with diabetes team by phone or email confirming their choice of pump. Decision made with the patient regarding preferred mode of training

- **Option 1 - Face to face training**
  - As per local protocols

- **Option 2 – Virtual training session**
  - Order for device sent by HCP to company
  - Company sends device directly to patients home
  - Consent form sent to patient. The consent form should indicate that the patients contact details and relevant clinical information will be shared with the company providing the pump for the purpose of virtual training
  - Patient returns completed consent form to the diabetes team and confirms preferred contact details
  - HCP sends the consent form, patient contact details and the pre-determined settings for the pump (e.g. basal rates, insulin:carb ratios (ICR), insulin sensitivity factor (ISF)) to the industry representative
  - Industry representative provides written confirmation that the settings have been received and confirms settings again with HCP
  - Date and time for virtual training session agreed with patient, DSN and industry representative
  - Technical training conducted with industry representative. The following aspects of insulin pump therapy should be reviewed;
    (i) Basic principles of insulin pump
    (ii) Pump setup – basal rates/temporary basal rates/ICR/ISF/Bolus/Extended bolus
    (iii) Setting up the home screen
    (iv) Cannula insertion/set changes/disposal
    (v) Device specific functions
    (vi) Download and data sharing
    (vii) Technical support
    (viii) Ordering supplies
    (ix) Practical aspects (Wearing/accessories)
(x) Interconnecting devices if applicable (sensor augmented pump, predicted low glucose suspend, hybrid closed loop)

- Industry representative completes technical training checklist *(Supplementary material)* confirming they are happy for the patient to proceed using the device
- Industry representative contacts DSN to confirm the clinical training has taken place and happy to proceed
- DSN completes clinical training. The following aspects of insulin pump therapy should be reviewed;
  (i) Brief review of technical training – Insulin profiles, set changes
  (ii) Sick day rules
  (iii) Managing hypoglycaemia
  (iv) Pump failure
  (v) Travel
  (vi) Clinical support
  (vii) Any other patient specific advice

- DSN completes clinical training checklist *(Supplementary material)* confirming they are happy for the patient to proceed using the device
- Patient completes checklist confirming they have understood the training and feel comfortable to proceed using the device *(Supplementary information)*
- Dedicated HCP to conduct follow-up phone consultation at day 3, 5 and 7
Supplementary material

Consent form for virtual training for both CGM and CSII remote starts

**PARTICIPATION IN VIRTUAL TRAINING SESSIONS**

*Consent Form: Must be completed prior to virtual training*

**Name of participant:** ________________________________________________________________

<table>
<thead>
<tr>
<th>Please tick the appropriate boxes</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td><strong>Data sharing</strong></td>
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<td></td>
</tr>
<tr>
<td>I consent to my <strong>name and contact information</strong> being shared by my diabetes team with the company representatives for the purpose of contacting me at a later date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consent to being contacted by a company representative for the purpose of conducting a virtual training session</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I consent to my <strong>clinical information</strong> being shared with the company representative for the purpose of conducting a virtual training session. This will include settings for my device (insulin pump and/or continuous glucose monitor)</td>
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<td></td>
</tr>
<tr>
<td>I consent to participating in a virtual training session in a small group with up to 3 other individuals</td>
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<td></td>
</tr>
<tr>
<td>I understand that I can withdraw my consent at any time and that I am not obliged to attend a virtual training session</td>
<td></td>
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</table>

**Preferred contact details:**

**Email:**

_____________________________________________________________

**Phone number:**

_____________________________________________________________
Checklist to send to industry representative for CGM setup

<table>
<thead>
<tr>
<th>Name:</th>
<th>Insulin pump:</th>
<th>Device:</th>
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<tbody>
<tr>
<td>Trainer:</td>
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<table>
<thead>
<tr>
<th>Low settings</th>
<th>High settings</th>
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<tr>
<td>Low limit</td>
<td>High limit</td>
</tr>
<tr>
<td>Time segments (from-to)</td>
<td>Time segments (from-to)</td>
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<tr>
<td>Low level (mmol/l)</td>
<td>High level (mmol/l)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Alert before low</th>
<th>Alert before high</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alert on low</td>
<td>Alert on high</td>
</tr>
</tbody>
</table>

| Suspend on low (if required) |

Comments (e.g. for closed loop):

Signed: ________________________________  Print: ________________________________

Date: ___/___/_____

HCP ________________________________  HCP ________________________________
Dexcom G6 sensor technical checklist
Training Checklist

For detailed, step-by-step instructions on how to use the Dexcom G6 Continuous Glucose Monitoring System, refer to the user guide at dexcom.com/guides. Use this checklist, along with the Start Here and Using Your G6 guides, as you train on the Dexcom G6® Continuous Glucose Monitoring (CGM) System.

☐ Introduce CGM and Components
- Review G6 Overview and What it Does in Start Here Guide

☐ Set Up Display Device
- Receiver: To turn on the receiver, press and hold the button for 2 seconds.
- Dexcom G6 App*: Download and open
  1. Follow onscreen instructions to enter:
     • Low and High Alerts
     • Sensor Code – to avoid daily calibrations
     • Transmitter SN

*For a list of compatible devices see: dexcom.com/compatibility

☐ Insert Sensor and Attach Transmitter
- Choose sensor site
- Insert sensor with applicator
- Snap in transmitter

☐ Pair Transmitter and Start Sensor
- 1. Wait for transmitter to pair
- 2. Tap Start Sensor
  • No readings during 2-hour warmup
  • Keep display device within 20 feet during warmup
Home Screen Overview

Review Home Screen Overview in Using Your G6 with patient.

Home screen shows
- Sensor Glucose Reading
- Trend Arrow
- Trend Graph
- High and Low Alert Levels

Treatment Decisions

Review Treatment Decisions in Using Your G6 with patient.

Use your meter if
- Your G6 readings don’t match your symptoms
- Your G6 doesn’t show both a number and arrow

Ending Sensor Session

- Remove sensor and transmitter together from body
- Remove transmitter from holder
- KEEP TRANSMITTER.

Dexcom Support Teams

Medtronic Guardian Sensor 3 checklist

CGM Training Checklist

Patient Name

Insulin Pump Model

Medtronic Trainer

Healthcare Professional

The following have been programmed and reviewed

- Reviewed Getting Started Guide

High Settings
- Time Segments & Limits
- Alert before high
- Alert before high
- High Snooze
- Alert on high
- Rise Alert
- Rise Limit

Low Settings
- Time Segments & Limits
- Suspend before low
- Alert before low
- Suspend on low
- Alert on low
- Suspend on low
- Low Snooze

Starting the Sensor & Calibration
- Starting New Sensor & Warm-up
- Reading Home screen & icons
- Sensor Status screens
- Accessing Sensor Graphs
- Frequency of Calibration
- Optimal calibration times

Suspend by Sensor topics have been reviewed:
- Suspend by Sensor messages
- Cleaning alerts and alarms
- Siren and emergency message
- Auto Mode (MM6700 only)

- Suspend by Sensor Home screen
- Manual Resume
- Auto Resume (based on SG: 2 hour max)

Common Alerts have been reviewed:
- Calibrate now
- 8s not received
- Lost sensor signal
- Sensor Expired
- Calibration not accepted

- Change Sensor

Additional topics have been discussed:
- Connecting pump and transmitter
- Airplane Mode
- Alert Silence
- calibration Reminder
- BG confirmations required for treatment decisions

- Single, double, and triple trend arrows
- Steps for applying overlay correctly
- Additional tapping options
- Site selection, rotation, and preparation
- Removal for X-ray, CT scan, MRI

The following have been completed:
- Verified all settings were entered correctly

- Follow-up plan outlined

Comments

Date: ____________________  Trainer’s Digital Signature: ____________________

CGM and CSII remote start pathway. Version 1.1, October 2020
Clinical training checklist for CGM remote starts
To be completed following virtual consultation with the patient

1. Name of trainee

2. Date of training
   _____/_____/________

3. Device on which the training is being undertaken
   ______________________________________________________________________

4. Please ensure each of the following have been discussed during the training session.

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<thead>
<tr>
<th>Topic</th>
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<th>No</th>
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</thead>
<tbody>
<tr>
<td>Discuss aims of therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Review sensor application technique</td>
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</tr>
<tr>
<td>How and when to calibrate (if required)</td>
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<tr>
<td>Targets for time in range/hypo/hyperglycaemia</td>
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<td>Proposed alarm alerts High</td>
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<tr>
<td>Low</td>
<td></td>
<td></td>
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<tr>
<td>How to interpret the CGM data – understanding the arrows</td>
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<tr>
<td>When to check a blood glucose</td>
<td></td>
<td></td>
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<tr>
<td>How to remove and dispose of sensor</td>
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<td></td>
</tr>
<tr>
<td>How to access support (DDC email/phone number/technical support)</td>
<td></td>
<td></td>
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<tr>
<td>How to share data with HCP</td>
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<tr>
<td>Time allowed for questions</td>
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</tbody>
</table>

5. I believe the above named patient demonstrates sufficient understanding of this device to proceed safely with its use. Please tick the relevant box.
   Yes [ ]  No [ ]

Signed: _______________________________  Print: _______________________________
Date: _____/_____/_______
Patient checklist for remote CGM start (1)

To be completed after virtual technical training consultation

1. Name of trainee

2. Date of training
   ____/____/_______

3. Duration of training
   ______________________________________________________

4. Device on which the training is being undertaken
   ______________________________________________________

5. I confirm that I have understood the contents of the training today and wish to proceed with the use of this device. Please tick the relevant box.

   Yes   ☐    No   ☐

Signed: ________________________________    Print: ________________________________

Date: ____/____/_______
Patient checklist for remote CGM start (2)

To be completed after virtual clinical training consultation

1. Name of trainee

2. Date of training
   ______/_____/_______

3. Duration of training
   ________________________________________________

4. Device on which the training is being undertaken
   ________________________________________________

5. I confirm that I have understood the contents of the training today and wish to proceed with the use of this device. Please tick the relevant box.

   Yes [ ]  No [ ]

6. Do you have any concerns that you would like to discuss prior to using this device?
   ________________________________________________
   ________________________________________________

Signed: ___________________________  Print: ___________________________

Date: ______/_____/_______
Checklist to send to industry representative for CSII setup

Patient name: ___________________________  Date: ___/___/____

Device: ________________________________

**Current regime**

Basal: ________________________________

<table>
<thead>
<tr>
<th>Bolus</th>
<th>Breakfast</th>
<th>Lunch</th>
<th>Dinner</th>
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**Current TDD:** ____________________
(Total daily dose)

**Basal settings**

<table>
<thead>
<tr>
<th>Time (from-to)</th>
<th>Rate (units/hr)</th>
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<tbody>
<tr>
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**Bolus Calculator settings**

<table>
<thead>
<tr>
<th>Insulin:carb ratio</th>
<th>Time (from-to)</th>
<th>Ratio</th>
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<tbody>
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<td>Lunch</td>
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<tr>
<td>Dinner</td>
<td></td>
<td></td>
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<tr>
<td>Supper</td>
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<thead>
<tr>
<th>Correction bolus</th>
<th>ISF (mmol/unit)</th>
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**Target ranges (mmol/l)**

<table>
<thead>
<tr>
<th>Day</th>
<th>Night</th>
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**Pre-set temp basal**

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<thead>
<tr>
<th>Pre-set</th>
<th>Temp (%)</th>
<th>Duration (hr:min)</th>
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<tbody>
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<td>Low</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate</td>
<td></td>
<td></td>
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<tr>
<td>High</td>
<td></td>
<td></td>
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<tr>
<td>Sick</td>
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**Reminders**

<table>
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<tr>
<th>Personal</th>
<th>Bolus blood glucose check</th>
<th>Missed meal bolus</th>
<th>Low reservoir</th>
<th>Set change</th>
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**HCP Name:** ________________________________  **HCP Signature:** ________________________________
Technical training checklists – Generic template
Each training session will vary depending on which device the patient is being trained on. The following document should be used to guide the technical training session (conducted by industry representative) in the absence of a product specific checklist.

- **Introduction**
  - Battery types and insertion
  - Home screen
  - Buttons and notification lights
  - Startup
  - Menu/Icons
  - Lock/unlock

- **Infusion sets**
  - Filling reservoirs/pods/cartridge
  - Infusion set types
  - Tubing
  - Inserting the cannula
  - Insertion sites
  - Best practice
  - Disposal

- **Basal profiles**
  - Basal pattern setup
  - Temporary basal rates
  - Maximum basal delivery
  - Suspend basal insulin
  - Resume basal insulin delivery

- **Bolus profiles**
  - Bolus advisor setup
  - Max bolus
  - Dual/square wave bolus

- **Alerts and alarms**
  - Notification lights
  - Display icons
  - How to respond to an alarm

- **Safety and best practice**
  - Sick day rules
  - Hypoglycaemia
  - Tips and tricks
  - Accessories

- **Utilities**
  - Airplane mode
  - Display options
  - Time and date

- **Interconnecting devices**
  - How to operate the handset
  - How to pair with CGM

- **Data download and sharing**
  - Which apps are required
  - How to download own data
  - How to share data

- **Technical supports**
  - How to order supplies
  - Contact detail of helpline

Name of Trainer

Signed.
Medtronic Insulin pump training checklist

MiniMed™ Insulin Pump Training Checklist

<table>
<thead>
<tr>
<th>Patient Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insulin Pump Model</td>
</tr>
<tr>
<td>Infusion Set</td>
</tr>
<tr>
<td>Trainer</td>
</tr>
<tr>
<td>Date</td>
</tr>
</tbody>
</table>

The following have been programmed and reviewed
(Please only tick what has been covered)

**Introduction:**
- Battery Functions
- Battery: type and insertion
- Home Screen
- Pump unlock/Deepmode
- Status Screens & icons
- Menu Review
- Audio Review
- Device option - ConnectDevice (if using Linked meter)

**Basal:**
- Basal Pattern Set up
- Review and Save
- Set Multiple rates
- Max basal
- Temp basal
- MAX BOLUS
- Dual/Square Wave

**The following have been completed:**
- Settings entered to new pump and insulin Pump Settings guide
- Verified all settings to be correct
- Active Insulin has been cleared
- Follow-up plan
- Patient demonstrated reservoir & infusion set change

**Alerts and Alarms:**
- Notification Light
- Audio Indication
- Display Icons
- Steps to take to address and alert or alarm

**Additional features were covered in training:**
- History:
  - Summary
  - Daily History
  - Alarm History
  - Event markers

**Reminders:**
- Set change reminder
- Low reservoir
  - Other

**Safety & Best Practice:**
- Site rotation

**Utilities:**
- Airplane Mode
- Display Options
- Time and Date
- Self-Test
  - Other

**Comments**

**Trainer Digital Signature**
CGM and CSII remote start pathway. Version 1.1, October 2020
Insulin Pump Training Checklist
For use with t:slim X2™ Insulin Pump

<table>
<thead>
<tr>
<th>Patient's Name:</th>
<th>Date of Birth:</th>
<th>BG Before Training:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Training Date:**

**Healthcare Provider (HCP):**

**Pump Serial Number:**

**Knowledge Assessment**

**Most Recent Diabetes Education Provided By:**

- Pump therapy basic concepts: Basal/Bolus, Insulin to Carb Ratio, Correction Factor, Insulin on Board, single patient use only
- Rechargeable lithium polymer battery, best battery charging practices, and initial message and charge
- Type of Insulin: __________ NovoRapid® (72 hours) __________ Humalog® (48 hours)
- t:slim X2™ Insulin Pump User Guide
- Aseptic/Clean Technique
- Set Time and Date on pump (importance for accuracy of settings and data)

**Understanding and Using the T:SLIM X2 Insulin Pump**

**Pump Overview: Touch screen and general navigation**

- Screen On/Quick Bolus Button
- Touch Screen - turns off after 3 accidental screen taps
- Screen Lock - turns off pump screen after each interaction
- Screen Options: Timeout, PIN code
- Home Screen and home “T” button
- Status, Bolus and Options Screen
- My Pump Screen
- Keypad Screens: Numbers and Letters
- Importance of Active Confirmation Screens
- Review the icons and symbols on touchscreen

**Personal Profiles**

- Creating a New Personal Profile: name, timed settings, and bolus settings
- Edit (Review), Activate, Duplicate, Delete, and Rename a Personal Profile
- 0.1 unit/hr minimum basal (0.001 increments)
- 25 unit maximum bolus

**Loading Cartridge**

- Change Cartridge - removal and disposal of used cartridges
- Use of room temperature insulin
- Filling syringe
- Fill Cartridge – Minimum/Maximum cartridge fill, removing air, troubleshooting air bubbles
- 300 unit cartridge capacity
- Minimum fill of 95 units plus tubing
- Fill Tubing, Fill Cannula, Site Reminder
- Fill estimate volume
- Do not add or remove insulin after the Load Sequence

**Infusion Sets**

- Type/Cannula length: __________
- Proper set selection and site placement
- Change every 2-3 days as directed by HCP
- Avoid changing infusion set at bedtime
- Check BG 2 hours after site change
- Customise as necessary (adhesive issue, redness, absorption)

**Delivering Boluses**

- Standard food bolus, adding multiple carbs, cancelling bolus
- 0.05 unit minimum bolus (0.01 increments)
- Entering BG value, correction bolus, food bolus with correction
- Extended bolus
- Quick bolus
- Above/Below BG Target and IOB — Bolus Calculator Algorithm

**Alert Settings**

- Reminders: Low BG, High BG, After Bolus BG, Missed Meal Bolus
- Alerts: Low Insulin, Auto-off (default ON)

**Pump Settings**

- Quick Bolus: grams or units, increments
- Sound Volume: Low, Medium, High or Vibrate
- Display Settings: Screen Time out, Feature Lock, Language
- Bluetooth® Settings: On/Off
- Time and Date (importance for accuracy of settings and data)
- Review History: Insulin Delivery, Bolus, Basal, Load, BG, Alerts and Alarms and CGM (t:slim X2™ with Dexcom G6® only)

**Temporary Basal Rate**

- Start and Stop a Temp Rate

**Safety**

- Aseptic/Clean Technique
- Hazards associated with small parts (asphyxiation)
- Exposure to electromagnetic radiation or MRI
- Pump Info: t:slim X2 Insulin Pump Serial Number, Customer Care contact information, warranty reviewed
- Program Customer Care into phone if available
- Stop and Resume Insulin Delivery

**My CGM (if applicable)**

- Start/Stop Sensor, calibrate CGM
- CGM graph- change display timeline, trend arrows
- CGM alerts: High/Low, Rise/Fall, Out of Range
- Settings: Transmitter ID, Volume
- Link to online training modules
- Optimising connection between pump and sensor (pump screen facing out)
UNDERSTANDING AND USING THE T:SLIM X2 INSULIN PUMP (cont)

**Basal-IQ™ Technology**
- Turning Basal-IQ on and off
- Monitoring Basal-IQ activity from the pump home screen
- When the pump will suspend/resume
- What the screen icons mean
- Bolus scenarios
- How the pump handles extended boluses and temp rates
- Connecting you CGM transmitter and the pump
- Starting a new CGM sensor session
- CGM distance

**Control-IQ™ Technology**
- Uses CGM values (current and predicted within 30 min) to adjust insulin delivery rates and amounts. Target ranges are not customisable
- Decreases or suspends insulin when CGM falls, increases basal insulin and delivers correction boluses when CGM rises. Auto correction boluses are based on CGM and correction factor. 60% of the calculated correction bolus will be delivered if at least 60 min have passed since the last bolus (manual or auto). Maximum frequency of auto-correction boluses is every 60 min. Can be manually cancelled
- Personal Profile and Control-IQ settings required: Basal rate, Correction Factor, Carb Ratio, Weight, Total Daily Insulin. Control-IQ feature can be enabled after required settings are entered
- Turn Control-IQ on: OPTIONS > My Pump > Control IQ (tap ON). An active temporary basal rate or extended bolus will be cancelled following a notification. The diamond icon will be visible in the upper left corner of the Home Screen
- Review all Control-IQ icons and visual indicators. Control-IQ diamond icon: Blue on the top indicates basal is increasing; orange on the bottom indicates basal is decreasing; red on the bottom indicates basal is suspended
- Control-IQ Alerts: Low Alert, High Alert, 2 Hr Max Alert
- Manually start or stop sleep or exercise: OPTIONS > Activity > START or STOP. Respective icons will be visible on the Home Screen. Sleep schedule setting is recommended and will activate automatically once set
- OUT OF RANGE: OUT OF RANGE alert and icon will appear on the home screen when the CGM transmitter and pump are not able to communicate. Control-IQ will continue to adjust basal rates and deliver correction boluses for the first 15 min, after which Control-IQ will stop and the pump will revert to delivery per open-loop settings. Control-IQ will automatically resume when the two devices are within range
- Avoid manual injections or inhaled insulin while using Control-IQ
- Stopping insulin when disconnecting from the pump

**ADDITIONAL INFORMATION**

**Responding to Reminders, Alerts and Alarms**
- Malfunction – call Customer Service: 0800 012 1560
- Reminders: Low BG and High BG (retest), Site Change, After Bolus BG, Missed Meal Bolus
- Alerts: Low Power, Resume Pump, Max Hourly Bolus, Pump Stopped, Incomplete Bolus, Incomplete Profile, Incomplete Cartridge Load, Incomplete Cannula Fill, Incomplete Tubing Fill
- Alarms: Low Power, Shutdown, Empty Cartridge, Cartridge Error, Temperature, Altitude, Occlusion. Alarms will stop insulin delivery
- Respond to alarm quickly and appropriately. Disconnect from insulin pump if malfunction or damage occurs
- Diasend® set up, download regularly
- IPX7 (tested up to 3 feet/0.9 meters for 30 minutes)
- Backup plan (injections) discussed with HCP
- Back-up supplies to carry – daily and for travel
- Ordering insulin pump supplies
- X-ray, extreme temperatures, airport travel, and hospital precautions
- Regular maintenance and cleaning (Storage/Shelf Mode)
- Review all Warning/Precautions and Safety Tips (See product User Guide)

**IMPORTANT TIPS**
- When wearing the t:slim X2 Insulin Pump, never disconnect from the tubing connector
- At regular intervals, check tubing for air and connector for tight connection. Tighten connector and then twist again
- Always disconnect at site before tightening lock
- Call HCP for dosing issues or BG questions
- Troubleshooting and treating hyperglycaemia – occlusions, site issues, air in tubing, loose connections, sickness, pumps settings per HCP guidelines
- Troubleshooting and treating hypoglycaemia per HCP guidelines
- Verified that pump settings are correct and in accordance with the Transfer Pump Settings Worksheet
- Consider IOB and follow HCP recommendations prior to first t:slim X2™ Pump bolus
- Clips, cases, and wearing the t:slim X2™ Pump
PARTICIPANT SIGNATURE
(I certify that I have been provided with education on, and have a clear understanding of, the items checked above.)

SIGNATURE
DATE:

INSULIN PUMP TRAINER SIGNATURE
(I certify that I have provided education on the items checked above and have accurately documented the details of this training session.)

SIGNATURE
DATE:

REMEMBER TIPS
- Infusion set trouble shooting/changing cartridge
- Importance of confirmation screens, placement of decimal points
- Importance of verification of accurate current pump settings
- Alerts/Alarms – Occlusion, Auto Off, setting Max Bolus
- Tips on proper bolus technique, cancelling a bolus
- Importance of a back-up plan (per HCP guidelines) and supplies
- Diasend® setup, downloads and reports

PATIENT CONSENT STATEMENT
You are giving your consent that we are able to contact you in relation to our products and services, at any time, unless you advise otherwise and choose to withdraw your consent. You may withdraw your consent in writing or verbally, through contact with our Customer Service team on 0800 012 1560, or through contact with any one of our colleagues. Please note we will only use your contact details for the express purpose of contacting you to discuss the t:slim X2™ Insulin Pump and related services. We will not share any of your details with any other third party without your consent.

For more information on privacy, and how we process personal data please visit https://www.airliquidehealthcare.co.uk/privacy-notice.

NAME:
DATE:

SIGNATURE
EMAIL:
Accu-Chek Insight pump checklist

**Accu-Chek Insight**

**Remote Pump Training Checklist**

Prior to the commencement of any remote pump training, the below information must be completed by the patient / caregiver using the Accu-Chek insulin pump.

<table>
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<th>To be completed by the patient / caregiver</th>
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<td>Address 2</td>
</tr>
<tr>
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<tr>
<td>Postcode</td>
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<tr>
<td>Patient Date of Birth</td>
</tr>
<tr>
<td>Pump Serial Number</td>
</tr>
</tbody>
</table>

We ask you to provide your personal information (full name, address, date of birth and pump serial number) so that we can create your Roche Diabetes Care support account. We need to collect this information from you to comply with a legal obligation on us to provide, and to demonstrate that we have provided, training on the use of the Accu-Chek insulin pump to you. If you do not wish to provide this information, unfortunately you will not be able to start using the Accu-Chek insulin pump as we will not be able to provide the training to you. Please see our privacy statement at [www.accu-chek.co.uk/privacy](http://www.accu-chek.co.uk/privacy)

**Before remote pump training may take place it must be confirmed that the patient has the following items available.**

- Accu-Chek insulin pump
- Charged Diabetes Manager (handset)
- Insulin cartridge / vial
- Infusion sets (and insertion device)
- *I the patient / caregiver confirm that I consent to taking part in the remote pump training and have all the necessary equipment available to me (as listed) for the remote pump training to commence.*

Prior to the commencement of any remote pump training, the below information must be completed by the Healthcare Professional and a copy of the completed form (patient and HCP information) must be sent back to your Roche Diabetes Care Trainer.

<table>
<thead>
<tr>
<th>To be completed by the Healthcare Professional</th>
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<tbody>
<tr>
<td>Name of Healthcare Professional*</td>
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<tr>
<td></td>
</tr>
<tr>
<td>Hospital</td>
</tr>
<tr>
<td>Date</td>
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*We will process your personal data (full name) for the purposes of fulfilling a contract and providing customer services to you. Please see our privacy statement at [www.accu-chek.co.uk/privacy](http://www.accu-chek.co.uk/privacy)*
# ACCU-CHEK® Insight

## General Overview

- Viewed QRGs: Y / N
- Viewed starter guide: Y / N
- Training videos: Y / N
- Review of Button functions and Menu system

## Basic Training

### Pump set up
- Insert battery, state and select type, frequency of change and why
- Set time and date

### Menus- stop, run and pause
- Program basal rates manually

### Settings
- Modes
- Bolus setting (max Bolus)
- Key lock

### Infusion sets and cartridge
- Rewind piston rod
- Insert cartridge
- Attach adapter and tubing

### Prime tubing
- How to check for air bubbles and remove

### How often to change tubing, insulin and adapter

### Basal Insulin - How to
- Programme a basal profile
- Activate a different profile

### Programme a temporary basal rate
- Pre-set a temporary basal rate

### Cannula
- Insert cannula and state prime volume of cannula used
- Site selection and rotation
- When/how to connect and disconnect

### When to change cannula and how often

### Handset
- On/off
- Set up wizard with:
  - Warning limits
  - Carbohydrate setting
  - Blood glucose target range
  - Carbohydrate ratio
  - Insulin sensitivity ratio
  - Health events
  - Advice option
  - Blood glucose test reminders

### Status screen with:
  - Active basal
  - Cartridge volume
  - Battery volume for pump and handset
  - Explain “No Active Bolus”
  - Blood glucose status

### Main menu/touch screen use & icons
- Bolus advice with /
  - without a BG test
- What active insulin is
- Access pump menu and data
- Meter settings
- Screen and meter management

## General advice

- Ordering supplies
- How and when to contact the Pump Careline (08007312261)
- Pump accessories

I hereby verify that the patient / caregiver named above has demonstrated to me that they can perform the tasks set out above in a correct and safe manner:

Signed Roche Diabetes Care Representative

Date

I hereby confirm that the patient/caregiver named above has participated in this training and I am satisfied that they are able to continue using the Accu-Chek insulin pump in a correct and safe manner:

Signed Healthcare Professional

Date

Page 2 of 3
Further/Advanced Training

- **Pump set up – How to**
  - Program basal rates - configuration
  - Activate another basal profile
  - Switch Bluetooth®/flight mode on and off

- **Handset – How to**
  - Adjust time blocks
  - How to change
  - Bolus advice
  - Health events
  - Advice options

- **Data**
  - Access quick data on pump
  - Access data history on pump
  - Set Multaweave/Extended
  - Enter pen/syringe use
  - Change meter settings
  - Switch Bluetooth®/flight mode on and off
  - View data management via the handset

- **Optimising pump therapy**
  - Bolus reminder
  - Missed bolus reminder
  - Blood glucose test reminders

- **Additional features covered**

---

Signed Roche Diabetes Care Representative: 

Date: 

Signed Healthcare Professional: 

Date: 

---

CGM and CSII remote start pathway. Version 1.1, October 2020
Accu-Chek Solo pump checklist

**ACCU-CHEK® SOLO**
Remote Pump Training Checklist

Prior to the commencement of any remote pump training, the below information must be completed by the patient / caregiver using the Accu-Chek insulin pump.

**To be completed by the patient / caregiver**

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>Caregiver Name</th>
</tr>
</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>Patient Address 1</th>
<th>Address 2</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Patient Date of Birth</th>
<th>Pump Serial Number</th>
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</thead>
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<td></td>
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</table>

We ask you to provide your personal information (full name, address, date of birth and pump serial number) so that we can create your Roche Diabetes Care support account. We need to collect this information from you to comply with a legal obligation on us to provide, and to demonstrate that we have provided, training on the use of the Accu-Chek insulin pump to you. If you do not wish to provide this information, unfortunately you will not be able to start using the Accu-Chek insulin pump as we will not be able to provide the training to you. Please see our privacy statement at [www.accu-chek.co.uk/privacy](http://www.accu-chek.co.uk/privacy)

Before remote pump training may take place it must be confirmed that the patient has the following items available.

- Accu-Chek insulin pump
- Charged Diabetes Manager (handset)
- Insulin cartridge / vial
- Infusion sets (and insertion device)

- I the patient / caregiver confirm that I consent to taking part in the remote pump training and have all the necessary equipment available to me (as listed) for the remote pump training to commence.

Prior to the commencement of any remote pump training, the below information must be completed by the Healthcare Professional and a copy of the completed form (patient and HCP information) must be sent back to your Roche Diabetes Care Trainer.

**To be completed by the Healthcare Professional**

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I hereby confirm that the patient/caregiver named above is:

1. eligible to receive remote pump training; and 2. has the proficient skills and equipment to complete this training;

*We will process your personal data (full name) for the purposes of fulfilling a contract and providing customer services to you. Please see our privacy statement at [www.accu-chek.co.uk/privacy](http://www.accu-chek.co.uk/privacy)
# ACCU-CHEK® Solo

## General Overview

<table>
<thead>
<tr>
<th>Viewed QRGs</th>
<th>Y / N</th>
<th>Viewed starter guide</th>
<th>Y / N</th>
<th>Training videos</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Review of Button functions and Menu system</td>
<td></td>
<td>Review of the components of the micropump</td>
<td></td>
</tr>
</tbody>
</table>

### Pump set up
- Assemble and insert the cannula and pump holder using the introducer
- Draw up a reservoir of insulin

### Maintenance
- Frequency of change for
  - Cannula and infusion assembly
  - Reservoir
  - Pump base
- Connection and disconnection
- Cancel a bolus
- Identification and removal of air bubbles

### Basal Insulin - How to
- Programme a basal profile
- Pre-set a TBR

### Diabetes Manager
- On/off
- Charging of handset
- Pin code use and resetting
- Bolus advice, programme/adjust time blocks
- Programme and change health events

### General advice
- Ordering supplies
- How and when to contact the Pump Careline

---

I hereby verify that the patient / caregiver named above has demonstrated to me that they can perform the tasks set out above in a correct and safe manner.

Signed Roche Diabetes Care Representative: [Signature]  Date: [Date]

I hereby confirm that the patient/caregiver named above has participated in this training and I am satisfied that they are able to continue using the Accu-Chek insulin pump in a correct and safe manner.

Signed Healthcare Professional: [Signature]  Date: [Date]

---

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ACCU-CHEK and ACCU-CHEK SOLO are trademarks of Roche.

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Roche Diabetes Care Limited, Charles Avenue, Burgess Hill, West Sussex, RH15 8RY.

Company Registration Number: 9055599

Date of preparation: June 2020  Material Number: H0458E-N0290DD9

This document is intended for the use of Healthcare Professionals and Roche Diabetes Care Trainers.

www.accu-chek.co.uk  www.accu-chek.ie
Accu-Chek Combo pump checklist

Accu-Chek Combo
Remote Pump Training Checklist

Prior to the commencement of any remote pump training, the below information must be completed by the patient / caregiver using the Accu-Chek insulin pump.

To be completed by the patient / caregiver

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Before remote pump training may take place it must be confirmed that the patient has the following items available.

- Accu-Chek insulin pump
- Charged Diabetes Manager (handset)
- Insulin cartridge / vial
- Infusion sets (and insertion device)
- Access to installed configuration software (not mandatory if details entered manually)
- Access to video communication technology such as a webcam or smartphone
- I the patient / caregiver confirm that I consent to taking part in the remote pump training and have all the necessary equipment available to me (as listed) for the remote pump training to commence.

Prior to the commencement of any remote pump training, the below information must be completed by the Healthcare Professional and a copy of the completed form (patient and HCP information) must be sent back to your Roche Diabetes Care Trainer.

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I hereby confirm that the patient/caregiver named above is:
1. eligible to receive remote pump training; and 2. has the proficient skills and equipment to complete this training:

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General Overview

Viewed OMRG - Y / N
Viewed starter guide - Y / N
eLearning - Y / N

- Review of button functions and Menu system

Basic Training

Pump set up
- Insert battery, state and select type, frequency or change and why
- Set time and date
- Menus- stop and run, what is done where
- Program basal rate manually
- Start and stop the pump

Infusion sets and cartridge
- Draw up a cartridge, attach the adapter and tubing
- Rewind piston rod
- Insert cartridge
- Prime tubing
- How to check for air bubbles and remove
- How often to change tubing, insulin and adapter

Cannula
- Insert cannula correctly
- State prime volume and how to prime cannula
- Site selection and rotation
- When/how to connect and disconnect
- When to change cannula and how often

Handset
- On/off
- Use of buttons
- Set up wizard with
  - Warning limits
  - Carbohydrate setting
  - Blood glucose target range
  - Carbohydrate ratio
  - Insulin sensitivity ratio
  - Health events
  - Advice options
  - Blood glucose test reminders
- Main menu screen
- Bolus advice with / without a RX text
- What active insulin is
- Access pump menu and data

General advice

- Ordering supplies
- How and when to contact the Pump Careline
- Pump accessories

I hereby verify that the patient / caregiver named above has demonstrated to me that they can perform the tasks set out above in a correct and safe manner.
Signed Roche Diabetes Care Representative

Signed Healthcare Professional

I hereby confirm that the patient/caregiver named above has participated in this training and I am satisfied that they are able to continue using the Accu-chek insulin pump in a correct and safe manner.
Signed Healthcare Professional

Page 2 of 3

CGM and CSII remote start pathway. Version 1.1, October 2020
Further/Advanced Training

### Pump set up - How to
- Program basal rates - configuration
- Activate another basal profile
- Set a temporary basal rate
- Switch Bluetooth® on and off

### Handset – How to
- Adjust time blocks
- How to change
  - Bolus advice
  - Health events
  - Advice options
- Set Multiwave/Extended
- Enter pen/syringe use
- Change meter settings
- Switch Bluetooth® on and off

### Data
- Access quick data on pump
- Access data history on pump
- Manage/clear a warning/error message
- Access log book on handset
- Access data graphs on handset
- How to download to the computer
- Accu-Chek software

### Optimising pump therapy
- Blood glucose test reminders
- Alarm clock

### Additional features covered

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Signed Roche Diabetes Care Representative | Date
---|---

Signed Healthcare Professional | Date

Page 3 of 3
Clinical training checklist for remote CSII starts
To be completed following virtual consultation with the patient

1. Name of trainee

2. Date of training
   ____/_____/_______

3. Duration of training
   _______________________________________________________________

4. Device on which the training is being undertaken
   _______________________________________________________________

5. Please ensure each of the following have been discussed during the training session. Please tick the relevant box.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Discuss aims of therapy</td>
<td></td>
<td></td>
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<tr>
<td>Review application technique</td>
<td></td>
<td></td>
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<tr>
<td>Changing infusion sets if required</td>
<td></td>
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<tr>
<td>Reviewing home screen</td>
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<td></td>
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<tr>
<td><strong>Pump settings</strong></td>
<td></td>
<td></td>
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<tr>
<td>Time and date</td>
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<tr>
<td>Glucose targets</td>
<td></td>
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<tr>
<td>Basal settings</td>
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<tr>
<td>Temporary basal rates</td>
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<tr>
<td>Bolus settings/calculator</td>
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<tr>
<td>Insulin:carb ratio</td>
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<td>Correction factor</td>
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<tr>
<td>Duration of insulin action</td>
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<td>Maximum bolus</td>
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<tr>
<td>Extended bolus</td>
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<tr>
<td><strong>CGM set up (if required)</strong></td>
<td></td>
<td></td>
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<tr>
<td>Ensure technical training has been completed</td>
<td></td>
<td></td>
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<tr>
<td>Review sensor application technique</td>
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<tr>
<td>How to calibrate (if required)</td>
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<tr>
<td>Targets- Time in range/hyper/hypoglycaemia</td>
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<td>Proposed alarm alerts</td>
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<tr>
<td>When to check a blood glucose</td>
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<td>How to integrate the sensor with the pump</td>
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<td>Low glucose suspend</td>
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<td>Closed loop systems</td>
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<td>How to share data</td>
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<td>Managing hypoglycaemia</td>
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<td>Sick day rules</td>
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<td>Managing ketosis</td>
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<tr>
<td>Playing sport with the pump</td>
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<td>Travelling abroad with the pump</td>
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<td>Compatibility with CT/MRI scans</td>
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<tr>
<td>Using CSII when admitted to hospital</td>
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<td>Troubleshooting if malfunction</td>
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<td>Emergency insulin supplies</td>
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<tr>
<td>How to access support (DDC email/phone number/technical support)</td>
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</tbody>
</table>

6. I believe the above named patient demonstrates sufficient understanding of this device to proceed safely with its use. Please tick the relevant box.

Yes [ ] No [ ]

Signed: ______________________________

Print: ______________________________

Date: ______/_____/_______
Patient checklist for remote pump start (1)

To be completed after virtual technical training consultation

1. Name of trainee

2. Date of training
   ___/___/_______

3. Duration of training
   ______________________________________________

4. Device on which the training is being undertaken
   ______________________________________________

5. I confirm that I have understood the contents of the training today and wish to proceed with the use of this device. Please tick the relevant box.

   Yes [ ]  No [ ]

Signed: ____________________________  Print: ____________________________

Date: ___/___/_______
Patient checklist for remote pump start (2)
To be completed after virtual clinical training consultation

1. Name of trainee

2. Date of training
   ____/____/_______

3. Duration of training

4. Device on which the training is being undertaken

5. I confirm that I have understood the contents of the training today and wish to proceed with the use of this device. Please tick the relevant box.

   Yes [ ]    No [ ]

6. Do you have any concerns that you would like to discuss prior to using this device?

   ______________________________

   ______________________________

Signed: ______________________________

Print: ______________________________

Date: ____/____/_______
References


