

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

Document information			
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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 of 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 as self-management education programmes [2]. Since routine outpatient activity recommenced 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 negatively 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

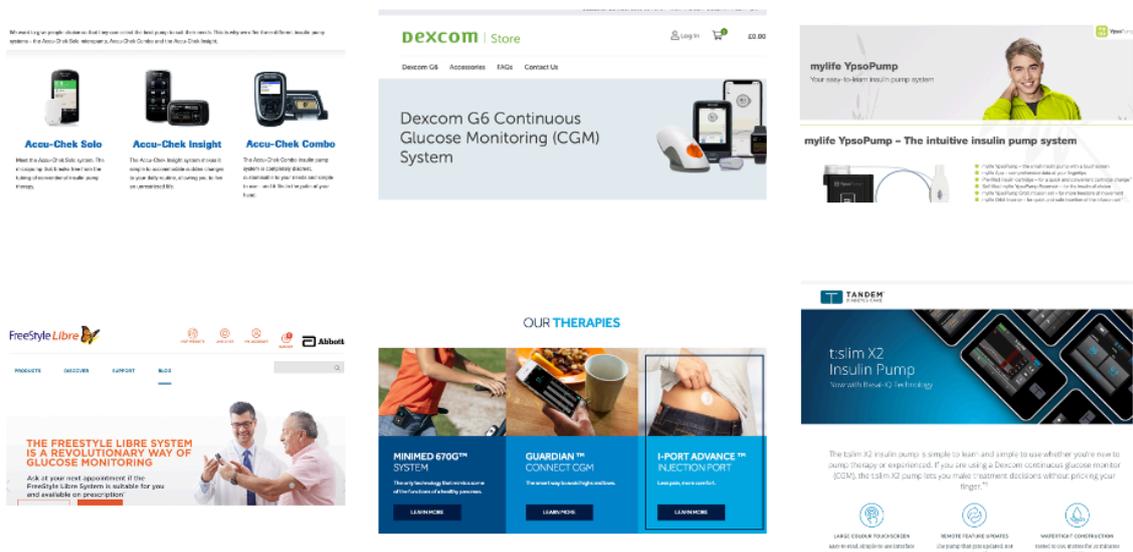
- To provide diabetes services a DTN and industry approved pathway to them to enable people with diabetes to access technology - responding to limitations placed by Covid-19
- To create a platform that facilitates patient choice across all available technologies
- To allow for “renewals” for the thousands 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

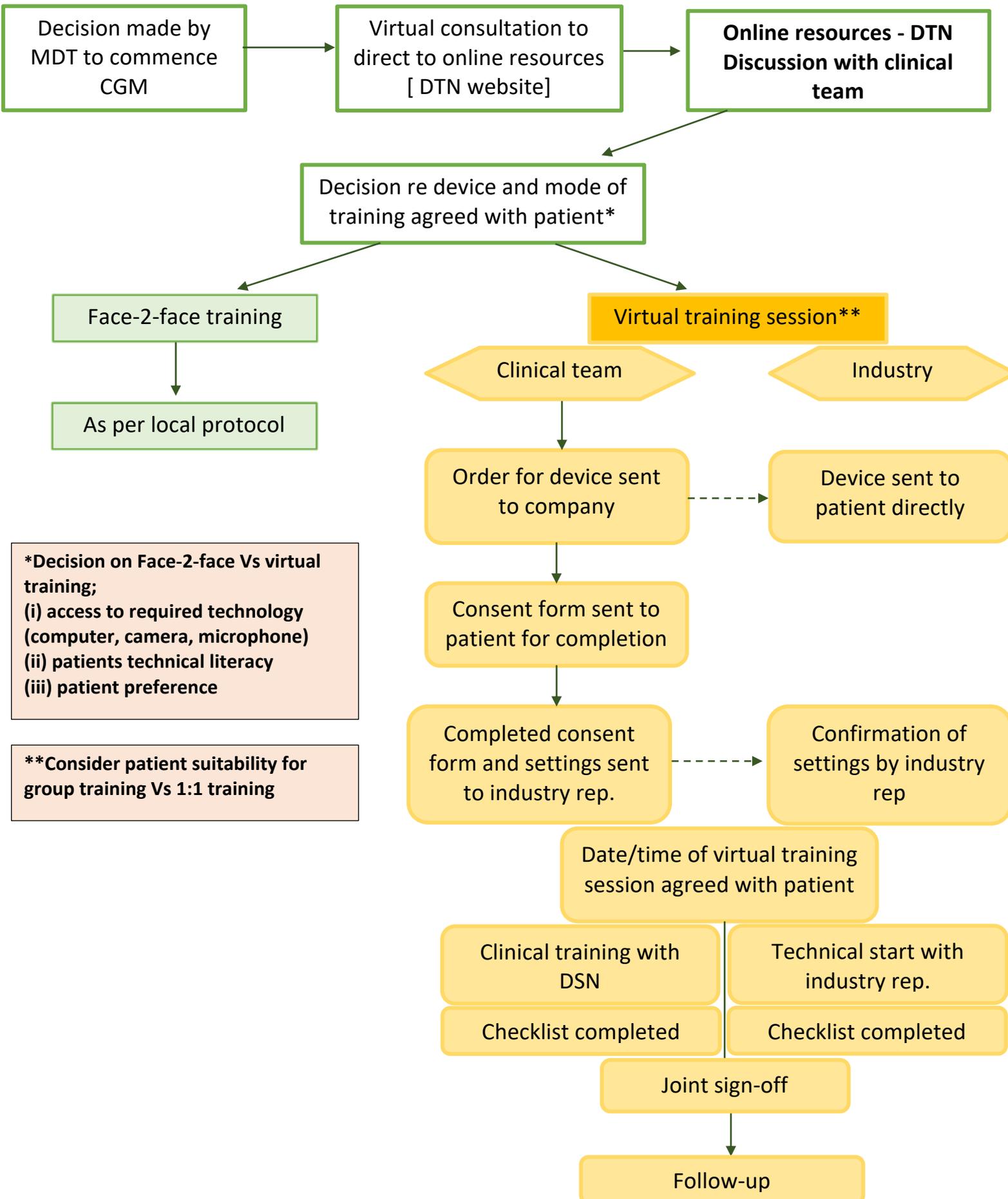
For an individual living with diabetes, the choice of diabetes technology is key. This is a big decisions for them, and for items such as tethered insulin pumps, they need to live with these devices and interact with them multiple times a day for a 4 – year period. The technology is changing very rapidly 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 health care 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 makes 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 on Face-2-face Vs virtual training;**
 (i) access to required technology (computer, camera, microphone)
 (ii) patients technical literacy
 (iii) patient preference

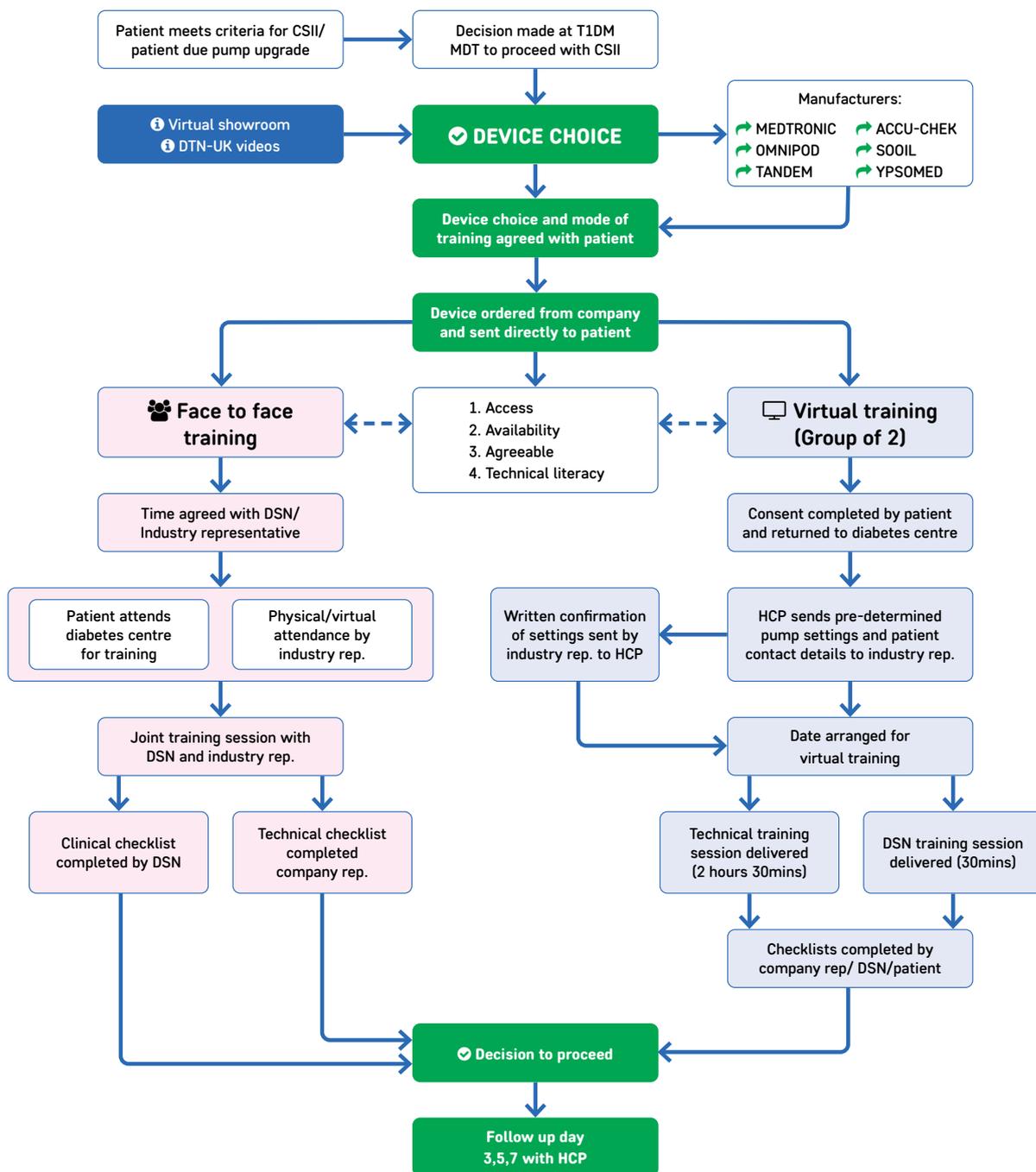
****Consider patient suitability for group training Vs 1:1 training**

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;
 - (i) Settings
 - (ii) Insertion and disposal
 - (iii) Charging
 - (iv) 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



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: _____

Please tick the appropriate boxes	Yes	No
<i>Data sharing</i>		
I consent to my name and contact information being shared by my diabetes team with the company representatives for the purpose of contacting me at a later date		
I consent to being contacted by a company representative for the purpose of conducting a virtual training session		
I consent to my clinical information 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)		
I consent to participating in a virtual training session in a small group with up to 3 other individuals		
I understand that I can withdraw my consent at any time and that I am not obliged to attend a virtual training session		

Preferred contact details:

Email:

Phone number:

Signed: _____ Print: _____

Date: __/__/____

Checklist to send to industry representative for CGM setup

Name: Insulin pump:

Device:

Trainer:

Low settings		
Low limit		
Time segments (from-to)		Low level (mmol/l)
Alert before low		
Alert on low		
Suspend on low (if required)		

High settings		
High limit		
Time segments (from-to)		High level (mmol/l)
Alert before high		
Alert on high		

Comments (e.g. for closed loop):

Signed:
HCP _____

Print:
HCP _____

Date: __/__/____

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



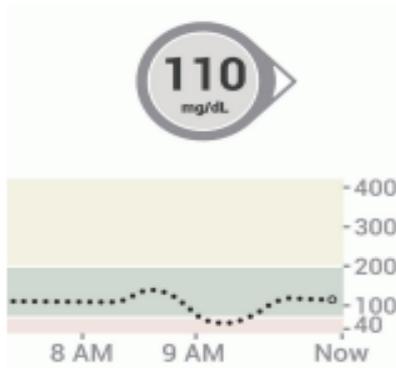
Pair



2-hour warmup

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

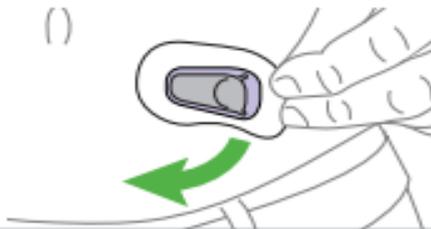


Review Treatment Decisions in Using Your G6 with patient.

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



Review Ending Your Sensor Session in Using Your G6 with patient.

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

□ Dexcom Support Teams



Review Dexcom Support Teams in Using Your G6 with patient.

For detailed, step-by-step instructions on how to use the Dexcom G6 Continuous Glucose Monitoring System, please refer to your user guide.

Failure to use the Dexcom G6 Continuous Glucose Monitoring System (CGM) and its components according to the instructions for use provided with your device and available at <https://www.dexcom.com/safety-information> and to properly consider all indications, contraindications, warnings, precautions, and cautions in those instructions for use may result in you missing a severe hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose) occurrence and/or making a treatment decision that may result in injury. If your glucose alerts and readings from the CGM do not match symptoms, use a blood glucose meter to make diabetes treatment decisions. Seek medical advice and attention when appropriate, including for any medical emergency.

Dexcom, Inc. | 6340 Sequence Drive | San Diego, CA 92121 | Technical Support: 1-844-607-8388 | www.dexcom.com

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LBL016063 Rev 001

CGM Training Checklist

Patient Name	
Insulin Pump Model	Please Select
Medtronic Trainer	
Healthcare Professional	

The following have been programmed and reviewed

Reviewed Getting Started Guide

High Settings

- Time Segments & Limits
- Alert before high
- Time 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
- Clearing alerts and alarms
- Siren and emergency message
- Auto Mode (MM670G only)
- Suspend by Sensor Home screen
- Manual Resume
- Auto Resume (based on SG - 2 hour max)

Common Alerts have been reviewed:

- Calibrate now
- Lost sensor signal
- Calibration not accepted
- BG not received
- Sensor Expired
- 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 overtape correctly
- Additional taping 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

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.

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

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:

___/___/___

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
- **Alerts and alarms**
 - Notification lights
 - Display icons
 - How to respond to an alarm
- **Infusion sets**
 - Filling reservoirs/pods/cartridge
 - Infusion set types
 - Tubing
 - Inserting the cannula
 - Insertion sites
 - Best practice
 - Disposal
- **Safety and best practice**
 - Sick day rules
 - Hypoglycaemia
 - Tips and tricks
 - Accessories
- **Basal profiles**
 - Basal pattern setup
 - Temporary basal rates
 - Maximum basal delivery
 - Suspend basal insulin
 - Resume basal insulin delivery
- **Utilities**
 - Airplane mode
 - Display options
 - Time and date
- **Bolus profiles**
 - Bolus advisor setup
 - Max bolus
 - Dual/square wave bolus
- **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. _____

MiniMed™ Insulin Pump Training Checklist

Medtronic

Patient Name	
Insulin Pump Model	Please Select
Infusion Set	
Trainer	
Date	

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/ Sleep mode
- Status Screens & Icons
- Menu Review
- Audio Review
- Device option - Connect Device (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

Comments

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

Trainer Digital Signature

REMOTE TRAINING CHECKLIST

TECHNICAL TRAINING – PUMP

MiniMed™ 670G System

Patient's name: _____

Training date: _____

Trainer's name: _____

Infusion set: _____

Getting to know the pump

- Battery types and insertion
- Buttons, notification light
- Startup Wizard
- Home Screen
- Pump unlock/Sleep mode

- Menu review in Manual Mode
- Backlight
- Max Basal & Max Bolus
- Status screens

Bolus & Basal Delivery

- Bolus Wizard™ setup
- Bolus Wizard™ use, food and/or correction
- Connecting the BG meter

- Basal pattern setup
- Review and Save
- Suspend/Resume delivery

Pump settings have been entered as directed in Pump Initiation Setting sheet:

Yes

No

Reservoir and Infusion set

- Filling the reservoir
- Connecting the reservoir to infusion set
- Reservoir & Set menu
- Filling the infusion set

- Inserting the infusion set
- Filling the cannula
- Infusion set best practice
- Available infusion set types

Everyday use of the pump

- Best practice tips & tricks
- Accessories
- Temp Basal
- Treating low BG

- Treating high BG
- Alers & Alarms
- Review of FAQ

Further pump features covered during the training: _____

CareLink™ Personal account and device upload

- Value of CareLink™ Personal discussed
- Patient has registered into CareLink™ Personal

Patient has uploaded device (device settings check)

Training wrap-up

- Active insulin cleared
- Backlight returned to 15 sec

- Useful reminders
- StartRightSM registration reminded

The completed "REMOTE TRAINING CHECKLIST MINIMED™ 670G SYSTEM" should be password protected and/or encrypted when sent by email.

Medtronic Remote Training is not intended to constitute a medical advice and information provided in the course of the training do not replace medical recommendation. Following the Medtronic Remote Training, we suggest you verify the device settings with your patients. Please see the device manuals for detailed information regarding the instructions for use, indications, contraindications, warnings, precautions, and potential adverse events. For further information, contact your local Medtronic representative.



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REMOTE TRAINING CHECKLIST

TECHNICAL TRAINING – PUMP

MiniMed™ 780G System

Patient's name: _____

Training date: _____

Trainer's name: _____

Infusion set: _____

Getting to know the pump

- Battery types and insertion
- Buttons, notification light
- Navigation shortcuts

- Startup
- Menu (icons, simplified map)

BG Meter

- Accu-Chek Guide setup
- Pairing the meter with the pump

- Sending BG result to the pump

Settings

- Display settings, backlight

- Max Basal/Bolus check

Insulin Menu

- Bolus settings
- Bolus Wizard setup
- Bolus Wizard use, shortcut

- Entering BG (BG menu)
- Basal Setup

Reservoir & Set Menu

- Important tips
- Infusion set types
- Filling the reservoir
- Rewinding the pump

- Filling the tubing
- Inserting the infusion set
- Filling the cannula (except Sure-T)
- Important rules

Suspending and resuming the pump

Everyday use of the pump

- Wearing the pump – accessories
- Daily/weekly steps
- How to treat low glucose

- How to treat high glucose
- Alerts & Alarms

Further therapy management tools covered

- CareLink™ Personal software
- MiniMed™ Mobile app

- CareLink™ Connect app
- Types of data upload

Further features/topics covered during the training: _____

Training wrap-up:

- CareLink™ Personal account set up
- Every day/week steps covered

- Backlight optimised for pump use
- Patient registered to StartRight™

The completed "REMOTE TRAINING CHECKLIST MINIMED™ 780G SYSTEM" should be password protected and/or encrypted when sent by email.

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Omnipod insulin pump checklist

OMNIPOD DASH™ SYSTEM POD START CHECKLIST

Confidential: Protected Health Information



Trainings Performed (check all that apply)

___/___/___ Pre-Pod
 ___/___/___ Saline start
 ___/___/___ Insulin start
 ___/___/___ Follow up

Patient Name (Print) _____ DOB _____

<p>Introduction to Pump Therapy</p> <ul style="list-style-type: none"> <input type="checkbox"/> Reviewed diabetes education topics: Blood glucose (BG) testing, treating hypoglycaemia & hyperglycaemia, carbohydrate counting, sick day management <input type="checkbox"/> Reviewed Pump Therapy Concepts: Basal/bolus, Insulin On Board (IOB), Insulin/Carb (IC) ratio, Correction Factor, duration of insulin action <p>Be Prepared:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Omnipod DASH™ PDM/pods/PDM charging cable <input type="checkbox"/> Insulin <input type="checkbox"/> BG meter/BG test strips/lancets/lancing device <input type="checkbox"/> Backup supplies – insulin/BG testing supplies <input type="checkbox"/> Glucose tablets/fast acting source of carbohydrate/Glucagon <p>Supply Reorder:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Omnipod 24/7 Customer Care <input type="checkbox"/> When to reorder <p>System Overview</p> <ul style="list-style-type: none"> <input type="checkbox"/> Communication process/distance <input type="checkbox"/> Storage guidelines <input type="checkbox"/> Diagnostic tests (CT Scans/MRI/X-rays) <input type="checkbox"/> Travel guidelines <p>Pod</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fill port/adhesive/needle cap/pink slide insert/ Waterproof IP28* <p>PDM (Personal Diabetes Manager)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Battery/button layout <p>BG Meter</p> <ul style="list-style-type: none"> <input type="checkbox"/> BG meter usage <input type="checkbox"/> Manual entry of BG value from meter to PDM 	<p>PDM Settings</p> <ul style="list-style-type: none"> <input type="checkbox"/> Basic settings – Personalized lock screen/time/ time zone/date/date format <input type="checkbox"/> Basal settings – max basal, basal rates, temp basal <input type="checkbox"/> Bolus settings - Target BG, Insulin to Carb (IC) ratio, Correction Factor, min BG for bolus calculations, reverse correction, duration of insulin action, extended bolus, max bolus <p>Pod Activation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Change Pod <ul style="list-style-type: none"> <input type="checkbox"/> Room temperature insulin <input type="checkbox"/> Fill syringe – min/max amounts <input type="checkbox"/> DO NOT prefill Pod <input type="checkbox"/> Site selection/rotation & prep <input type="checkbox"/> Automated cannula insertion – check infusion site/viewing window & pink slide insert <input type="checkbox"/> BG reminder 1.5 hours after insertion <input type="checkbox"/> When to change Pod <p>Home Screen</p> <ul style="list-style-type: none"> <input type="checkbox"/> Status Bar, Menu Icon, Notification/Alarms <input type="checkbox"/> Tabs <ul style="list-style-type: none"> <input type="checkbox"/> Dashboard – Insulin on board (IOB, if Calculator ON) <input type="checkbox"/> Basal (Temp Basal if Temp Basal running) <input type="checkbox"/> Pod Info – View Pod detail <input type="checkbox"/> Last Bolus, Last BG <input type="checkbox"/> Bolus Button <p>Menu Icon</p> <ul style="list-style-type: none"> <input type="checkbox"/> PDM function – Temp Basal, Pod, Enter BG, Suspend <input type="checkbox"/> Manage Programs & Presets – Basal programs, Temp Basal presets, Bolus presets <input type="checkbox"/> History – Notifications & Alarms, Insulin & BG History <input type="checkbox"/> Settings – PDM Device, Pod sites, Reminders, Blood Glucose, Basal & Temp Basal, Bolus <input type="checkbox"/> About 	<p>Advanced Features (optional)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Extended bolus <input type="checkbox"/> Temp basal rate <input type="checkbox"/> Additional basal programs <input type="checkbox"/> Presets – Temp basal/Bolus presets <p>Troubleshooting</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hypoglycaemia <input type="checkbox"/> Sick day management <input type="checkbox"/> Hyperglycaemia & ketone <p>Notifications & Alarms</p> <ul style="list-style-type: none"> <input type="checkbox"/> Custom reminders <input type="checkbox"/> Pod Expiration alert (defaulted to 4 hours. Changed to: ___ or n/a) <input type="checkbox"/> Low Reservoir alert (defaulted to 10u. Changed to: ___ u or n/a) <p>Advisory & Hazard Alarms</p> <ul style="list-style-type: none"> <input type="checkbox"/> Advisory alarms – intermittent tones – response required <input type="checkbox"/> Hazard alarm – Continuous vibration and Tone – urgent attention required – Pod Expired, Empty Reservoir, Occlusion, Pod Error, Auto Off, PDM Error, System Error <p>Ongoing Success</p> <ul style="list-style-type: none"> <input type="checkbox"/> Pod Disposal Program <input type="checkbox"/> diasend®/Glooko® <input type="checkbox"/> Omnipod 24/7 Customer Care <input type="checkbox"/> Reviewed User Guide <input type="checkbox"/> Follow-up plan: _____ _____ _____
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Patient/Guardian Signature _____ Date _____

Trainer Name (Print) _____ Trainer Signature _____ Date _____

* The Pod has a waterproof IP28 rating for up to 7.6 metres for 60 minutes. The PDM is not waterproof.

Telephone **0800 012 1560**

Air Liquide Healthcare is an authorised Tandem Diabetes Care distributor.

PATIENT'S NAME:		DATE OF BIRTH:	BG BEFORE TRAINING:
ADDRESS:		EMAIL:	
TRAINING DATE:	HEALTHCARE PROVIDER (HCP):	PUMP SERIAL NUMBER:	

KNOWLEDGE ASSESSMENT

MOST RECENT DIABETES EDUCATION PROVIDED BY:
DATE:

- 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 t: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:
-----------	-------

REMINDER 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:

ACCUCHEK[®] Insight

Roche

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.

To be completed by the patient / caregiver

<input type="text"/>		<input type="text"/>	
Patient Name		Caregiver Name	
<input type="text"/>		<input type="text"/>	
Patient Address 1	Address 2		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City	County	Postcode	
<input type="text"/>	<input type="text"/>		
Patient Date of Birth	Pump Serial Number		

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

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

- | | |
|---|---|
| <input type="checkbox"/> Accu-Chek insulin pump | <input type="checkbox"/> Access to installed configuration software (not mandatory if details entered manually) |
| <input type="checkbox"/> Charged Diabetes Manager (handset) | <input type="checkbox"/> Access to video communication technology such as a webcam or smartphone |
| <input type="checkbox"/> Insulin cartridge / vial | |
| <input type="checkbox"/> 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

<input type="text"/>	
Name of Healthcare Professional*	
<input type="text"/>	<input type="text"/>
Hospital	Date

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

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 (08007312291)
- 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

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
- Set Multiwave/Extended
- Enter pen/syringe use
- Change meter settings
- Switch Bluetooth®/flight mode on and off
- View data management via the handset

Data

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

Optimising pump therapy

- Bolus reminder
- Missed bolus reminder
- Blood glucose test reminders
- Alarm clock
- Naming basal profiles
- Customising temporary basal rate
- Customising health events

Additional features covered



Signed Roche Diabetes Care Representative

Date

Signed Healthcare Professional

Date

Page 3 of 3

IDSGEN/20/20/098

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Roche Diabetes Care Limited, Charles Avenue, Burgess Hill, West Sussex, RH15 9RY. Company Registration Number: 9055599

Date of preparation: June 2020. Material Number: IDSGEN20200058
This document is intended for the use of Healthcare Professionals and Roche Diabetes Care Trainers

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ACCU-CHEK®



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

<input type="text"/>		<input type="text"/>	
Patient Name		Caregiver Name	
<input type="text"/>		<input type="text"/>	
Patient Address 1		Address 2	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City	County	Postcode	
<input type="text"/>	<input type="text"/>		
Patient Date of Birth	Pump Serial Number		

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

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.

To be completed by the Healthcare Professional

<input type="text"/>	
Name of Healthcare Professional*	
<input type="text"/>	<input type="text"/>
Hospital	Date

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

General Overview

Viewed QRGs Y / N

Viewed starter guide Y / N

Training videos Y / N

Review of Button functions and Menu system

Review of the components of the micropump

Pump set up

- | | | |
|---|---|---|
| <input type="checkbox"/> Assemble and insert the cannula and pump holder using the introducer | <input type="checkbox"/> Connect the reservoir to the pump base | <input type="checkbox"/> Fill the needle reservoir prior to connection |
| <input type="checkbox"/> Draw up a reservoir of insulin | <input type="checkbox"/> Connect the diabetes manager and micropump using the scanner | <input type="checkbox"/> Attach the micropump to the inserted infusion assembly |
| | <input type="checkbox"/> Find the key for manual input | <input type="checkbox"/> Bolus on pump - quick bolus |

Maintenance

- | | | |
|--|--|--|
| <input type="checkbox"/> Frequency of change for | <input type="checkbox"/> Connection and disconnection | <input type="checkbox"/> How to change a reservoir |
| <input type="checkbox"/> Cannula and infusion assembly | <input type="checkbox"/> Cancel a bolus | <input type="checkbox"/> Exposure to water |
| <input type="checkbox"/> Reservoir | <input type="checkbox"/> Identification and removal of air bubbles | |
| <input type="checkbox"/> Pump base | | |

Basal Insulin - How to

- | | | |
|--|---|--|
| <input type="checkbox"/> Programme a basal profile | <input type="checkbox"/> Activate a different profile | <input type="checkbox"/> Programme a TBR |
| <input type="checkbox"/> Pre-set a TBR | | |

Diabetes Manager

- | | | |
|---|---|--|
| <input type="checkbox"/> On/off | <input type="checkbox"/> Programme and change advice options | <input type="checkbox"/> Navigation buttons on handset |
| <input type="checkbox"/> Charging of handset | <input type="checkbox"/> Status screen and information | <input type="checkbox"/> Short cuts from status screen |
| <input type="checkbox"/> Pin code use and resetting | <input type="checkbox"/> Main menu icons and use | <input type="checkbox"/> Quick information screen |
| <input type="checkbox"/> Bolus advice, programme/adjust time blocks | <input type="checkbox"/> Bolus advice with a BG test | <input type="checkbox"/> Where to find the master key if needed (Superpin) |
| <input type="checkbox"/> Programme and change health events | <input type="checkbox"/> Bolus advice without a BG test | <input type="checkbox"/> Turn on/off flight mode |
| | <input type="checkbox"/> Delivery of Multiwave and Extended bolus | <input type="checkbox"/> Access data |
| | | <input type="checkbox"/> Downloading |

General advice

- | | |
|--|--|
| <input type="checkbox"/> Ordering supplies | <input type="checkbox"/> 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

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 2

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ACCU-CHEK® Combo

Roche

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

Patient Name

Caregiver Name

Patient Address 1

Address 2

City

County

Postcode

Patient Date of Birth

Pump Serial Number

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

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.

To be completed by the Healthcare Professional

Name of Healthcare Professional*

Hospital

Date

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

General Overview

Viewed QRGs 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 of change and why
- Set time and date
- Menus- stop and run, what is done where
- Program basal rates 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
 - Site selection and rotation
 - When/how to connect and disconnect
 - When to change cannula and how often
- cannula

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 option
 - Blood glucose test reminders
- Main menu screen
- Bolus advice with / without a BG test
- 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

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

Further/Advanced Training

Pump set up - How to

- Program basal rates- configuration
- Set a temporary basal rate
- Switch Bluetooth® on and off
- Activate another basal profile

Handset – How to

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

Data

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

Optimising pump therapy

- Blood glucose test reminders
- Alarm clock

Additional features covered



Signed Roche Diabetes Care Representative

Date

Signed Healthcare Professional

Date

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ACCU-CHEK®

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.

Topic	Yes	No
Discuss aims of therapy		
Review application technique		
Changing infusion sets if required		
Reviewing home screen		
Pump settings Time and date Glucose targets Basal settings Temporary basal rates Bolus settings/calculator Insulin:carb ratio Correction factor Duration of insulin action Maximum bolus Extended bolus		
CGM set up (if required) Ensure technical training has been completed Review sensor application technique How to calibrate (if required) Targets- Time in range/hyper/hypoglycaemia		

Proposed alarm alerts When to check a blood glucose How to integrate the sensor with the pump Low glucose suspend Closed loop systems How to share data		
Managing hypoglycaemia		
Sick day rules		
Managing ketosis		
Playing sport with the pump		
Travelling abroad with the pump		
Compatibility with CT/MRI scans		
Using CSII when admitted to hospital		
Troubleshooting if malfunction		
Emergency insulin supplies		
How to access support (DDC email/phone number/technical support)		

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

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