PURPOSE: This policy is being revised as of November 2013 to reflect the changes to the Inform II glucose meter which will be equipped to wirelessly transmit results to the patient’s EHR via a data management system. To provide guidelines and procedure steps for checking the blood glucose level at the patient bedside using the Accu-Chek Inform II Glucose meter system.

INDICATIONS: Healthcare provider ordered blood glucose checks to rule out hypoglycemia, hyperglycemia and to monitor insulin therapy. The Inform II test strip has been reformulated and no longer is affected by Maltose in the sample. Please refer to the interferences listed in this policy and the test strip package insert which comes with each box of test Strips (see attachments at the end of this document for an electronic copy). DO NOT use Capillary blood testing on patients with decreased peripheral blood flow or who have increased interstitial fluid.

WHO MAY USE THE METERS: RN, LPN, CNA, EMT-P (with documented training) according to the ‘In-House Point of Care Testing Policy’ LB-D-WT10. Yearly 2 forms of competencies must be performed to be certified as an Operator. These 2 forms of competency testing are: successfully completing a Healthstream quiz every year during ‘CMC’s Care Days’ and performing 2 levels of liquid Quality Controls during the MONTH your department has been assigned the task of performing liquid Controls. The Clinical Educator will notify the department manager when it is the required month for the 2 levels of controls. If either of these two forms of competency is not performed when required the Operator will be LOCKED OUT of the glucose until they have successfully completed the required competency.

IMPORTANT POINTS TO REMEMBER:
1. On the Roche Accu-Chek Inform meter, a reading of LO means that the blood glucose is less than 10 mg/dl; a reading of HI means that the blood glucose is greater than 600 mg/dl. See patient Testing procedures page 8, # 17 for more information.
IMPORTANT POINTS TO REMEMBER continued

2. **Critical Values** - Patients with glucose results considered to be in the Critical Range as detailed in the table on the next page should have a blood sample collected and sent to the Laboratory for confirmation. Patients with Critical Values should be treated and then the results must be called to the healthcare provider. This must be documented in the ‘Comments’ on the glucose meter. See patient testing procedure page 8, #16 for more details.

<table>
<thead>
<tr>
<th>Critical Value Limits</th>
<th>LOW</th>
<th>HIGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newborn (0-45 Days)</td>
<td>&lt; 40</td>
<td>&gt; 300</td>
</tr>
<tr>
<td>Child (45 days - 12 Yrs)</td>
<td>&lt; 50</td>
<td>&gt; 300</td>
</tr>
<tr>
<td>Adult (&gt;12 Yrs)</td>
<td>&lt; 50</td>
<td>&gt; 400</td>
</tr>
</tbody>
</table>

3. Critical value ranges are set in the Glucose meter, but they are based on normal age of the patient population for that department. The EHR records the results and indicates the critical value based upon the age of the patient listed in the patient’s EHR. All Critical Values must be documented in the EHR as soon as possible and in the comment section of the Inform II glucose meter if applicable. All critical values must have a documented comment in the EHR which indicates the date and time the healthcare provider was notified. In an emergent situation this documentation may occur after the patient is treated but as soon as possible thereafter.

4. The scheduled blood glucose meter check needs to be timed so the Pre meal insulin and oral diabetes medications can be given at the optimum time. (For actions of insulin and oral diabetes medications, see medication handbooks or Micro MEDEX.)

5. Blood glucose testing with the Roche Accu-Chek II Inform meter is dependent on the blood drop being drawn into the test strips yellow window and filling the window completely. The Inform II test strip requires only 0.6 ul of blood, so unlike the Comfort Curve glucose test strip you CAN NOT ADD more sample! The meter will indicate if there is not enough or too much blood.

6. The patient can NOT use their own glucose meter for testing while they are in the hospital. The Inform II glucose meters are the ONLY glucose meters that may be used for patient testing in the hospital setting because these meters and all of the supplies used for testing are maintained in accordance with the manufacturers requirements at all times! To verify that the patient’s glucose meter and testing system is working correctly as they are preparing to leave the hospital a correlation test can be performed by testing the patient’s meter with a sample of heparinized (green Top) venous blood which will then be sent to the Laboratory for a venous glucose. These values should agree within +/- 10% if the patient’s meter system is working correctly. Anytime the patient’s meter does not agree with the Inform II meter or the venous glucose performed in the Laboratory it must be assumed that the patient’s glucose meter and/or strips are faulty.

**PROCEEDURE STEPS:**

1. **Order Handling:**
   a. Scheduled blood glucose checks are handled in the following manner:
   b. The healthcare provider will order all POC testing directly into the EHR.
   c. The nursing staff will review the orders in patient’s chart and sign them which will activate the order. Once activated the EHR will send a task notice to the nurse to perform the capillary Glucose, so the nursing staff will perform the blood collection at assigned time.
d. The Inform II glucose meter will upload the glucose results to the EHR wirelessly once the result is finalized in the meter. After that time the Glucose results will be available for review in the EHR listing the glucose result, date, time and any comments which were added in the glucose meter before the results were finalized. This result should be referenced when manually documenting the glucose value in the MAR when a patient is given Insulin, according to the ’24 hour Glucose Pattern Record policy and procedure’.

e. Nursing will check the MAR for insulin type and oral diabetes medications. Nursing will time the glucose check so that the best action of the insulin or diabetes medication in relation to the meal can be obtained.

f. If the meal time or the type of insulin or oral diabetes medication has changed, nursing may adjust the time of the blood glucose check to provide for the optimum action of the insulin or oral medication in relation to the meal.

g. In most cases, pediatric patients have Type 1 Diabetes and will be using insulin. In the rare instance that a pediatric patient has Type 2 Diabetes, oral diabetes medications may be in use; consult the medication handbooks, Micro MEDEX or ask pharmacy about the proper timing of these medications and proper timing of blood glucose checks.

2. For STAT blood glucose meter checks, an order must be obtained and documented on the patient’s chart.

Reagents and Equipment:

1. **Accu-Chek Inform II Test Strips (Lawson no. 11762)** Refer to the package insert or the electronic copy attachment listed on the last page of this document for more information. Test strips must be stored at room temperature. Do not freeze. Test strips are stored in the same tightly capped vial in which they are packaged. The vial cap is immediately replaced after removal of a test strip. When a new package of test strips is opened, write the date on the vial label. The test strips are stable until the expiration date on the vial. Outdated test strips are discarded. Each bottle of strips has a coordinating Code chip in the box. This code chip is SPECIFIC for the Lot number of test strips. This CODE CHIP WILL NO LONGER BE USED IN THE METER! Please refer to the section labeled Calibration in this policy for more details about the CODE KEY.

Since the Code Key is not inserted into the meter you must verify the CODE number listed on the Bottle of test strips matches the CODE listed in the glucose meter especially when the hospital has more than one Lot Number (Code KEY) available!! If you have another Code than what is listed in the meter you must choose the CODE number which matches the test strips you are using and perform daily Quality Control again even if it has been less than 24 hours.

Test strips can ONLY be obtained from the Materials Management department.

2. **Accu-Chek Inform II Glucose Control Solutions (Lawson no. 11763)** refer to the package insert or the electronic copy attachment for more information. Level 1 and Level 2 are ready to use and stable unopened at room temperature until expiration date on the bottle. Do not allow controls to freeze. When opening new vials, label with date opened and date of expiration. Open bottles of control solution are stable for three months or the expiration date, whichever comes first. Replace cap on vial of Glucose Control Solution immediately after use. Glucose Control Solutions can be obtained from the Materials Management department.
3. **Accu-Chek Inform II glucose meter.** Handle meter with care. Sudden shocks caused by dropping or rough treatment may affect performance. If the meter is dropped, performance must be verified by quality control (QC) testing. If the meter becomes cracked and broken notify the Laboratory POCC. Store meter away from direct sunlight and extreme temperatures.
   - Wash hands thoroughly with soap and water before and after testing each patient.
   - Always wear a new pair of clean gloves for each patient.
   - Never use capillary devices for more than one person. Use auto-disabling, single-use capillary devices for assisted monitoring of blood glucose.

**Cleaning/Disinfection of the System:** Read and follow the ACCU-CHEK Inform II cleaning and disinfecting instructions found in the *ACCU-CHEK Inform II Operator’s Manual.* (Refer to the last page of this policy for the electronic copy attachment of the Operator’s Manual and pages 128-131 which describe in detail How to Clean/Disinfect the meter and document this task in the meter). Cleaning and disinfecting are companion procedures that are generally performed together at the same time. **Cleaning** removes visible soil and organic material. **Disinfecting** destroys most recognized pathogenic microorganisms but not necessarily all microbial forms (e.g., bacterial spores).

The meter must be disinfected/cleaned after EACH patient and document this disinfection process EVERY time you perform such in the MAINTENANCE section of the Inform II glucose meter according to CMC policy. This documentation in the meter is MANDATORY and must be done before you turn off the meter for the disinfection/cleaning procedure. The ACCU-CHEK Inform II system may only be used for testing multiple patients when Standard Precautions and the ACCU-CHEK Inform II system cleaning/disinfecting procedures are followed.

**Acceptable active ingredients and products for cleaning and disinfecting are listed below according to Roche product information**

— **Clorox® Germicidal Wipes** (EPA* reg. no. 67619-12) Pre-moistened disinfecting cloths (active ingredient 1% (or less) solution of sodium hypochlorite in water) MUST BE LEFT ON METER FOR A MINIMUM OF 1 MINUTE AND MUST BE USED WHEN PATIENT HAS CLOSTRIDIUM DIFFICILE.

— **Super Sani-Cloth® Germicidal Disposable Wipes** (EPA* reg. no. 9480-4) Pre-moistened disinfecting cloths (active ingredient 0.5% quaternary ammonium chlorides and up to 60% isopropanol) MUST BE USED FOR ALL OTHER PATIENTS AND MUST BE LEFT ON METER FOR AT LEAST 2 MINUTES.

**The following parts of the meter and system components may be cleaned and disinfected:**

- The area around the test strip port
- The meter display (touchscreen)
- The meter housing (entire meter surface)

Do not allow liquid to enter the test strip port or allow pooling of liquid on the touchscreen. If liquid does get into the test strip port, immediately dry the components with a dry cloth or gauze. If solution is allowed to collect in any meter opening, severe damage to the system can occur.
If you notice any of the following signs of deterioration after cleaning or disinfecting of your meter system, stop using the system component and contact the POCC at 4214 or Clinical Laboratory at 4017 for assistance:

- clouding of the touchscreen display
- on/off button malfunction
- Clouding of the infrared data port and/or barcode scanner, or quality control results outside of the specified range.

**DO NOT** notify Biomedical Engineering for repair!

4. **Calibration (Coding=Code Key) Of the Accu-Chek Inform II System:**
The Code Key comes in each box of test strips, but it is no longer needed since this information is uploaded to the meters wirelessly by the POCC whenever a new lot of test strips in checked into the hospital inventory system. Whenever a new lot of reagent strips is received in the Material Management department they will notify the Point of Care Coordinator who will remotely update the hospital meters according to the procedures listed in the *ACCU-CHEK Inform II Operator’s Manual* section 6 ‘Storing Test Strip, Control Solution, and Linearity Solution Information in the Meter’ page 65.

Since the Code Key is not inserted into the meter ANYMORE you must verify the CODE number listed on the Bottle of test strips matches the CODE listed in the glucose meter especially when the hospital has more than one Lot Number (Code KEY) available!! If you have another Code than what is listed in the meter you must change the CODE number to match the strips and perform daily Quality Control again even if it has been less than 24 hours.

**Quality Control (QC) Testing:**

**Frequency:**
- Level 1 and 2 Controls must be run every 24 hours of patient testing and when the “RUN QC” is displayed on the meter. The meter is programmed so QC must be run every 24 hours and you will not be able to use the meter until acceptable QC is done.

Additional situations that require QC include
- If the meter is dropped or has been reset
- EVERYTIME a new bottle of test strips is opened, even if it is the same lot number of strips!
- Any time the patient result contradicts the clinical impression
- Anytime a new lot number of strips/Code is entered into the meter

**QC Testing procedure:**
1. Gather the following equipment :
   a. Accu-Chek Inform II System
   b. Accu-Chek Inform II test strips
   c. Accu-Chek Comfort Inform II Control Solutions
2. Put on disposable gloves.
3. Press power ON button.
4. Enter (or scan) your operator ID, then press the forward arrow button.
5. Select Control Test.
6. Select the desired control level: Level 1, or Level 2.
7. Scan the bar code on the solution bottle
8. Scan the vial of test strips and verify that the CODE number is the same as that listed on test strip bottle.
9. Remove a test strip from the vial and replace the vial cap immediately.
10. When the flashing strip icon appears on the meter display, gently insert test strip with the yellow target area or test window facing up. (Insert the end with the gold bars.)
11. Note: Insert test strip BEFORE dosing.

**QC Testing Continued**

12. Touch and hold drop of glucose control solution to the curved edge of the yellow target area at the front edge of the strip. Do NOT apply the control solution to the Top of the test strip. The glucose control solution is drawn into the test strip automatically and the meter will beep.

13. An hourglass will be displayed on the Accu-Chek Inform meter while waiting for the result. When the test is completed and the result is ready, the meter beeps again. The results of the control test will be displayed as either PASS if QC is okay or FAIL if the QC results are not okay. All QC results are recorded in the Inform II monitor memory and downloaded wirelessly to the RALS data manager system. If control FAILS, enter the appropriate comment(s), if needed. When finished press the Check button to record the test and to repeat the same level of control. If the QC result is PASS, press the check button to record the test results. Patient testing can only be done if QC passes on both levels. The monitor will **not** allow patient testing if QC fails.)

**Notes:**
1. If a quality control test result passes on both levels of control, it is acceptable to proceed with patient testing.
2. If a quality control test result fails on either level of control solution, try a repeat test with same control material or try a new bottle of control. If control still fails, please call the Point of Care Testing Coordinator in the laboratory ext. 4214 or 4017. The meter cannot be used for patient testing until the problem is corrected. Use another meter that has passed quality control.

14. Remove the used test strip(s) and disposable latex gloves and discard them according to infection control policy.

**Patient Testing:**

**Specimen Collection and Handling:**
- Proper blood sample collection is an essential and integral part of bedside glucose testing. Please refer to the CMC procedure ‘Capillary Blood Collection Procedure’-LB-D-SM 36
- Capillary, venous, cord blood and arterial whole blood specimens may be used for testing on the Accu-Chek Inform System with Accu-Chek Inform II test strips.
- The capillary sample must be tested immediately after collection.
- Blood glucose determinations using venous and arterial blood specimens should be performed within 30 minutes of specimen collection to avoid glycolysis. Mix samples thoroughly. Caution should be taken to clear arterial lines before blood is drawn and dosed on the test strip.
- For best results with arterial and venous blood, the following anticoagulants/preservatives are recommended: heparin (green top tube) and EDTA (purple top tube).
- Serum separator tubes (red top tubes or yellow) and red-topped tubes are acceptable if blood is used immediately before the clotting process begins.
• Fluoride or Iodacetateoxalate (grey top tubes) **should not be used** as a preservative.
• Caution is advised in the interpretation of neonate glucose values below 50 mg/dL. Follow the recommendations for follow-up care according to ‘Hypoglycemia Policy for Newborns WITHOUT Risk’-WC5181 or ‘Hypoglycemia Policy for Newborns WITH Risk’-WC5192 and repeat the test using another heel stick.
• Sufficient sample size is required to ensure accurate results. Refer to the test strip package insert for the most current information which is supplied in every box of test strips.

**How to perform the Glucose test analysis using the Inform II Glucose Meter:**

1. The following equipment should be at the patient’s bedside prior to testing:
   a. Accu-Chek Inform System
   b. Accu-Chek Comfort Curve test strips
   c. Single-use, disposable lancets
   d. Alcohol swab
   e. Cotton ball, tissue or gauze for wiping finger after stick
   f. Disposable gloves

2. Wash hands and put on gloves and refer to CMC Procedure PH 1461 ‘Universal Precautions: Infection Control’ for proper procedures. (see PH1461 attached to this procedure)

3. Introduce yourself, identify patient by name and medical record number on patient armband and verifying that the armband has the correct 8 digit account number on it with the prefix ACCMCM (changes if transferred to Ortho, RNU,OB, etc) according to CMC policy PH 1068 ‘Patient identification’, and explain glucose capillary testing procedure. (see PH 1068 attached to this procedure)

4. Press power ON button.
5. Enter (or scan) your operator ID. Press the forward arrow button.
7. Enter (or scan) the patients 8 digit account # with the prefix ACCMCM8------ the FIN number listed on the ARMBAND ONLY!! THE CURRENT PATIENT ARMBAND IS THE ONLY ACCEPTABLE BAR CODE TO SCAN FOR THE PATIENT ID!! No other patient LABEL OR IDENTIFIER must be used because it has NO IDENTIFIABLE PATIENT INFORMATION TO LINK THE GLUCOSE RESULTS TO THE PATIENT! The patients name should display at the top of the glucose monitor. Verify that this is the correct patient name. Press the CHECK button.

In those departments that have the option of entering a manual ID- Please enter the FULL last name and first name, medical record number, FIN#, or for babies list Last name, BABY girl, etc. For manually entered names in the OB Dept., if you do not list Baby in the name they will be deleted because we cannot discern between Mom and Baby when only a last name is listed!

8. Scan the glucose test strip vial.
9. Remove a test strip from the vial. Immediately replace the cap on the vial.
10. When the flashing strip icon appears on the monitor display, gently insert test strip with the yellow target area or test strip window facing up. (Insert the end with the gold bars.)
Note: Insert test strip BEFORE dosing.
11. When the flashing drop icon appears on the meter display the meter beeps again, obtain a blood sample. You may use a whole blood capillary, venous, arterial or neonatal blood sample. Refer to the CMC policy ‘Capillary Blood Collection Procedure’ LB-D-SM36 for more information about collecting capillary samples. Apply the drop of blood to the front edge of the test strip(the yellow target area).Do not apply blood at the top of the strip.
12. The blood is drawn into the test strip automatically by capillary action and blood on top of strip is not available for testing.
13. Important: You CAN NOT add blood to the Inform II test strip as with the Comfort Curve strips. Once a sufficient blood sample has been detected, the meter beeps and the measurement begins. An hourglass will appear on the display while waiting for the result.

14. When the test is completed and the result is ready, the meter beeps again. The result will appear on the display. Enter up to three preprogrammed comments and one custom comment, if necessary. Then press the Check button to record the test and return to the Main Menu screen in order to run the next test.

**How to Perform patient Test Continued**

15. If the patient’s result is in the Critical Value Range as detailed in the table below (same as the table on page 1), repeat the sample using another new fingerstick, document all action you took in the ‘Comments’ associated with the results on the glucose meter and in the patient’s EHR, notify the healthcare provider and collect a blood sample to send to the laboratory for confirmatory blood test after the patient is treated during an emergent situation. Document all actions according to the CMC Diabetes Management policy and as listed in this policy in the Reporting section.

<table>
<thead>
<tr>
<th>Critical Value Limits</th>
<th>LOW</th>
<th>HIGH</th>
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</thead>
<tbody>
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<td>Newborn (0-45 Days)</td>
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<td>&gt;300</td>
</tr>
<tr>
<td>Child(45days -12 Yrs)</td>
<td>&lt;50</td>
<td>&gt;300</td>
</tr>
<tr>
<td>Adult (&gt;12 Yrs)</td>
<td>&lt;50</td>
<td>&gt;400</td>
</tr>
</tbody>
</table>

16. HI or LO result displayed on meter and no numerical result:
   - If HI or LO appears on the screen it indicates glucose values >600 mg/dl or less than 10mg/dl respectively. If this result contradicts the patient’s condition, repeat QC testing. Otherwise repeat testing using a new site, If HI or LO occurs on repeat testing, document your actions in the meter comments, notify provider, and collect a blood confirmatory blood sample to send to the Laboratory. Also document all action in the patient’s EHR according to the CMC ‘Diabetes Management policy’.

17. Remove the test strip from the meter and discard it to the biohazard infection control policy. Dispose of the lancet used to obtain the blood sample into the biohazard container for Sharps.

18. Press the power OFF button to turn the Accu-Chek Inform II System off.

19. Remove gloves and dispose of them according to infection control policy. Wash your hands thoroughly with soap and water.

20. The Inform II meters will transmit the results and any added comments wirelessly to the EHR.

21. The glucose meter must be cleaned after each patient and documented on the meter according to the Cleaning/Disinfecting instructions listed on page 128-131 in the ACCU-CHEK Inform II Operator’s Manual.

22. Dock the meter when patient testing is done. Although the results will be transmitted wirelessly the docking stations are required to charge the batteries and update the meters with new patient and reagent information. If the meter is not docked after 6 hours, the meter will warn you that it needs to be docked. Eventually the glucose meter’s battery will ‘die’ and the meter will not work even if it is DOCKED. At that time, the meter must be reset by the POCC in the Laboratory. So PLEASE DOCK THE METERS SO THE BATTERY DOES NOT DIE!

**Reporting:**

1. All Critical values as listed in this document (according to CMC’s PH 1566 ‘Critical Test Result Procedure’) must be called to the patient’s healthcare practitioner even though they are notified in the
EHR of this critical value and confirmed with a blood sample submitted to the Laboratory after the patient is treated in an emergent situation. A pop-up box will display on the meter to alert the operator to the Critical Values and is specific for each department based on patient age criteria. Comments to this effect are entered on the Inform meter. The critical ranges are set in the meters based on the age for each department. For example: Med/Surg lists the ranges for patients>12 years, Pediatrics list ranges for >45days-12 years of age, etc. For the OB department the newborn ranges are listed in the meter since this is the primary age group being tested, so be aware of this when you are testing OB patients.

**Reporting Continued**

2. The Inform II meter automatically records the operator id, the patient id and name, the date and time of the test, the test result, the test strip lot number, any comments entered and the serial number of the meter in its memory. This information is downloaded to the Data Care data management computer system wirelessly which in turn downloads the information to the patient’s EHR.

3. Record all Insulin administered in the MAR per CMC policy along with the Glucose results if directed.

**Linearity:**

Testing with the Inform monitor using the Accu-Chek Inform II strips is accurate between the values of 10 mg/dl and 600 mg/dl.

Values below 10 mg/dl will give a patient result of LO and values above 600 mg/dl will give a patient value of HI. (See page 7, #18 of this policy for more detailed information).

Reference (Normal Adult Fasting) Range: 70 to 109 mg/dl

Linearity testing is performed accordingly by the POCC:
- Yearly on each meter
- After any repair
- When the meter is not performing as expected
- As a troubleshooting tool

The linearity testing results will be reviewed by the Laboratory medical director and must be within the acceptable range before the meter is approved for patient testing. In the event the results are not acceptable the Roche Service department will be notified for further repair. 800-440-3638.

**Method/Principle:**

The ACCU-CHEK Inform II system quantitatively measures glucose in whole blood. The enzyme on the test strip, mutant variant of quinoprotein glucose dehydrogenase from Acinetobacter calcoaceticus, recombinant in E. coli, converts the glucose in the blood sample to gluconolactone. This reaction creates a harmless electrical DC current that the meter interprets for a glucose result. The sample and environmental conditions are also evaluated using a small AC signal.

The system was calibrated with venous blood containing various glucose concentrations by Roche and is calibrated to deliver plasma-like results. The reference values are obtained using a validated test method. This test method is referenced to the hexokinase method and is traceable to an NIST standard.
Limitations

The new formulation of the Inform II test strip eliminates the Maltose limitations which existed with the Comfort Curve test strips.

- The ACCU-CHEK Inform II test strips are for testing fresh capillary, venous, arterial, or neonatal whole blood. **Cord blood samples cannot be used.**
- Hematocrit should be between 10–65 %.
- Lipemic samples (triglycerides) in excess of 1800 mg/dL may produce elevated results.
- Blood concentrations of galactose >15 mg/dL will cause overestimation of blood glucose results.
- Intravenous administration of ascorbic acid which results in blood concentrations of ascorbic acid >3 mg/dL will cause overestimation of blood glucose results.
- If peripheral circulation is impaired, collection of capillary blood from the approved sample sites is not advised as the results might not be a true reflection of the physiological blood glucose level. This may apply in the following circumstances: severe dehydration as a result of diabetic ketoacidosis or due to hyperglycemic hyperosmolar non-ketotic syndrome, hypotension, shock, decompensated heart failure NYHA Class IV, or peripheral arterial occlusive disease.
- This system has been tested at altitudes up to 10,000 feet.

References:

- Roche Accu-Chek Infrom II test strips package insert (05942934003-0113) 2013 Roche Diagnostics.
- Roche Accu-Chek Inform II Controls (05213525004-1012) 2012 Roche Diagnostics.
- Accu-Chek Inform II Blood Glucose Monitoring Quick Reference Guide for Healthcare Professionals (05234654001) 2012-10 USA
- REFER TO THE CMC POLICIES WHICH I REFERENCED WHICH ARE ATTACHED TO THIS ELECTRONIC DOCUMENT ON THE LAST PAGE
- Refer to the MSDS sheets attached to this document.

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