DIABETES SKILLS CHECKLIST INSULIN ADMINISTRATION WITH VIAL/SYRINGE

Trained Staff Member:	Student Name:	School/Grade:
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			Return Den	nonstration	
GLUCOSE MONITORING	Training Date/ RN Initials	Training Date/ Staff Initials	Date/ RN + Staff Initials	Date/ RN + Staff Initials	Date/ RN + Staff Initials
A. States name and purpose of task					
B. Identifies supplies					
1. Insulin syringe					
2. Medication-Insulin					
3. Gloves					
4. Alcohol wipe					
5. Tissue or cotton ball					
6. Sharps container or disposal plan					
C. Procedure:					
1. Wash hands					
2. Gather supplies (Insulin, insulin syringe, gloves,					
alcohol wipe, tissue or cotton ball)					
3. Check 6 Rights of medication administration					
✓ Right student					
✓ Right time					
✓ Right medication					
✓ Right dose					
✓ Right route					
✓ Right documentation					
4. Check insulin expiration date and appearance-cl	ear,				
colorless and free of clumps					
5. First time vial is used remove cap					
6. Clean rubber stopper with alcohol					
7. Remove needle cap	.•				
8. Pull plunger back to pull air into syringe until th					
of the plunger is at the line for the number of un	its				
required for the dose					
9. Push the needle through the rubber stopper-mak	ing				
sure the tip of the needle is not in the insulin	1:				
10. Press the plunger to push air into the vial of insu					
11. Turn the vial and syringe upside down so that th of the needle is in the insulin	епр				
12. Holding the vial with one hand, pull back on the					
plunger to pull insulin into the syringe until has					
reached the line of the proper dose					
13. Check for large air bubbles-if there is push insul	in				
back into the syringe and repeat step 11.	""				
14. Double check if plunger at line marking of prope	2r				
dose					
15. Student assists in selecting site-rotate (change) s	ites				
16. If student using alcohol pad, clean selected site a					
allow to dry					
anon to ary	l	1	1	1	

 17. Pinch a large area of skin and push the needle straight into the skin all the way, at a 90 degree angle 18. Push the plunger all the way down to inject insulin 19. Release pinched skin, and count to 5 slowly, and pull the needle straight out 20. Safely dispose of used needle and syringe in sharps container 							
21. Remove gloves and wash hands							
D. Post Procedure							
22. Inspect area for blood spills and follow							
district/program protocols for cleaning							
23. Put insulin and supplies away							
24. Document procedure-including date, time, site of							
injection and amount of insulin administered.							
Sign/initial documentation.							
Competency Statement: Demonstrates correct performance of insulin administration via syringe.							
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Staff Signature:	Initials	Date					
The above named staff member demonstrates correct performance of insulin administration via syringe.							
Training RN Signature:	Initials	Date					