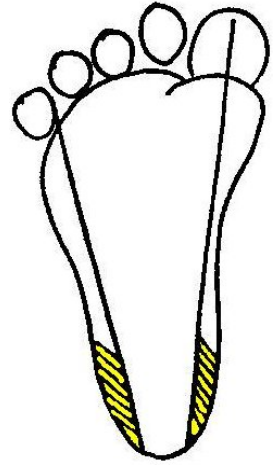


Accu-Chek Inform II Glucometer: Newborn Heel Puncture - Quick Reference Guide for Blood Glucose

Site Selection:

- Lateral or medial plantar surface of the heel, free of scars, cuts, bruises or rashes.
- Avoid previous puncture site - [use foot without newborn's identification band, when possible.](#)
- Shaded areas indicate puncture sites - [To avoid risk of osteomyelitis & osteochondritis; to avoid tendons do not use the arch of foot.](#)



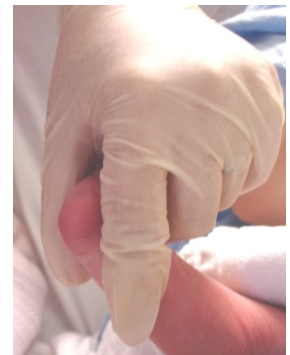
Lancet Used:

- **Safe-T-Lance Pink** (1.2 mm depth; 1.5 mm width).



Procedure:

- Universal precautions – use gloves.
- Verify newborn identification and physician's orders on Health Record.
- Clean the heel with warm soapy water. Dry.
- Site may be warmed prior to puncture for 2 - 3 minutes to increase capillary flow. [The warming device should not exceed 42 ° C. Prior to placing device on neonate's heel check temperature on your own forearm.](#)
- Gather Blood Collection Supplies: [Safe-T-Lance Pink, Poly-propylene 10uL micro-collection pipette; 2% chlorhexidine in 70% isopropyl alcohol swab, 2x2 gauze, paper tape.](#) (refer to [Ordering Supplies and Lancet Use - Quick Reference Guide](#))
- Prepare AccuChek Inform II blood glucose meter for a patient test. AccuChek Inform II glucose test strip is inserted into the glucose meter. Glucose meter will accept a patient sample for 10 minutes before timing out. [\(POCT.04.01B\)](#)
- Position neonate on side or back.
- Disinfect site with 2% W/V Chlorhexidine Gluconate in 70% isopropyl alcohol. Use circular motion. Swab 2 -3 seconds. Air dry heel for 30 seconds.
- Twist & Pull out the protective tab from lancet & discard in sharps container.
- Hold the neonate's foot & support the ankle.
- Securely position lancet parallel to the toe, heel line in the designated puncture area. (see photo) Pull skin taut for easier skin puncture.
- Press button on lancet with forefinger to puncture skin. Discard lancet in appropriate sharps container.
- Wipe 1st drop of blood with gauze. [\(To eliminate extracellular fluid and any residual alcohol contamination.\)](#) Relax grip on heel to allow a free flow of blood.
- Apply 2nd drop of blood to the front edge of the glucose test strip. Alternately the polypropylene micro-collection pipette 10 uL can be used. (see below). [\(POCT04.01.C\)](#)



			<p>Normal Range Neonates: 2.6 – 5.5 mmol/L</p> <p>Action Ranges Neonates: 2.0 - 2.5 & 5.6 – 10.0 mmol/L</p> <p>Critical Results Neonates: < 2.0 & > 10.0 mmol/L</p> <p>Glucose Measuring Range: 0.6-33.3 mmol/L</p> <p>< 0.6 mmol/L reported as RRLO</p> <p>>33.3mmol/L reported as RRHI</p> <p>Hematocrit Limitation: 0.10-0.65</p>
<p>Apply whole blood from the heel puncture site to the front edge of the test strip.</p> <p>Keep instrument horizontal or pointing in a downward direction.</p>	<p>If the infant is in an incubator:</p> <p>Use a micro-collection pipette. Squeeze pipette to draw whole blood from heel puncture into the pipette.</p>	<p>To apply whole blood to the front edge of the test strip: Squeeze micropipette to dispense 0.6 uL whole blood.</p>	

- Apply pressure to puncture site to stop bleeding. Apply folded 2x2 gauze & paper tape to puncture site. Remove folded gauze & paper tape after 30 minutes.

AccuChek Inform II Test Strip interference - Galactose:

Elevated Galactose can occur in neonates with inherited galactosemia (1 per 40,000 in BC). During the first 5 days of life, the first glucose value > 5.5 mmol/L is checked simultaneously with a laboratory glucose. Collect a laboratory draw prior to next scheduled feed with the AccuChek Inform II glucose. See Clinical Guidelines for Hypoglycemia & Newborn Glucose management. (WW.07.05)

REVISION & APPROVAL LOG

Version	Revision Type	Description of Change	Revision Date	Technical Approval	Medical Approval
1.0		New document	01 Mar 2013	Elvira Kozak	Dr. Cathy Halstead
1.1	Minor	Revision	30 Nov 2014	Elvira Kozak	
1.2	Minor	Document title and number change. Upload to QMS document control	27 Dec 2016		Dr. Benjamin Jung
1.3	Minor	Reformatted	July 2, 2019	Calvin Lee	

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