

Insertion

Gather supplies

- A** : Gather supplies and check integrity & expiration/use by date:
 - ▶ Smart transmitter, adhesives, insertion tools, sensor, custom procedure kit
 - ▶ Sterile gloves
 - ▶ Lidocaine
 - ▶ Chlorhexidine or Betadine
- A** : Confirm allergies. Ask patient to confirm BG in target range for procedure
- A** + **H** : Wash hands
- A** : Open outer plastic package of custom procedure kit

Mark sensor location

- H** : Wipe skin with alcohol
- H** : Mark smart transmitter edges
- H** : Use incision template to mark horizontal and vertical lines
- A** : Position patient, lateral recumbent position, upper arm on a flat, horizontal plane
- H** : Open larger kit package on clean flat surface designated as the sterile field

Wash hands, put on gloves, and prepare sterile field

- H** : Wash hands, put on sterile gloves, set up sterile field
- A** : Present tool tray

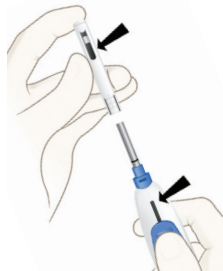
Prepare sensor

- H** : Loosen tools, remove red locking tab, test blue slide twice, leave blue slide in forward and locked position, snap into tray
- A** : Add 10 mL of saline, present sensor holder
- H** : Place sensor holder on field
- H** : Unsnap insertion tool (use 2 hands), squeeze ridges on sensor holder and pull to remove cap
- H**

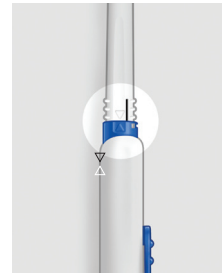
1. Remove insertion tool from tray and retract the cannula by sliding the blue slide back.



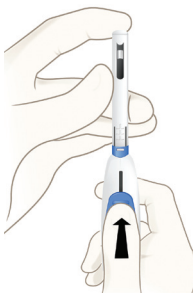
2. Hold the insertion tool slightly upright, firmly support tip of the sensor holder. Align the slot in the sensor holder with the slot in the insertion tool.



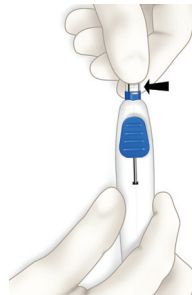
3. Slowly slide the sensor holder onto the cannula and snap into place so the two triangles are touching at the tip.



4. Firmly support the tip of the sensor holder while gently moving the blue slide forward until it covers the sensor.



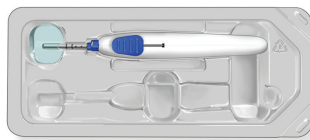
5. Squeeze the ridges on the sensor holder to remove.



6. Check to make sure the sensor is in the cannula.




7. Return the insertion tool with sensor to the tray. Ensure the cannula is submerged in saline and hydrates for at least five minutes. Add more saline if needed.




Prep incision site: Disinfect ► Drape ► Anesthetize

- A** : Provide disinfectant
- H** : Scrub at planned incision line and disinfect x 3; allow disinfectant to dry between each pass, drape
- A** : Present syringe and lidocaine
- H** : Anesthetize with 1 mL at incision line and 1 mL at pocket line
- H** : Wait a few minutes, check effect; give additional lidocaine if needed



Make incision

- H** : Use pencil grip and make punch incision, approximately 5 mm wide and 3-5 mm deep 


Make pocket

- H** : Ensure fingers are on top and sides of blunt dissector, introduce into incision at 45 degree angle until depth guards touch skin; with depth guards touching skin and no fingers underneath tool, drop flat, advance forward following vertical line 

Insert sensor

- H** : Introduce insertion tool at 45 degree angle (up to 90 degrees) to find pocket, flatten tool, advance it into the pocket stopping between markings 
- H** : While stabilizing tool, unlock blue slide by pressing on its widest end and retract
- H** : Remove insertion tool and check tip of insertion tool cannula to ensure sensor is in pocket 

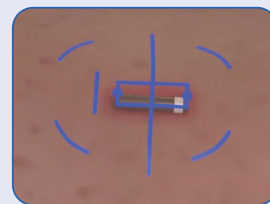
Dry, close, and dress incision. Teach incision care

- H** : Apply pressure for at least 3 minutes and until bleeding stops; review *incision care* 
- H** : Apply Steri-Strips™, remove drape without touching patient's skin, apply padded Tegaderm™

Removal

Locate and mark sensor. Mark incision line

- H** : Patient upright, clean skin with alcohol, mark reference dots on each palpable end
- A** : Place patient in lateral recumbent position, arm markings facing up to ceiling, elbow and shoulder at same height
- A** : Use smart transmitter/placement guide to find excellent signal; mark 4 corners
- H** : Palpate and mark sensor ends with small horizontal lines; draw a rectangle to outline entire sensor. Draw a horizontal line through midpoint of rectangle; as shown
- H** : Draw approximately 5-6 mm (up to 8 mm) wide incision line, 3-5 mm below distal end of rectangle



Wash hands, put on gloves, and prepare sterile field

- H** : Wash hands, put on sterile gloves, organize tools and place within reach: ► Loosen syringe cap ► Remove scalpel guard ► Unlock clamp

Disinfect and drape incision

- A** : Present/provide disinfectant
- H** : Scrub at planned incision site, disinfect x 3, allow disinfectant to dry between each pass, drape


Administer anesthetic

- H** : Anesthetize incision line with 0.5 to 1.0 mL and each side of sensor pocket with 0.5 mL


Check for full anesthesia

- H** : Wait a few minutes, check effect; give additional lidocaine if needed

Make incision

- H** : Make incision approximately 5-6 mm (up to 8 mm) wide and 5 mm deep; ensure incision is uniform edge to edge and has penetrated through dermis 
- H** : Stop and control any bleeding before proceeding with clamp entry

Insert clamp, remove sensor

- H** : Using non-dominant hand, place thumb and index/middle finger at outer edges of horizontal line to stretch skin taut
- H** : Gently push down on incision's lower lip, at 30 degree angle, introduce only clamp tip. Without advancing clamp, fully open and close clamp wider than rectangle edges 3-5 times
- H** : Continue gently pushing down on incision's lower lip, open clamp to full width of incision and advance to horizontal line. Gently close clamp completely. If no gap in clamp jaws: maintain clamp position in incision, fully re-open clamp and lift wrist slightly to increase clamp angle; gently close clamp
- H** : If there is a gap in clamp jaws: sensor is grasped, make quarter turn of wrist to remove sensor
- H** : Apply pressure for several minutes and until bleeding stops; review *Incision Care* 
- H** : Apply Steri-Strips™, remove drape without touching patient's skin, apply padded Tegaderm™



Continuous Glucose Monitoring System

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