



**Mid-State
Regional Emergency Medical
Advisory Committee**

**Policy Statement
#10-01**

**Blood Glucometry for
Basic Life Support
Agencies**

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New York State Department of Health Bureau of Emergency Medical Services (NYS DOH BEMS) Policy Statement 05-04 allows the use of Glucometers by Basic Life Support Agencies and Providers to check patient blood glucose levels. This approval was given under the conditions that the EMS service wishing to use a glucometer at the BLS level, be granted approval by the local REMAC., each EMT complete an approved training program and the service apply and be granted a Limited Laboratory Registration. In order to provide this additional care, a BLS Agency must complete the following items and be approved by the REMAC before allowing BLS providers to perform this skill.

1. Complete the Limited Laboratory Registration form (DOH-4081), Send DOH-4081 including registration fee to:
NYS DOH
Wadsworth Center
Clinical Laboratory Evaluation Program
PO Box 509
Albany, NY 12201-0509
1. Develop written Agency Policies and Procedures to include:
 - i. Didactic and psychomotor objectives for training of authorized users including who will be authorized to conduct this training.
 - ii. Notice to the EMS Agency Physician of the use of the glucometer.
 - iii. Quality Assurance program, to include appropriateness review by Agency Medical Director.
 - iv. Documentation of control testing process.
 - v. Storage and proper disposal of sharps.
 - vi. Training documentation and attendance records of authorized users.
2. Submit to the Midstate REMAC
 1. Completed *Midstate REMAC Application for BLS Agency to Perform Blood Glucose Monitoring Agency*

2. **Limited Service Laboratory Registration DOH-4081 and authorization number received from DOH**
3. **Copy of Policies and Procedures as outlined above**
4. **Letter of recommendation from Agency Medical Director**
5. **Medical Director Verification form (DOH-4362)**

PURPOSE:

Establish a uniformed procedure to determine a safe and effective manner for Basic EMT's to determine Blood Glucose levels in the Pre-Hospital Setting

EDUCATION

All Basic EMT's will be required to attend Agency specific training sessions utilizing glucometer used by the Agency. The provider will take an on-line test via the Midstate website after completion of the training.

QUALITY

The Agency will designate an individual who will complete and maintain records of quality control testing.

PROCEDURE

- If Patient presents with an altered mental status request ALS intercept.
- Follow NYS DOH BEMS protocol for the General Approach to Medical Emergencies prioritizing and managing Airway, Breathing, Circulation.
- Obtain a complete set of vital signs
- Check Blood Glucose and place lancet in an approved sharps container.
- If Blood Glucose is greater than 80 mg/dl and the patient has an altered mental status, confirm ALS is enroute and monitor A, B, C's.
- If hypoglycemic (blood glucose less than 80 mg/dl) and awake (A or V on AVPU) with the ability to maintain their airway; administer oral glucose consistent with NYS BLS Protocol. Repeat vital signs and AVPU after 5 minutes.
- If completely alert and oriented, request medical control approval to cancel ALS.
- Continue on going assessment consistent with current BLS protocols.

DO NOT DELAY TRANSPORT!

**Midstate REMAC
BLS Agency Blood Glucose Application**

Agency Name _____ Agency Code _____

Address _____
Mailing Address City Zip

Contact _____ Title _____ Limited Lab Reg # _____

Daytime Phone # _____ Email _____

Agency Medical Director _____

Representative responsible for BLS Glucose Testing Care:

Name _____ Contact Phone # _____

Agency QA/QI Coordinator:

Name _____ Contact Phone # _____

_____ request authorization from the Midstate REMAC to permit
Agency

BLS providers to perform Blood Glucose testing in compliance with NYS BLS Protocol and Midstate Policy Statement. Attached to this application are the following items;

- Agency Medical Director request
- Completed NYS Department of Health Clinical Laboratory Limited Laboratory Registration application for blood testing licensure (DOH-4081)
 - Copies of written Policies and Procedures for the operation of the glucometer that are consistent with local protocols and as described in NYS DOH BEMS Policy 09-13.

As CEO of the above agency, I agree to the requirements set forth in the Midstate REMAC Policy Statement on blood glucose monitoring and will be responsible to assure that Agency providers follow the Regional protocols. I also agree that all Blood Glucose monitor operators will successfully complete the required training with and approved instructor and that documentation of this training will be submitted to the Regional QA/QI Coordinator at least yearly.

Name _____
Print Name

Signature

Date

Date submitted _____

REMAC Approval _____

MIDSTATE EMS BLOOD GLUCOMETRY BASIC EMT SKILL SHEET

PASS	FAIL

EMT Name	EMT #	EMS Agency
Evaluator (Print)	Date	Evaluator Signature

Takes or describes body substance isolation precautions	C	
Able to identify all equipment used	1	
Prepares equipment according to manufacturers recommendations	C	
Safely obtains blood sample	1	
Applies blood to glucometer per manufactures recommendations	C	
Places direct pressure over finger site	1	
Reads and record glucometer results	C	
Disposes of sharps appropriately	C	
Provides appropriate treatment based	C	
Assess patient's response to interventions	1	

NOTE: Provider must complete all critical criteria and receive at least 3 points to pass

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