

Consider the environmental temperature's effect on the patient. It may feel warm to you, but the patient may be immobile and ill, so will need more clothing to keep them warm.

If the patient's temperature is raised, consider removing excess clothing.

☑ What to watch out for and action to take

Assessing your patient's temperature involves observation and feeling, as well as measurement. If the patient's temperature is elevated they may appear flushed and sweaty. When you are feeling their forehead or hands, they may feel hot to touch. Alternatively, if they are cold they may be shivering, wrapped in clothing or blankets and look pale, and their peripheries may feel cold to touch.

Blood glucose monitoring

☑ What is normal

4–7mmol/l

☑ Before you start

Remember the common steps for all clinical measurements.

Before taking the blood glucose monitoring device to the patient, the following blood glucose monitor checks need to be undertaken:

- Check test strips are in date and have not been exposed to air.
- The monitor and test strips have been calibrated together.
- If a new pack of strips are required, recalibrate the monitor.
- Complete any further quality control checks as per local guidelines.

☑ Essential equipment

Blood glucose monitor

Single use lance

Test strips

Sterile gauze

PPE

☑ Care setting considerations

Can be measured in any care setting.

When taking blood glucose measurements it is important to know when the patient last received food and any medication for blood glucose control, such as Insulin. Both of these factors can have an impact on the treatment given for abnormal blood glucose levels.

☑ What to watch out for and action to take

Abnormal glucose readings either high (hyperglycaemia) or low (hypoglycaemia) are a medical emergency and cause long term injury or death to the patient if not treated immediately. You must report abnormal findings to your mentor or a registered nurse immediately.

☑ Helpful Hints – Do I ...?

Gloves and aprons must be worn if contact with blood/body fluids/excreta is anticipated or the patient is in isolation.

Hand hygiene must be performed before touching a patient, before clean/aseptic procedures, after body fluid exposure/risk, after touching a patient and after touching a patient's surroundings.

Waste should be disposed of in a clinical waste bag if it is contaminated with blood/body fluids/excreta.

Step	Reason and patient-centred care considerations
1. Perform steps 1-6 of the common steps (see pp. 8-9).	To prepare the patient and yourself to undertake the skill.
2. Select the finger to be lanced, involving the patient in making this decision as appropriate.	Placing the patient's hand below heart level will aid blood flow. Avoid index finger and thumb. Earlobes are a suitable alternative site for obtaining blood glucose samples. Never use toes for obtaining blood glucose samples. Do not use the same site repeatedly to reduce infection risk.
3. Using soap and water wash and dry the patient's hand/finger to be lanced.	Fingers need to be clean, as a contaminated sample will give an inaccurate result. The sample can be contaminated by: <ul style="list-style-type: none">• Using alcohol gels and alcohol wipes to clean the finger.• Newspaper print, perfumes, hand creams, hairspray, hair gel.• The residue of food or drink on fingers.
4. Insert test strip following the manufacturer's guidelines into the strip port at the top of the meter. Wait for the flashing blood drop symbol to appear.	To prepare the glucometer.

Step	Reason and patient-centred care considerations
<p>5. Prepare the single use lancing device by twisting and remove lancing device cap.</p> <p>Obtain the blood droplet from the patient by firmly pressing the lancing end against the chosen site.</p> <p>If using a finger, use the side.</p> <p>Remember to rotate the site.</p> <p>Depress the lancet fire clip.</p> <p>Dispose of used lancet in sharps bin.</p>	<p>The side of the finger is less painful and easier to obtain a hanging droplet of blood.</p> <p>Sites are rotated to avoid infection, to reduce pain from toughened skin.</p> <p>To avoid needle-stick injuries</p>
<p>6. Wait 5 seconds, then in continuous motion milk the blood flow. For example in a finger this would be from the palm of the hand down towards the tip of the finger. Never squeeze the finger or the area directly around the site.</p>	<p>This may result in inaccurate results from interstitial fluid in the sample.</p>
<p>7. Apply the blood to the strip. Ensure that the window on the test strip is entirely covered with blood. The blood glucose result will be displayed on screen in mmol/L.</p>	<p>The window on the test strip allows verification of a correctly dosed strip which needs to be covered to ensure accurate results.</p>
<p>8. Press firmly on puncture site with sterile gauze.</p>	<p>To stop bleeding.</p>
<p>9. Remove used test strip from meter.</p>	
<p>10. Perform steps 9–12 of the common steps (see pp. 8–9).</p>	<p>To ensure that the:</p> <ul style="list-style-type: none"> • patient is safe, comfortable and receiving the appropriate care; • results have been documented in the patient's records; • equipment is clean and in working order.

Evidence base: Dougherty and Lister (2011)