SELF-CARE CONDITIONS PROTOCOL: DIABETES TESTING AND INJECTION SUPPLIES v4

Approved February 23, 2021

PURPOSE

This protocol specifies the criteria and procedures for pharmacist(s) to initiate the dispensing of diabetes testing and/or injection supplies for diabetes self-care/management, including hypodermic syringes and needles as authorized under KRS 217.177.

PHARMACIST EDUCATION AND TRAINING

Prior to initiating the dispensing of diabetes testing supplies under this protocol, pharmacist(s) must have received education and training in diabetes and the supplies necessary to test blood glucose levels and properly administer injectable medications for diabetes, including review of the most current American Diabetes Association (ADA) Standards of Medical Care in Diabetes and the monitoring parameters associated with pharmacologic therapies for the treatment of diabetes. The education of pharmacist(s) must be conducted by a provider accredited by the Accreditation Council for Pharmacy Education, or by a comparable provider approved by the Kentucky Board of Pharmacy.

Provider of Training: _____

Date Training Completed: _____

CRITERIA

Pharmacist(s) authorized to initiate the dispensing of diabetes testing and/or injection supplies will follow the most current ADA Standards of Medical Care in Diabetes for pharmacologic options and the associated guidelines for medication administration and blood glucose monitoring.

Inclusion criteria:

• Any individual who currently has a diagnosis of diabetes, as defined by the ADA Standards of Medical Care for Diabetes and is interested in obtaining diabetes testing and/or injection supplies for self-care purposes in an outpatient setting.

Exclusion criteria:

Any individual who exhibits symptoms of hyperglycemic crisis. For both diabetic ketoacidosis (DKA) and hyperosmolar hyperglycemic state (HHS), the classic clinical picture includes a history of polyuria, polydipsia, weightloss, vomiting, dehydration, weakness, and mental status change. These individuals should be referred to a setting where they can receive immediate medical attention.

American Diabetes Association. 7. Diabetes technology: *Standards of Medical Care in Diabetes*—2021. Diabetes Care 2021;44(Suppl. 1):S85–S99. Suggested citation: American Diabetes Association. 6. Glycemic targets: *Standards of Medical Care in Diabetes*—2021. Diabetes Care 2021;44(Suppl. 1):S73–S84.

DIABETES TESTING AND INJECTION SUPPLIES

This protocol authorizes pharmacist(s) to initiate the dispensing of the following diabetes testing and injection supplies for self-care purposes in quantities sufficient to provide adequate testing and glucose-lowering medication administration based upon patient history, including refills for up to 12 months.

- Glucometer
- Glucometer test strips
- Lancet devices
- Lancets
- Blood glucose control solutions
- Alcohol wipes
- Insulin syringes and needles appropriate to the type of injectable glucose-lowering medication utilized by the patient

PROCEDURES FOR INITIATING DISPENSING OF DIABETES TESTING AND INJECTION SUPPLIES

Diabetes testing and/or injection supply initiation will be individualized based on the diagnosis and pharmacologic treatment of diabetes as defined by the current ADA Standards of Medical Care in Diabetes and individual preferences/goals:

Testing supplies (example of potential testing frequency based on pharmacologic treatment):

- Intensive insulin therapy: 4-10 tests per day
- Basal insulin and/or oral or injectable glucose-lowering agents: 1-3 tests per day
- Non-pharmacologically managed diabetes: 1-4 tests per day

Injection supplies:

• Insulin syringes and needles appropriate to the type of injectable glucose-lowering medication utilized by the patient: quantity sufficient to administer up to 90 days of glucose-lowering injectable medications as prescribed for the patient

PROCEDURES FOR MONITORING AND CONTINUATION OF DISPENSING DIABETES TESTING AND INJECTION SUPPLIES

Follow-up monitoring and evaluation shall occur at a minimum of every 90 days to determine:

- Changes in pharmacologic treatment for diabetes
- How the individual is utilizing testing and/or injection supplies and efficacy of performing self- monitoring of blood glucose (SMBG)

If pharmacist(s) believes that SMBG is being performed incorrectly, education is to be provided to the individual in regard to proper use of diabetic testing supplies, as well as education on interpretation of blood glucose levels. If pharmacist(s) suspects an individual is consistently hyperglycemic or periodically hypoglycemic, the primary care provider of the individual is to be contacted. If the individual does not have primary care provider, other

healthcare provider with prescribing privilege shall be contacted.

Should follow-up evaluation and monitoring indicate an adjustment intherapy is warranted, all procedures as outlined for initiation of therapies, including education, documentation, and notification, will be followed.

EDUCATION REQUIREMENTS

Individuals, or their parent/guardian/caregiver, receiving diabetes testing and/or injection supplies under the protocol will receive education regarding:

- Monitoring technique both initially and at regular intervals, using dispensed test strips, lancets, and meter
- Proper review and interpretation of the data provided by the blood glucose meter
- Signs and symptoms of hypoglycemia and instructions on steps to take if blood glucose level is 70 mg/dL or less
- Appropriate use and disposal of insulin syringes and needles

DOCUMENTATION

Pharmacist(s) shall document via prescription record each person who receives any diabetes testing and/or injection supplies under this protocol, including:

- Documentation as required in 201 KAR 2:170 for the dispensing of prescription medication
- Documentation that the individual receiving the diabetes testing and/orinjection supplies was provided with the required education pursuant to this protocol
- Documentation of the diagnosis and pharmacologic treatment of diabetes, the plan of care implemented, and follow-up monitoring and evaluation

NOTIFICATION

Pharmacist(s) shall ask all individuals receiving diabetes testing and/or injection supplies under this protocol for the name and contact information of the individual's primary care provider and shall provide notification of the diabetes testing and/or injection supplies dispensed under the protocol to the identified primary care provider within two (2) business days. Any individual affirmatively stating that the individual does not have a primary care provider may still receive diabetes testing and/or injection supplies under this protocol provided all other applicable requirements of the protocol are met.

[If directed by the authorizing prescriber, the pharmacist(s) shall provide written notification via fax or other secure electronic means to the authorizing prescriber of persons receiving diabetes testing and/or injection supplies under this protocol within 7 days of initiating dispensing.]

TERMS

This protocol is effective as of the date parties execute this document. It shall remain in effect for a period of one year and shall automatically renew for successive one-year periods unless otherwise terminated by any party, with or without cause. Any termination without cause shall

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require prior notice to all parties of no less than sixty (60) days.

SIGNATURES

Prescriber Name	Prescriber Signature	Date
Pharmacist Name	Pharmacist Signature	Date

American Diabetes Association. 7. Diabetes technology: *Standards of Medical Care in Diabetes*—2021. Diabetes Care 2021;44(Suppl. 1):S85–S99. Suggested citation: American Diabetes Association. 6. Glycemic targets: *Standards of Medical Care in Diabetes*—2021. Diabetes Care 2021;44(Suppl. 1):S73–S84.