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**Sent:** Friday, April 29, 2011 12:36 PM  
**To:** [licensinglistserv@virginiainteractive.org](mailto:licensinglistserv@virginiainteractive.org)  
**Subject:** "Blood Glucose Monitoring Provider Update"

This file is being sent to providers of children's residential facilities from the Virginia Department of Social Services Email Distribution Service.

\*\*\*Please do not reply to this email.\*\*\*

Please review the attached guidance document and implement any necessary changes as soon as possible. It contains recently updated infection control guidelines for blood glucose monitoring practices for residents with diabetes. Additional information can be found on the following CDC website (<http://www.cdc.gov/injectionsafety/Fingerstick-DevicesBGM.html>). You may email Carol Garby at [carol.garby@dss.virginia.gov](mailto:carol.garby@dss.virginia.gov) for questions, or contact Andrea Alvarez in the Division of Surveillance and Investigation at (804) 864-8097, or your local health department.

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## BLOOD GLUCOSE MONITORING PROVIDER UPDATE

Providers: You received an email distributed by the Division of Licensing Programs (DOLP) about the CDC (Centers for Disease Control and Prevention) and Virginia Department of Health recommendations for blood glucose monitoring and sampling. The recommendation addresses the use of a single blood glucose sampling device for each resident. This recommendation was made because improper use or device malfunction can lead to the use of a contaminated fingerstick device on more than one resident and can result in disease transmission between residents. Fingerstick devices include both lancets (small medical implements used to puncture the skin to obtain blood specimens) and penlets (devices that hold lancets) and are commonly used in blood glucose monitoring to manage diabetes.

The link for the CDC website (<http://www.cdc.gov/injectionsafety/Fingerstick-DevicesBGM.html>) was included in the body of this email and we recommend you access this information now and check regularly for updates. Although we encourage you to incorporate all of the applicable recommendations from the website, we are most concerned with the use of fingerstick devices because there have been multiple documented cases of Hepatitis B transmission between residents in facilities that were due to improper use of fingerstick devices.

The CDC website includes the following background information:

There are two main types of fingerstick devices: those that are designed for reuse on a single person and those that are disposable and for single-use.

Regardless of type, "Fingerstick devices should **never** be used for more than one person."

Your facility may use fingerstick devices that are designed for reuse on a single person *only for that individual*. Any fingerstick devices designed for reuse on a single person must be clearly labeled with the individual resident's name and stored in a secure area such as a locked cabinet or medication cart.

If you have residents who require blood glucose monitoring, you must ensure that you have a fingerstick device *for each resident*. Please contact your pharmacy and physicians as needed to obtain individual devices. It is important for you to take the necessary steps to ensure no fingerstick devices are shared in your facility. You need to initiate action on this *immediately* if you have not already done so.

The Division of Licensing Programs is *not requiring* the use of *disposable* devices for blood glucose monitoring. However, use of disposable devices is considered a facility "best practice" because their use does decrease the risk of disease transmission.

All providers must ensure that their procedures are consistent with the CDC guidelines as stated in this document. Staff must have appropriate training.

Some additional information for you to consider:

1. Although not required by regulation, it is recommended that you have a blood glucose meter (point of care testing device used to measure the level of glucose in the blood, also known as a glucometer) *for each resident* because it is difficult for staff to ensure that all blood has been removed from these devices. These devices can often be obtained for free through diabetic supply companies.
2. Following these recommendations does not eliminate the risk of an accidental stick associated with a fingerstick device. If a staff person is accidentally stuck by a used needle or lancet, he/she may be exposed to body fluids and disease transmission may occur. There are special lancets, penlets, and other devices that reduce the risk of accidental needle sticks among staff.

We greatly appreciate your cooperation in this matter. We suggest you utilize the link to the CDC website for additional information. Questions may be directed to your licensing inspector or your local health department.