## POINT OF CARE TESTING - *Waived Testing*

### Staff Competency Checklist

**Name:** ____________________________________  **Unit:** __________

**Date:** ____________

Procedures are On-Line at: [http://manuals.ucsfmedicalcenter.org](http://manuals.ucsfmedicalcenter.org)  **Point of Care Testing Manuals**

Initials below indicate training was successfully completed.

<table>
<thead>
<tr>
<th>PROCEDURE</th>
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<tbody>
<tr>
<td><strong>ColoScreen®</strong> – each time a new box of slides or a new bottle of developer is opened, Quality Control (QC) must be performed using the ColoScreen® monitor on the reverse side of the slide.</td>
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<tr>
<td>1. Places a drop of ColoScreen® developer between the positive and negative monitor boxes on the reverse side of the slide.</td>
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<tr>
<td>2. Reads results after 30 seconds and within 2 minutes. The Positive ColoScreen® Monitor should turn blue, Negative ColoScreen® Monitor should have no trace of blue.</td>
</tr>
<tr>
<td>3. Records the results of the monitors on the ColoScreen® QC log, including lot # and expiration date of the newly opened product.</td>
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<tr>
<td>4. <strong>Labels box of slides and/or developer with the date of QC and initials.</strong></td>
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<tr>
<td>5. If QC fails remove product from use and returns to Material Services.</td>
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<tr>
<td>6. Patient test must be completed, and interpreted and results noted before proceeding with the QC (ColoCheck monitors on back of card). After verifying the QC monitor results, record the patient test results and the QC Monitor results on the ColoScreen Patient Results Log, the patient's medical record or UCARE.</td>
</tr>
<tr>
<td><strong>Gastroccult®</strong> – each time a new box of slides or a new developer is opened, QC must be done using the performance monitor area on the Gastroccult slide.</td>
</tr>
<tr>
<td>1. Places a drop of Gastroccult® developer between the positive and negative monitor boxes on the slide.</td>
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<tr>
<td>2. Reads results after 10 seconds and within 60 seconds.</td>
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<tr>
<td>3. Records the results of the monitors on the Gastroccult® QC log, including the lot# and expiration date of the newly opened product.</td>
</tr>
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<td>4. <strong>Labels box of slides and/or developer with the date of QC and initials.</strong></td>
</tr>
<tr>
<td>5. If QC fails removes product from use and returns to Material Services.</td>
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<tr>
<td>6. pH is neither used nor recorded.</td>
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<tr>
<td>7. When recording a patient’s test result, also document that internal quality control (Performance Monitor Area) was used and passed quality control (QC). Record QC results on patient’s medical record or UCARE.</td>
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### pH Determination – each time a new dispenser is opened, verify QC has been performed by checking color chart for initials and the date QC was performed in the lab.

- ______ (Observer’s Initial)  
- ______ (Trainee’s Initial)

To test for pH:

1. Remove one to two inches of pH paper from the holder for each test.
2. Apply the tip of the paper to pooled fluid being tested. Avoid contact with any other fluids not being tested.
3. Observe for immediate color change
4. Record pH value, corresponding to the color change, as compared to the color chart.

### Multistix Urinalysis – each time a new bottle of Multistix reagent strips is opened a QC must be done using Chex-Stix positive and negative control strips. Subsequently, a QC must be done monthly on open bottles in use more than 30 days.

- ______ (Observer’s Initial)  
- ______ (Trainee’s Initial)

1. Fills each test tube, one labeled positive and one labeled negative, with 12ml of distilled water.
2. Places a positive check strip in the tube labeled positive, a negative check strip in the tube labeled negative.
3. Inverts the tube back and forth for 2 minutes.
4. Allows the tubes with the Chek-Stix in them to stand for 30 minutes.
5. Inverts tubes and discards the Chex-Stix.
6. Dips a Multistix reagent strip into the Negative Control Solution. Compares reagent areas to corresponding color chart on bottle, following directions for proper read time.
7. Repeats step 6 with positive control solution.
8. Records the results of the QC on the Multistix QC log, including the lot # and expiration dates of the newly open product and Chex-Stix.
9. **Labels the bottle of reagent strips with the date of the QC and initials.**
10. If QC fails, removes the product from use and returns to Material Services.
Accu-Chek Inform Blood Glucose Meter – QC consists of “Coding” the Inform meter and running a High and Low control each day of use, and whenever a new vial of test strips is opened. Controls and test strip vials must be dated and initialed when first opened.

☐ _______ (Observer's Initial)  ☐ _______ (Trainee's Initial)

CODING THE METER

1. Compare the three-digit number on the Code Key with the code number on the test strip vial.
2. With meter turned Off, snap the new Code Key (slots facing towards the meter) into the Code Key slot with the printed side facing up.
3. Leave the new Code Key in the meter.

HIGH/LOW CONTROL SOLUTION TESTING

1. Check the expiration date on controls and test strips vials.
2. Turn on the meter.
3. Scan the operator barcode. Operator ID can also be entered manually.
4. Select “Control Test” on the menu screen.
5. Scan the lot number on the control vial.
6. Scan the lot number on the test strip vial.
7. Gently insert test strip with the yellow target area facing up.
8. Touch and hold drop of glucose control solution to the curved edge of the yellow target area.
9. Wait for meter to display results.
10. If “Pass” displays, press the forward (►) button and repeat steps 5-9 using the next level of control solution.
11. If “Fail” displays, repeat the test using the same control solution.
12. Enter up to 3 preprogrammed comments under the “Comment” menu screen.
13. Write the date and initials on the controls and test strip vials (not on the lid).
14. Place the meter in the docking station to download the information to the Clinical Laboratory.
QuickVue+ Urine Pregnancy - QC consists of conducting a check with the control set each time a box of 30 QuickVue+ Urine Pregnancy tests are opened. The control set includes one bottle (4.5ml) of hCG Negative Control and one bottle (4.5ml) of hCG Positive Control.

- [ ] _______ (Observer's Initial)
- [ ] _______ (Trainee's Initial)

1. Store hCG Urine Control Set at room temperature.
2. Check expiration dates on device pouches and hCG control reagents.
3. If new bottles of controls are opened, write opened date, and your initials on the bottle of control reagent. Do not use reagents beyond printed expiration date.
4. Remove 2 devices from their protective pouches.
5. Thoroughly mix contents of each bottle of control reagent by gently swirling.
6. Hold the bottle in a straight up and down position, dispense 4 drops of hCG Urine Control set Positive Control into the sample well of one device.
8. A Positive reading should appear on the Positive Control device. In addition to the blue band in the control window, a distinct pink band appears in the test region, creating a + sign with the pre-printed horizontal blue line and the appearance of the vertical pink line.
9. Repeat the above procedure using the Negative Control into the sample well of the second device.
10. A Negative result should appear on the negative control device. Only the blue color band appears in the control window. The test region will only display the pre-printed horizontal blue line. A negative result cannot be read prior to 3 minutes.
11. Record the QC results on the QC log, along with the lot numbers and expiration dates of the newly opened product and control solutions. For the QC log, document the Lot Number printed on the exterior of the box of test devices. Test devices and controls expire on the printed expiration date on the pouches and vials.
12. **Write date of QC and your initials on the box** with a permanent marker to indicate that the box has passed QC. If the QC fails, remove the product from use and return to Material Services and note on log.
13. For each patient test, the appearance of the blue control band in the control window of the test device must be documented along with patient test results.

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QuickVue Influenza Test – QC consists of performing 3 external procedural controls each time a new box of 25 QuickVue Influenza test strips is opened. The external procedural control consists of Positive A, Positive B and a Negative Control. In addition, there is a Built In procedural control which consists of a Positive Control indicated by the appearance of a blue band on the test strip and a Negative Control indicated by a red background color changing to a light pink/white background color. The Built In procedural control is documented with each patient test. QuickVue Influenza Test does not differentiate between Influenza A and B.

1. Check expiration dates on the test strips and reagents.
2. Remove 1 test strip from its protective pouch.
3. Dispense one vial of extraction reagent into an extraction tube, gently swirl to mix.
4. Place the Positive A Control swab into the extraction tube, rotate the swab 3 times in the solution, then press the swab on the side of the extraction tube as the swab is removed.
5. Discard the swab in a biohazard bin or sharps container.
6. Place the test strip into the extraction tube, with the arrows pointing down.
7. Wait 10 minutes to read the results, do not handle or move the test strip during this time.
8. Record the QC results on the External QC log, along with the lot numbers and expiration dates of the newly opened product and control solutions.
9. Repeat steps 2 through 8 using the Positive B and Negative Control swabs.
10. Write date of QC and initials on the box to indicate that the box has passed QC. If QC fails, remove the product from use, return to Material Services, and note on log.
11. The Built In procedural control is documented with every patient test.
12. A Built In Positive Control is incorporated in each test strip. It is the appearance of a blue band in the upper region of the strip.
13. A Built In Negative Control is the clearing of a red background color to a light pink/white background.
14. Record the procedural QC results on the Patient Control Log with each patient test.
15. If procedural QC fails, remove the product from use, return to Material Services.

Name: _______________________________  Unit __________
Date:_______________

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Name: _______________________________  Unit __________
Date:_______________
BINAX NOW RSV Test – QC consists of performing 2 external procedural controls each time a new box of 10 BINAX NOW RSV test devices are opened. The external procedural control consists of Positive and a Negative Control. The Built In procedural control consists of a Positive Control indicated by the blue control band changing to pink and the Negative Control indicated by the background clearing to a light pink / white color. The Built In procedural control is documented with each patient test.

- Observer's Initial
- Trainee's Initial

1. Check expiration dates on the test devices and reagents.
2. Remove 1 test device from its protective pouch
3. Twist the vial cap off the elution solution vial.
4. Place the Positive control swab into the test vial, rotate the swab 3 times in the solution, then press the swab on the side of the extraction tube as the swab is removed.
5. Discard the swab in a biohazard bin or sharps container.
6. Fill a pipette by firmly squeezing the top bulb and placing the pipette tip into the liquid sample.
7. SLOWLY add the contents of the pipette to the MIDDLE of the white sample pad, by the arrow.
8. Immediately peel off the brown adhesive liner from the test device, close the device.
9. Keeping the device horizontal, read results in the window 15 minutes after closing the device.
10. Record the results on the External QC log sheet.
11. Repeat steps 2 through 10 for the Negative Control.
12. Write date of QC and initials on the box to indicate that the box has passed QC. If QC fails, remove the product from use, return to Material Services, and note on log.
13. The Built In procedural control is documented with each patient test.
14. A Built In Positive Control is incorporated in each test strip. It is the change of the blue control band to pink.
15. A Built In Negative Control is the background of the test window clearing to light pink / white.
16. Record the procedural QC results on the Patient Control log, along with each patient test.
17. If procedural QC fails, remove the product from use, return to Material Services.

Observer's Signature | Date
__________________________ | ____________________________

Trainee's Signature | Date
__________________________ | ____________________________

Name: ________________________  Unit ________  Date: ________________

**Signify Strep A - QC consists of performing 2 External procedural controls and documenting the extraction reagent color change, each time a new test kit, a new bottle of reagent, or a new**
canister of dipsticks is opened. The External procedural controls consist of a Positive Control indicated by 2 red lines and a Negative Control indicated by 1 red line in the control region on the test strip. The External procedural control is documented on the External QC log. The Internal procedural control is indicated by a red line in the control region, a clear background in the test region, and a color change with the extraction reagent. The Internal Procedural Control is documented with each patient test on the Patient Control log.

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1. Check expiration dates on the test dipsticks and reagents.
2. Dispense 4 drops of Reagent 1 into the extraction tube.
3. Dispense 4 drops of Reagent 2 into the same tube. **The solution must turn yellow.**
4. Add 1 drop of Positive Control into the extraction tube.
5. Place a sterile swab into the tube and rotate 10 times using a circular motion so liquid is expressed and absorbed.
6. Allow solution to stand for 1 minute.
7. Gently squeeze the swab firmly against the tube to expel as much liquid as possible.
8. Discard the swab in a biohazard bin.
9. Remove the test dipstick from canister and immediately recap the canister.
10. Place the test dipstick into the tube with the arrows pointing down.
11. Read the results in 5 minutes, do not handle or move the test stick during this time (do not read after 10 minutes).

12. **Positive Results:** Two red lines, one in the test region and the other in the control region.
14. Repeat steps 2 through 14 for the Negative control.
15. **Negative Results:** One red line in the control region.
16. **Invalid test results:** No red line in the control region.
17. Write date of QC and initials on the test kit box & QC’d bottles of reagents to indicate that the kit, and opened reagent have passed QC. If QC fails, repeat the test. If it fails again, return the box to Material Services, and note on log.
18. Write open date, expiration date (12 months after initial opening) & initials on the QC’d dipstick canister.
19. Internal Procedural Control. Follow steps above except do not use the liquid controls provided. Use a throat swab specimen.
20. A Positive Internal Procedural control is indicated by the appearance of a red line in the control region.
21. A Clear Background in the test area ensures that the reagents are working properly.
22. Document procedural control results with each patient test on the Signify Strep A Patient Control Log.
23. If the procedural QC fails, remove the product from use and return to Material Services.