

Registered Nurse's Role in Capillary Blood Glucose Testing in Community Based Care Settings

The purpose of this memo is to clarify Senior and People with Disabilities (SPD) policy related to the registered nurse's role in the practice of capillary blood glucose (CBG) testing in community based care (CBC) settings in Oregon. Several questions need to be addressed: Is capillary blood glucose testing a Task of Nursing Care? When can capillary blood glucose testing be taught and when must it be delegated?

Background

CBG testing as a single task does not meet the definition of *Tasks of Nursing Care* as defined in OAR 851 047 0010(22). However, when placed in the context of *diabetes management* and an individual's underlying clinical condition, the practice of testing blood sugars becomes more complex.

When diabetes is controlled by either oral medication or insulin injection for a very stable patient, the CBG process might be considered part of medication administration. If the RN has a role in that process, than standards identified in *Teaching Administration of Non Injectible Medications* would apply to CBG process (OAR 851-047-0020).

CBGs might be part of the RN delegation process (OAR 851-047-0030) for insulin injections if a nurse determines that there are some unique client specific issues related to the act of performing the CBG testing. There are many situations in which the process of teaching CBG testing can be safely disconnected from the client specific process of delegation.

For both delegation and teaching, written instructions for the performance of CBG testing must be left for the unlicensed person. In addition to instructions for the performance of the CBG testing, the instructions must identify risks, side effects, and appropriate responses related to the task and client status. Teaching of CBGs must include observation of the caregiver performing the testing and assurance that the care provider understands the correct maintenance and calibration of the glucometer. SPD licensing rules for community based care settings related to medication administration also support this practice.

SPD Policy

The decision as to whether the CBG testing should be delegated or taught by a nurse is *client specific* and therefore should be left to each registered nurse's professional nursing judgment.

When a nurse is involved in the care of a client, the nurse must exercise his/her discretionary authority in the evaluation of the client's clinical status, the unlicensed person's knowledge of diabetes, and the longevity of the relationship between the unlicensed person and the client to make the decision as to delegate or teach CBG testing.

If you have questions about this memo, please contact Gretchen Thompson, SPD Community Based Care Nursing Coordinator, at (503) 945-6484.