2A. MINIMED® 640G INSULIN PUMP TRAINING CHECKLIST

2A. MiniMed® 640G Insulin Pump Training Checklist
For New Medtronic Pump Users

Training Date: ________________________  Start time: ________________________  End time: ________________________

☐ Have patient check BG prior to and after training session:   BG at start: _________   BG at end: _________

Check all that apply:   ☐ Completed the Medtronic myLearning online modules
☐ Reviewed Getting Started with the MiniMed® 640G Insulin Pump

BASIC FEATURES:
Review and ensure understanding of:
☐ Button Functions
☐ Battery: type and insertion
☐ Startup Wizard
☐ Home Screen
☐ Pump unlock / Sleep mode
☐ Status Bar Icons
☐ Status Screens
☐ Menu Review
☐ Audio Options: Patient chose _________
☐ Device Options – Connect Device (if using linked meter)

KEY TO SUCCESS: BASAL
Patient has demonstrated the ability to:
☐ Set up Basal Pattern
☐ Set multiple rates
☐ Max Basal _________ units
☐ Review and Save
☐ Change basal rates
☐ Temp Basal

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

KEY TO SUCCESS: BOLUS
Patient has verbalised understanding of:
☐ A food bolus and how it is calculated
☐ A correction bolus and how it is calculated
☐ Active Insulin

Patient has demonstrated the ability to:
☐ Deliver boluses using Manual Bolus
☐ Set up and give boluses using Bolus Wizard™
☐ BG and Carb  ☐ BG Only  ☐ Carb Only
☐ Max Bolus: _________ units
☐ Use Remote Bolus (as needed)

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

KEY TO SUCCESS: INFUSION SET
Patient has verbalised understanding of:
☐ Infusion set change frequency
☐ Importance of site rotation

Patient has demonstrated the ability to:
☐ Change an infusion set: _________
☐ Fill Cannula Volume: _________
☐ Fill reservoir and change infusion set with minimal assistance

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________
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KEY TO SUCCESS: LINKED BG METER

- Patient verbalises importance of BG testing and testing times
- Charging the battery on the meter has been reviewed

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

KEY TO SUCCESS: SAFETY (to be covered with your Healthcare Professional)

- Patient has verbalised understanding of:
  - Hypoglycaemia
  - Hyperglycaemia and DKA

- Steps to take to treat hypoglycaemia
- Steps to take when BGs are above 11 mmol/L

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

KEY TO SUCCESS: ALERTS & ALARMS

- Patient has verbalised understanding of:
  - Notification Light
  - Audio Indication

- Display Icon
- Steps to take to address an alert or alarm

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

KEY TO SUCCESS: MEDTRONIC CARELINK® PERSONAL

- Value of using Medtronic CareLink® has been discussed
- Patient has been provided resources for sign-up and upload

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

WHEN TO CONTACT:

- Healthcare professional: ______  Medtronic toll free helpline: ____  NDSS for pump and meter consumables (if eligible): ______

Comment: _________________________________________________________________________________________
_________________________________________________________________________________________

ADDITIONAL TOPICS HAVE BEEN DISCUSSED:

- Suspend Delivery (manual suspend) and Resume
- Auto Suspend
- Appropriate times to manually suspend and maximum duration: _____
- Removal for X-ray, CT scan, MRI
- Back-up plan
- Sick day guidelines
- Using belt clip / activity guard / skins & accessories

THESE ADDITIONAL FEATURES WERE COVERED IN THIS TRAINING:

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<th>Insulin Settings</th>
<th>Utilities</th>
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<td>Summary</td>
<td>Preset Temp Setup</td>
<td>Airplane Mode (if using linked meter)</td>
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<tr>
<td>Daily History</td>
<td>Preset Bolus Setup</td>
<td>Block: OFF / ON</td>
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<td>Alarm History</td>
<td>Dual/Square Wave: OFF / ON</td>
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<tr>
<td>Bolus BG Check: OFF / ON</td>
<td>Bolus Increment: ________ units</td>
<td>Event Markers</td>
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<td>Missed Meal Bolus Reminder</td>
<td>Easy Bolus OFF / ON</td>
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<td>Low Reservoir Reminder</td>
<td>Bolus Speed</td>
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<tr>
<td>Set Change: OFF / ON</td>
<td></td>
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</tr>
</tbody>
</table>

THE FOLLOWING HAVE BEEN COMPLETED:

- Settings entered as directed on the Pump Initiation Settings Form
- Verified all settings to be correct
- Active insulin has been cleared

Settings entered in Insulin Pump Settings Guide
Follow-up plan outlined and reviewed

CGM Training Schedule For:  

- Same Day
- Different Date: ____________ Time: ____________  Not planned yet

Patient Signature: __________________________ Date: ___________ Trainer Signature: ____________________________ Date: ___________

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