



1. Pre-Pump Training Checklist

Patient Name:	
Patient ID (if applicable):	
Insulin Pump Model:	
Insulin Pump Serial Number:	
BG Meter Brand:	
CGM Transmitter Serial Number:	
Certified Product Trainer:	
Infusion Set:	
Prescribing Physician:	

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 _____

BALANCING GLUCOSE AND INSULIN

Patient has verbalised understanding of:

- The body's need for glucose
- The role of insulin
- The importance of glucose/insulin balance
- The purpose of basal insulin
- The purpose of bolus insulin
- The role of glucagon
- The benefits of insulin pump
- Use of rapid acting insulin

CARBOHYDRATE COUNTING

Patient has demonstrated the ability to:

- Identify foods containing carbohydrate
- Estimate carbs
- Use a food label to count carbohydrate grams accurately

CALCULATING BOLUSES

Patient has verbalised understanding of:

- A food and a correction bolus
- Insulin to Carb Ratio
- Insulin Sensitivity Factor
- Active Insulin

Patient has demonstrated the ability to:

- Calculate a food bolus using an ICR
- Calculate a correction bolus using the ISF and target BG
- Disconnection Plan
- Infusion Set Choice : _____

MANAGING INSULIN PUMP THERAPY

Patient has verbalised understanding of:

- The importance of BG monitoring and testing times
- Hypoglycaemia and common causes
- The steps to take when BG above 11 mmol/L
- Hyperglycaemia and common causes
- DKA and DKA prevention

BASIC BUTTON PRESSING

The following have been reviewed:

- Pump System Review
- Battery Insertion
- Infusion Set / Reservoir
- Home Screen Icons
- Main Menu
- Setting a Basal Rate
- Giving a Bolus

WHEN TO CONTACT:

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

Pump start training schedule for: Date: _____ Time: _____

Location: _____

Additional Comments:

Patient Signature: _____ Date: _____ Trainer Signature: _____ Date: _____