

InPen™ system data reports

How to follow-up patients on Smart MDI system by using insights reports

InPen™ smart* insulin pen system + Guardian™ 4 smart† CGM system = Smart MDI system

Introduction

A structured follow-up for patients using the Smart MDI system is recommended for efficient follow-up.

Ask user to send reports 1-2 weeks post-onboarding on InPen™ system and Guardian™ 4 system to assess initial engagement and before visits or as needed to determine possible therapy amendments and behaviour changes. The Insights Report can be emailed, printed or shared via the app.

Therapy goals

Metric	Time above ¹ 13.9 mmol/L	Time above ¹ 10.0 mmol/L	Time in Range ¹ 3.9 - 10.0 mmol/L	Time below ¹ 3.9 mmol/L	Time below ¹ 3.0 mmol/L	HbA1c ²	Average glucose ³
Goals	<5%	<25%	>70%	<4%	<1%	<7% (<53 mmol/mol)	≤8.6 mmol/L*

Review the Statistics section on the Overview report to check, Time in Range, above and below Range and Average Glucose.

*Average Glucose should be ≤8.6 mmol/L to have an HbA1c of 7% (53 mmol/mol) or below.

Personalised patient goals may be different than what is in the table. Action may not be required if personalised goals are met.

3 - Step methodology - how to follow-up patients

Step 1 : Review

Review Glucose Data, Missed Doses & Insulin Data

Step 2 : Evaluate & fine-tune

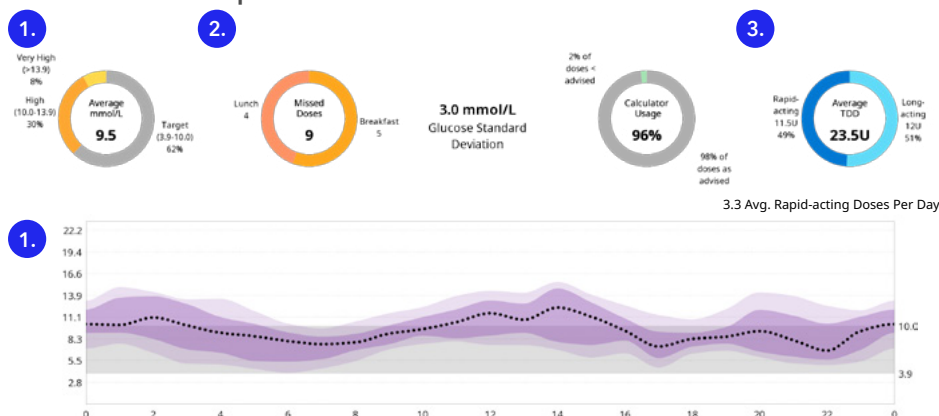
Titrate long-acting insulin, evaluate calculator use, fine-tune meal doses, ICR, ISF and Duration of Insulin Action (DIA)

Step 3 : Check behaviour

Therapy basics & knowledge

Step 1 - Review

Overview report



1. Review Glucose Stats & Modal Day

- Time in Range, below and above range
- Average Sensor Glucose (SG)
- It is also worth checking the glucose Standard Deviation (SD)
- Always address hypoglycaemia first

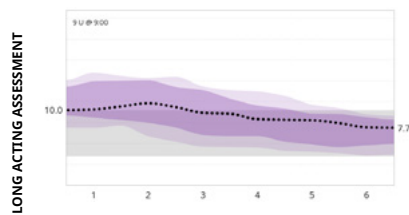
2. Check Missed Doses -

Clarify if meals skipped or bolus forgotten? Identify and address barriers to taking insulin. Adjust mealtimes in InPen™ app and set-up dose reminders if needed.

3. Evaluate TDD, basal/bolus split, average number of boluses per day.

Step 2 - Evaluate & fine-tune

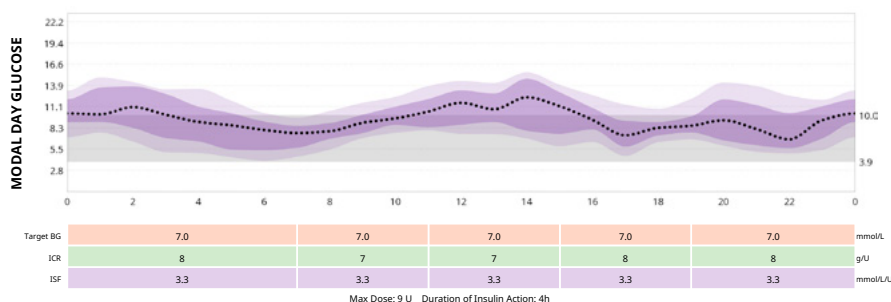
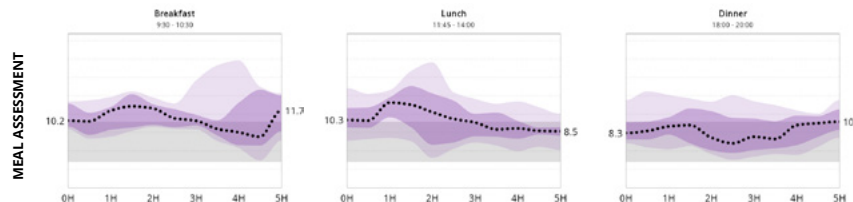
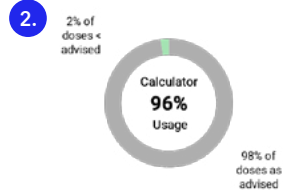
Overview & daily chart report



Days Included in Assessment	13 of last 14 days
Average Daily Dose Taken	12 U
# Days with Glucose < 3.9 mmol/L	1 ▼
Median Bedtime to Fasting (Change)	10.0 to 7.7 (-2.3 mmol/L) ▼

Note: Days with overnight boluses are excluded

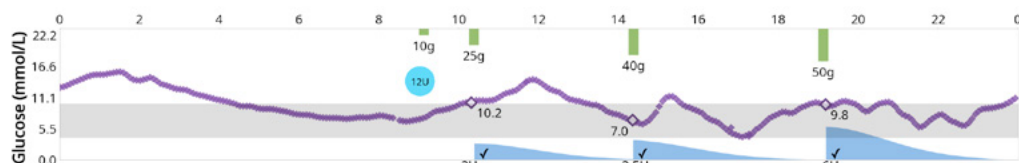
▲ Rising fasting glucose of 1.7 mmol/L or more may indicate long-acting dose should be increased.
▼ Falling fasting glucose of 1.7 mmol/L or more or days with glucose < 3.9 mmol/L may indicate long-acting dose should be decreased.



1. Titrate long-acting (basal) insulin first
The goal is to maintain glycaemic stability in the fasting state with no more than 1.7 mmol/L change
(Long-Acting Assessment)
2. Dosing Behaviour - Evaluate calculator usage & following dosing recommendations **(Calculator Usage)**
3. Based on glycaemic response to meal doses, assess adequacy of meal doses Insulin to Carbohydrate Ratio and fine-tune if needed **(Meal Assessment)**
4. For more insights, review specific day (i.e., bolus timing, glucose response, bolus overrides). If needed, fine-tune Insulin Sensitivity Factor & Duration of Insulin Action
(Modal Day & Daily Chart Report)

4. Tuesday
Dec 31, 2019

Notes:



Step 3 - Check behaviour

Don't forget the basics
and discuss if needed

- Carb counting skills
- Injection technique
- Guardian™ 4 sensor insertion technique and change frequency
- Site rotation
- Insulin expiration and storage

Check if patient knows

- ...how/when to check BG (adequate monitoring supplies)
- ...how to detect, prevent, treat hypoglycaemia
- ...how to adjust doses based on SG trend arrows

References

1. Battelino T et al. Clinical Targets for Continuous Glucose Monitoring Data Interpretation: Recommendations from the International Consensus on Time in Range. Diabetes Care 2019; 42: 1593-1603
 2. American Diabetes Association. Glycemic Targets: Standards of Medical Care in Diabetes-2019. Diabetes Care 2019; 42(1): S61-S70.
 3. <https://www.diabetes.org/a1c> Last accessed June 2021
- * Smart Insulin pen connects to a mobile app to provide dosing calculations, reminders and CGM system integration. Please refer to IFU.
† Smart CGM predicts future high and low sensor glucose events up to 1 hour in advance and provides access to additional algorithms and insights that can inform users of clinically relevant glucose patterns. Please refer to IFU.
See the device manual for detailed information regarding the instructions for use, indications, contraindications, warnings, precautions, and potential adverse events. Indications for GS4 The Guardian sensor 4 is intended for insertion into persons ages 7 years and older Indications for InPen It is intended for single-patient use by people with diabetes for the self-injection of a desired dose of insulin. For further information, contact your local Medtronic representative

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