Insulet Corporation
9 Oak Park Drive, Bedford, MA 01730
Tel: 1-800-591-3455 Fax: 1-877-467-8538
MyOmniPod.com

OmniPod®
Insulin Management System

OmniPod Training Follow-up Checklist

Confidential Protected Health Information

Training Date: / /

Preliminary Information

◯ Appt.
◯ Phone

/ / Last HCP Visit

/ / Next HCP Visit

L Lot number of Pods currently in use

Checklist

Check if proficient:

◯ Review process for changing PDM batteries (2 AAA Alkaline only)

◯ Review OmniPod change process / frequency
◯ 24 hrs ◯ 48 hrs ◯ 72 hrs
Other:

◯ Review site selection / rotation

Trainer:
Explain techniques and BG monitoring for the following evaluations, **to be completed by the patient and healthcare provider**; discuss and chart what has been completed

◯ Basal Rate Evaluations

◯ Insulin to Carbohydrate Ratio Evaluations

◯ Correction Factor Evaluation

◯ BG Tagging / Review

Presets ◯ yes ◯ no

Using temporary rates? ◯ yes ◯ no

Using extended boluses? ◯ yes ◯ no

◯ Troubleshooting hyperglycemia & hypoglycemia

◯ Review Sick Day Rules

◯ Discuss use of "My Records".
Look up and discuss last event in alarm history

◯ Download program

◯ Travel Tips (letter from physician)

◯ Hospitalization / ER (medical tests / procedures)

◯ Auto re-ordering Pods:
Call Customer Service 1-800-591-3455

Comments / Assessments:

Patient Name (Print) | Telephone | Email

Street | City | State | ZIP

I certify training was provided as per prescribing healthcare provider's instructions and the OmniPod User Guide

Date | Trainer Name (Print) | Trainer Signature