

Outcome Measure: Insulin Pen Storage and Labeling Audit

Insulin Pen Storage and Labeling Audit

Ward/Unit: _____ Auditor: _____ Date of Audit: _____

Instructions: Use this form to audit the storage and labeling of ALL insulin pens on a single ward or unit. Before conducting the audit, obtain a report with the names of ALL patients who are admitted to the ward/unit and who have an active insulin pen order. The goal is to find ALL insulin pen devices that have an active order **AND** to find any pens on the ward/unit that do not have an active order. If a patient has an active order and the insulin pen device cannot be located, mark “not found” in the storage per hospital policy column and leave the remaining labeling fields blank. Use additional forms if needed.

Audit #	Patient's Initials	Insulin Product*	Active Order	Storage per Hospital Policy#	Labeling ^{&}	Notes / Observations
1	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
2	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
3	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
4	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
5	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
6	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
7	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
8	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	

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9	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
10	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
11	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
12	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
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14	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
15	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
16	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
17	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
18	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	
19	<input type="checkbox"/> Unknown	<input type="checkbox"/> AP <input type="checkbox"/> HL <input type="checkbox"/> NV <input type="checkbox"/> LN <input type="checkbox"/> LV <input type="checkbox"/> MX <input type="checkbox"/> R <input type="checkbox"/> NPH	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not found	Pen is labeled <input type="checkbox"/> Yes <input type="checkbox"/> No Attached to barrel <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration date stated <input type="checkbox"/> Yes <input type="checkbox"/> No	

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*Insulin Products

AP = Apidra (insulin glulisine)

HL = Humalog (insulin lispro)

NV = Novolog (insulin aspart)

LN = Lantus (insulin glargine)

LV = Levemir (insulin detemir)

MX = Pre-mixed insulin product

N = NPH (neutralized protamine Hagedorn) R = Regular (human insulin)

#Storage

The proper storage of insulin products is determined by hospital policy. It should be in a patient-specific location and not comingled with other patient's medications.

&Labeling

A patient-specific label should be attached DIRECTLY to the pen barrel – not the pen cap or a plastic bag or box that may be used to transport and store the device when not in use. A label may also be attached to an outer container (per hospital policy) but the device must be labeled such that it identifies the patient for whom it is intended and clearly states the expiration date.