Injection Technique Questionnaire and User Guide

Having a good injection technique means that the correct dose of medication is delivered to the correct injection site to achieve the best possible health outcomes.

We'd like you to think about your own injection technique. Please answer all of the questions with the response that best fits what you do most of the time.

When testing your pen / syringe (sometimes called priming or airshot), do you try a second time and then replace the needle before injecting if you still do not see a drop of liquid appear? Yes No Not applicable / do not prime Do you check your injection site for bumps or lumps before injecting? Yes No What injection sites do you use? Tummy / lower abdomen Upper buttocks Back of arm **Thighs** Other Do you rotate your injections around different sites with each injection? No What is the length of your needles? 4mm or 5mm 6mm or 8mm 12mm or more Thinking about how you put the needle into your skin, do you: Inject straight in (90° angle) Inject at a different angle Use the skin lift technique (sometimes called pinch up) Do you hold the needle in your skin for 10 seconds after pressing the button? Yes Thinking back over the past two weeks, how often did you reuse your pen/syringe needle? Never

Thinking back over the past two weeks, how often did you inject into lumps / bumps / red or infected areas / broken skin?

Never

Questions

A few times

A few times Most of the time All of the time

Most of the time

All of the time



What your results mean:

Thinking about your answers, please use the grid below to see how your injection technique measures up! Think about how much you agree with the statements in each box.

Based on where the majority of your answers fall, please refer to the advice provided below. There is no right or wrong answer... just an opportunity to look at what you do and how to improve it if needed.

I never reuse my needles	I reuse my needles a few times	I inject into lumps and bumps	I reuse my needles most of the time or all of the time
I always hold the needle in my skin for 5 or 10 seconds after pressing the button	My needle length is 8mm syringe or 6mm or longer pen needle or longer and I don't use the pinch-up technique	I don't always check for cleanliness / redness / bumps or lumps before injecting	I don't change the needle if there is no drop of liquid when I prime my pen / syringe
I rotate my injection sites with each injection	My needle length is 4mm pen needle or 6mm syringe and I inject straight down	I don't always rotate my injection sites with each injection	I don't always hold the needle in my skin for 5 or 10 seconds
When priming pen, I always change the needle if I don't see a drop of liquid	I inject in: My tummy/lower abdomen Upper buttocks or thighs Back of arms	I always check my skin for cleanliness / redness / bumps or lumps before injecting	I never inject into lumps / bumps / red or infected areas / broken skin

Based on where the majority of your answers fall, please seek further help from your healthcare team as necessary:

Red: There are concerns about your injection technique. It is advisable that you seek help from your healthcare professional as soon as you are able

Amber: Your injection technique needs work. It is advisable to discuss your technique and these results with your healthcare professional

Green: great technique!



The Forum for Injection Technique (FIT) provides evidence-based best practice recommendations for people with diabetes who are using injectable therapies.

FIT report that injection technique could explain unpredictable blood glucose levels, including unexplained hypoglycaemia, glycaemic variation and above target HbA1c.

Common reasons where injection technique could be improved include:

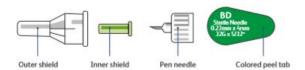
- Injectable agents becoming frozen or too hot >30oC
- Not checking that liquid comes out of the needle before injecting
- Not lifting a skinfold when needed with longer needles
- Not rotating injection sites with every injection
- Taking the needle out before counting to 10 to make sure all the dose goes in
- Reusing needles

Recommended steps for best injection process:



4 mm pen needle

Parts of a pen needle



How to inject



Arrange your supplies. Remove the pen cap and wipe the stopper.



Wash your hands. Remove the seal and push the new needle straight onto the pen. Do not put the needle on at an angle. Screw it on tight.



Remove the outer shield, then remove the inner shield.



Check the flow of medication by dialing 2 units and with the needle facing up, press the thumb button until you see a drop of medication. Repeat if necessary until you see a drop of medication.



Dial your medication dose. Clean a small area of skin. Ensure the skin surface is completely dry before injecting.



Inject straight in at a 90° angle."



Press the thumb button down. Post-injection, count for 10 seconds before removing the needle from your skin to help ensure an accurate dose.¹

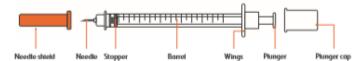


Use the needle once and dispose of it properly.

* Children from 2 to 6 years old or extremely lean adults may need to use a pinch-up technique.

6 mm insulin syringe needle

Parts of an insulin syringe



How to inject



Wipe the top of the insulin bottle. Arrange your supplies. Wash your hands. To expose the plunger, twist the white plunger cap then pull it off.



If you are taking cloudy insulin, roll the bottle between your hands until it is uniformly cloudy. To avoid the formation of air bubbles, do not shake the bottle of leastle.



To expose the needle, twist the orange needle shield then pull it straight off, being careful not to bend the needle or let the needle touch anything.



Pull the insulin syringe plunger down; align the thin black line of the plunger (closest to the needle) with the desired number of units on the insulin syringe. You need air in the insulin syringe equal to the amount of insulin you will take.



Hold the insulin syringe like a pencil. Push the needle straight through the center of the rubber top of the insulin bottle and push the plunger down completely.



Leave the needle in the insulin bottle. Carefully turn the bottle and the insulin syringe upside down so the bottle is on top.



Pull the plunger down slowly. Align the thin block line of the plunger (closest to the needle) with the desired number of units on the insulin syringe.



If air bubbles appear in the insulin syringe, inject the insulin back into the vial. Then redraw the insulin following steps 6 and 7.



Confirm the dose is correct, and then clean a small area of skin. Let it dry completely before injecting.



Hold the insulin syringe like a pencil. Pinch up your skin and push the needle quickly through the skin at 90° estraight in to the skin surface. Push the insulin in with the plunger. Pull the needle out of your skin. Release the skin pinch-up.



Do not recap used needles. Use the needle once and dispose of it properly. Please refer to the Instructions for Use for detailed information on how to use BD Insulin Syringes with BD Ultra-Fine™ 6mm needles.

