

# COMPETENCY ASSESSMENT of PHLEBOTOMIST

New Hire

*Performed By Laboratory Director Designee*

**6-Month Competency  
Annual Competency**

Phlebotomist: \_\_\_\_\_ Date of Employment: \_\_\_\_\_  
Print Name  
Date of Evaluation: \_\_\_\_\_

Evaluate the phlebotomist on performance of venipuncture and other testing-related functions (according to the overall categories listed below) with a grade of "S" (Satisfactory) or "U" (Unsatisfactory). Place a check mark next to the function observed or discussed. If an Unsatisfactory rating is given for any category, please also place a "U" next to the specific function that needs improvement. Phlebotomists who rate an 'Unsatisfactory' rating in any category will be placed on immediate supervisory direct observation/review for a period of time sufficient to retrain them and until such time that the Phlebotomist rates 'Satisfactory' in all categories.

- \_\_\_ a. PERTINENT ANATOMY AND PHYSIOLOGY
  - \_\_\_ Knowledge of selecting the best vein and site
- \_\_\_ b. CHOICE OF EQUIPMENT
  - \_\_\_ Appropriate selection of equipment
  - \_\_\_ Knowledge of appropriate tubes to use
- \_\_\_ c. PROPER TECHNIQUES
  - \_\_\_ Arm band name verification
  - \_\_\_ Tourniquet application
  - \_\_\_ Multiple tube technique (order of draw)
  - \_\_\_ Needle withdrawal
  - \_\_\_ Cleansing site
  - \_\_\_ Retraction of skin
  - \_\_\_ Palpation
  - \_\_\_ Pressure application of the site
  - \_\_\_ Equipment Usage
  - \_\_\_ Bevel Insertion
  - \_\_\_ Tourniquet release
- \_\_\_ d. CARE OF SPECIMENS
  - \_\_\_ Knowledge of rocking tubes after collection to avoid clotting
  - \_\_\_ Appropriate care of specimen if temperature dependent (i.e., specialty tests)
  - \_\_\_ Short draws (effects, which tests, etc..)
  - \_\_\_ Labeling tubes
  - \_\_\_ Proper transport of specimens
  - \_\_\_ Intact vacuum
- \_\_\_ e. HAZARDS / COMPLICATIONS / PROBLEM-SOLVING
  - \_\_\_ Improperly identified patients
  - \_\_\_ Uncooperative/Unresponsive patients
  - \_\_\_ Difficult veins
  - \_\_\_ Appropriate sites to draw (i.e., i.v. placement, shunt, etc..)
  - \_\_\_ Reporting 'signs of abuse'
  - \_\_\_ Failure to get free blood flow
  - \_\_\_ What to do if needle breaks
  - \_\_\_ What to do if hematoma develops
  - \_\_\_ Patient Refusals
- \_\_\_ f. POST VENIPUNCTURE PATIENT CARE
  - \_\_\_ Knowledge and skill of removing tourniquet before removing needle
  - \_\_\_ Careful removal of needle
  - \_\_\_ Holding cotton or gauze on needle puncture site for sufficient time to stop bleeding
  - \_\_\_ Taping site
  - \_\_\_ Removing all supplies from patient area
- \_\_\_ g. DROP-SITE PROCESSES / POLICIES AND PROCEDURES
  - \_\_\_ Centrifuge use
  - \_\_\_ Knowledge of written policies and procedures
  - \_\_\_ Courier Tickets
  - \_\_\_ Log Books

I have reviewed the above items/functions with and have observed the above-named phlebotomist while performing venipuncture.

\_\_\_ Venipuncture performed satisfactory      \_\_\_ Venipuncture performed unsatisfactory; additional observation/training required.

\_\_\_\_\_  
Evaluator's signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Lab Director/Director Designee signature

\_\_\_\_\_  
Title