

Austin Community College

Phlebotomy Technician Program

PLAB 1166/1066 Phlebotomy Clinical Practicum
Course Syllabus
Summer 2005

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Cypress Creek Campus
Due to clinical obligations other days are by appointment.
- Length of Course:** 5.5 Weeks
- Total Number of Hours:** 112 Clinical Hours
- Time:** Clinical Schedules will vary by student
- Location:** Portable building 4000, Cypress Creek Campus

Revised: May 23, 2005

I. Course Description

An intermediate or advanced type of health professions work-based instruction that helps students gain practical experience in the discipline, enhance skills, and integrate knowledge. The emphasis is on practical work experience for which the student has already acquired the necessary theoretical knowledge and basic skills. Direct supervision is provided by the clinical professional, generally a clinical preceptor. A health practicum may be a paid or unpaid learning experience.

The student will demonstrate skill development in the performance of a variety of blood collection methods using proper techniques and standard precautions which includes: vacuum collection devices, syringes, capillary skin puncture, butterfly needles and blood culture, and specimen collection on adults, children and infants. Emphasis on infection control and prevention, proper patient identification, labeling of specimens, quality assurance, specimen handling, processing and accessioning.

The course is designed to allow students to develop the skills, knowledge, and attitude required to function in a professional manner in the health care setting. Laboratory information services, client services and quality assurance may be covered. Students must perform a minimum of 100 successful venipunctures and 10 successful skin punctures. Students will be scheduled for 112 hours of clinical, Monday through Friday during the day shift. Students who successfully complete PLAB 1223/1023 and PLAB 1166/1066 will be awarded a certificate of completion and be eligible to take a national certification exam.

II. Course Goals

- A. Performs phlebotomy procedures and tasks in an accurate, timely and professional manner.
- B. Demonstrates communication skills necessary for working in the health care setting.
- C. Demonstrates safe and skillful use of phlebotomy equipment.
- D. Demonstrates basic understanding of quality assurance.
- E. Demonstrates critical thinking skills and ability to solve problems.
- F. Emphasizes professionalism, including initiative, positive interpersonal skills, teamwork, respect and caring.

III. Course Objectives

- A. Psychomotor and Cognitive Objectives
 - 1. Select the appropriate equipment needed to perform a venipuncture including needle, syringe or vacutainer, blood tubes alcohol wipe, sterile gauze, tourniquet and band aid.
 - 2. Select the appropriate blood collection tubes considering the tests requested, minimum sample requirements and the needs of the patient.
 - 3. Identify and select a suitable venipuncture or capillary site.

4. Properly prepare a venipuncture or capillary site.
5. Apply a tourniquet correctly.
6. Perform a venipuncture correctly using appropriate technique and order of draw, observing the recommended safety precautions.
7. Perform the necessary follow-up care on patients following a venipuncture or capillary procedure.
8. Identify appropriate sites for capillary puncture in children and adults
9. Perform a capillary puncture using acceptable technique and observing appropriate safety precautions.
10. Collect a suitable blood specimen following capillary puncture.
11. With 100% accuracy, properly identify patients prior to performing any procedure.
12. Observe appropriate precautions and procedures when collecting specimens under isolation conditions.
13. When appropriate, notify nursing personnel of specimen collection irregularities or potential problems.
14. Observe appropriate specimen preservation and handling procedures.
15. Identify situations where special precautions may be necessary including Nursery, Pediatrics, ICU/CCU, Emergency Room, Surgery and other special areas of the hospital and take action as necessary.
16. Properly inform the patient of any procedures.
17. Properly identify him/herself to the patient.
18. Label all specimens correctly with the necessary information.
19. Properly dispose of all used equipment.
20. Collects 80% of assigned patients using acceptable technique and following appropriate safety procedures.

B. Affective Objectives

1. The student demonstrates dependability by notifying instructor and clinical supervisor of tardiness and/or absences.
2. The student maintains a rigid attendance policy in which there is only excused absences or tardiness.
3. The student maintains a clean and orderly work area.
4. The student accepts constructive criticism as a learning process.
5. The student demonstrates inquisitiveness by asking necessary questions concerning practical performance or theoretical application of laboratory procedures.
6. The student acquires competence and independence in the correct performance of laboratory procedures.
7. The student concentrates on what s/he is performing, answers questions when necessary and minimally interrupts others during the performance of a laboratory procedure.
8. The student performs assigned tasks with interest and enthusiasm.

9. The student understands what s/he is to do when given oral or written directions.
10. The student demonstrates excellent interpersonal skills by interacting with patients, peers, and other healthcare workers in a highly ethical and professional manner as to not offend or cause problems by inappropriate comments.
11. The student will maintain confidentiality of patient information by not sharing patient names or results of procedures with any individual who does not have an absolute need to know.
12. The student performs work at pace of peer groups with minimum procedural errors.
13. Students follow all safety policies and adheres to the department's Exposure Control Plan (EPC) and Chemical Hygiene Plan (CHP).

IV. SCANS Competencies

Recently the U.S. Department of Labor established the Secretary’s Commission on Achieving Necessary Skills (SCANS) to examine the demands of the workplace and whether the nations students are capable of meeting those demands. The Commission determined that todays jobs generally require competencies in the following areas.

1. Resources: Identifies, organizes, plans, and allocates resources
2. Interpersonal: Works with others
3. Information: Acquires and uses information
4. Systems: Understands complex interrelationships
5. Technology: Works with a variety of technologies

The Texas Higher Education Coordinating Board is now requiring all degree plans in institutions of higher education incorporate these competencies and identify to the student how theses competencies are achieved in course objectives. In PLAB 1223/1023, Phlebotomy, examples of SCANS competencies being incorporated are as follows:

COMPETENCY	EXAMPLE
Resources	Following Standard Precautions, performs vein and capillary puncture procedures using only necessary supplies and within a predetermined reasonable amount of time.
Interpersonal	Demonstrates an understanding of the profession of Phlebotomy thorough ethical behavior when dealing with patients and other members of the health care team, including maintaining a professional appearance to relieve patient anxiety and maintaining patient confidentiality.

Information	Record quality control results for basic CLIA waived laboratory tests performed and point out unexpected results to a supervisor.
Systems	Use problem-solving skills to troubleshoot basic equipment or procedures that do not fall within standards, take corrective actions or inform an appropriate supervisor.
Technology	Perform vein and capillary puncture procedures using a variety of methods and equipment including Vacutainer system, microcollection devices, Winged Infusion Set, and Syringe and needle.

V. Methods Of Presentation

- A. Discussion of policies and procedures.
- B. Observation of clinical staff
- C. Performance of procedures under supervision of clinical staff
- D. Completion of BlackBoard postings

VI. Materials Required

- A. White lab coat
- B. Pen and/or sharpie
- C. Clinical paperwork: weekly evaluation, log sheet, check off sheets, final evaluation and site evaluation
- D. Exposure procedure
- E. Textbook, lecture guide and laboratory notebooks from class.

VII. Course Requirements and Regulations

- A. You must review the Phlebotomy Student Handbook. This may be done online or you may print out the entire document. ***You must sign and turn in all forms found at the end of the document.*** http://www.austincc.edu/kotrla/mlt_phb
- B. Attendance Policy

Regular and punctual attendance on all clinical days is required. Absences or tardies from clinical for reasons other than health or emergencies will not be tolerated, and the student may be subject to withdrawal from the program if more than two absences are recorded. All absences, regardless of excuse, must be made up by the student. The student ***must*** coordinate the make-up day with the instructor ***and*** the clinical site. The student must notify the clinical site and the instructor of all absences or tardies as far in advance as possible or at least within the first hour they are scheduled. A student who is late by 10 minutes or more will be considered officially tardy. Three official tardies will constitute one absence.

1. Arrive at the clinical site a few minutes prior to your scheduled time to give yourself some “breathing space” for getting lost.
2. If you are going to be late **CALL THE SITE**. They will be waiting for you before leaving to go on their rounds or will arrange the work at hand with you in mind. A courtesy call will allow them to get started on time.
3. If you must be absent **CALL THE CLINICAL SITE AND CALL ME**. The clinical instructor will know you are not coming and will redistribute the collections set aside for you. I routinely visit students at the clinical site during the rotation. I will rearrange my site visit schedule when I know you are not there.

C. Dress Code **key word “conservative”**

1. Students will be expected to attend assigned clinical sites clean and neatly dressed to present a professional appearance. Students not conforming to the dress code while at clinical may be sent home at the instructor's discretion, and will be required to make up the time. Repeat violations will result in the student being placed on probation.
2. White lab coat, clean and neatly pressed, student photo ID visible. Lab coats should be laundered frequently, preferably using a **disinfectant**.
3. Appropriate footwear will be required in the campus laboratory and clinical settings. Closed-toe comfortable shoes (**no sandals or canvas shoes**) that are soft-soled. Some sites do allow you to wear leather tennis shoes, but check first.
4. While attending clinical rotations, student’s hair must be clean, neat and of a normal hair color. The hair must be drawn back if longer than shoulder length or hanging in the face. Male students must either shave regularly or if they choose to wear a mustache and/or beard, must keep em clean and well groomed. (No five o'clock shadows.)
5. Before attending clinical rotation, students must bathe regularly to avoid offensive odor, use deodorant and maintain good oral hygiene.
6. It is best **not** to use perfume or after shave. When patients are ill fragrances of this nature may make them nauseous.
7. Keep fingernails clean and at a reasonable length. Reasonable length is defined as 1/8" above the fingertips.
8. While in campus lab or at clinical, jewelry should be limited to wedding rings and a wrist watch. A conservative necklace that is kept close to the skin (not dangling) and conservative earlobe earrings (no more than one pair) that do not extend more than ½ inch below the earlobe are acceptable. Wearing of other jewelry must be pre-approved by Program officials. No visible body piercing.

9. Dress tactfully and conservatively. Avoid wearing clothes which are overly revealing, which may represent a safety hazard or which may be offensive to patients or laboratory personnel. Neatly dressed - dresses, skirts/blouses, dress pants. NO DENIM. If you wish to wear scrubs call the clinical site to see if it's OK and if there is a color requirement.
10. Use make up and jewelry conservatively. Use nail polish colors that do not stand out.
11. Close toed, comfortable casual shoes.
12. It may be best to "dress up the first day and ask you clinical instructor about their particular sites' dress code policy.

D. **Manner - key words "professional, pleasant, confident"**

1. On your first day or two you will be required to observe. Make notes of the technician's organization of lab requisitions, how he/she interacts with the patients, the proper way to identify the patient, techniques used which may differ from what you are currently doing.
2. When you are allowed to stick, use all of the skills we practiced in student lab. Greet the patient, explain the procedure, assemble your equipment. Be confident and courteous.
3. **RECOGNIZE YOUR LIMITATIONS.** There may be times when you have a patient who does not have good veins or the veins are not readily apparent. The patient and your clinical instructor will greatly appreciate it if you would ask him/her for guidance. Observe how they palpate the arm and allow them to show you where the vein is located. Then perform the venipuncture yourself if you feel confident. The greatest confidence builder is when you successfully draw blood on a patient whose veins are difficult to locate.
4. Notate on your log sheet each successful and unsuccessful stick and the equipment used.
5. Each one of you will occasionally have a "bad day". You will miss a patient (twice), miss the next patient (twice), and this may continue throughout the day. This is **NORMAL**. When this does occur it may devastate your self confidence for the moment. Take a break, go out and take a walk, do whatever you need to do to help you get over it. It is critically important for you to know that this happens to **EVERYONE** involved in phlebotomy on a routine basis. Do not let it defeat you. This will not have a negative effect on your evaluation. Remember, your evaluation is based on your **overall** performance, not on an isolated incident.
6. On your first day keep your objectives sheet handy for your clinical instructor to check you off on. The first 5 blood collection procedures of each type must be performed under direct supervision of the clinical instructor.
7. While you are performing your clinical time you may see clinical personnel who are not following Standard Precautions. No matter what other individuals are doing, **you must always** adhere to Standard Precautions as taught in this course.

- The penalty for noncompliance is immediate dismissal from the Program.
8. Limit personal phone calls to breaks and/or lunch unless it is an emergency. Ask for permission to use the phone.
 9. During the day restock and disinfect your work area as necessary. This must also be done at the end of your shift, prior to leaving. ***This is not optional.*** It is a privilege for you to be at the clinical site. The clinical personnel are taking time out of their busy day to allow you to obtain the skills necessary to be a great phlebotomist. This simple courtesy is a very big way to thank them for their time and effort.

VIII. Student Evaluation

- A. The Clinical Practicum portion of the grade is based on evaluation by the clinical faculty and communication on a weekly basis by posting to BlackBoard. A student failing the Clinical Practicum (grade less than 70%) component of this course, but passing the lecture and laboratory will ***NOT*** receive a certificate of completion and, therefore, will not be eligible to take the national certification examination.
 1. Passing of the clinical component is based on successful completion of clinical objectives, weekly posting to the Discussion Board in BlackBoard during clinical and written evaluations prepared by the clinical instructors.
 2. Students must complete and provide documentation for a **minimum** of 112 clinical hours and must achieve a minimum rating of at least "average" in all areas on the final clinical evaluation.
 3. Students must perform and provide documentation of a **minimum** of
 - a. 100 successful venipunctures
 - b. 10 capillary punctures
- B. **Weekly Evaluations- “criticism is meant to help you do your *best*”**
 1. At the beginning of each week (except the last) you are to give the clinical instructor a copy of the Weekly Progress Report form. They will fill it out and send it to me for my review. This information will be shared with you to allow you to know how you’re progressing and correct any problems which may be occurring.
 2. Any criticisms written on the form needs to be looked at in a positive manner. These types of comments should be used to improve your phlebotomy skills. Do not take it in a personal way. The clinical instructors are encouraged to share with you ways to improve your performance. The whole purpose of having a clinical rotations is to improve and “fine tune” your skills.
 3. Weekly Evaluations are required and viewed as “pass”/ “fail”.

- C. Retaking Major Exams
1. Exams 1-4 will be made available in BlackBoard.
 2. You may take them as many times as you like BUT must achieve a grade of 80% or better on all. The average of the exams will be worth 10% of your grade.
 3. You may use your notes, labs and textbook during the exam.
 4. Re-taking the exams will allow you to intensively review all course materials to do will in your clinical rotation as well as on the certification exam.
- D. Final Evaluation
1. The final evaluation is the graded portion of your performance and is worth 80% of the clinical grade.
 2. Any area in which a grade of less than 70% is given must be remediated.
- E. BlackBoard
1. You must post a summary of your week's clinical experience by Sunday to BlackBoard. This is an online course delivery system which can be accessed from any computer with Internet access.
 2. Additional homework, quizzes, or assignments may be required.
 3. BlackBoard posts and assignments are worth 10% of your grade.
- F. Clinical Paperwork
1. It is YOUR responsibility to submit all required forms to document your clinical experience every week.
 2. Failure to submit paperwork in a timely fashion will result in a decrease in your clinical grade.
 - a. Week One submit Check Off Sheets, Log Sheet and Weekly evaluation Form.
 - b. Week Two submit Weekly Evaluation and Log Sheet.
 - c. Week Three submit Final Evaluation, Objectives, Log Sheet and complete Site Evaluation Form in BlackBoard.
- G. Additional Requirements
1. The "Environment of Care" exam MUST be completed prior to attending the first clinical day. A copy of the test results are sent to the instructor upon completion of the test. Any student not completing the exam cannot attend clinical. This test may be accessed at: <http://www2.austin.cc.tx.us/hltsci/eoc>
 2. Phlebotomy students must carry liability insurance which will be automatically purchased as part of the payment of the registration fees.
 3. ***A completed health form must be submitted by the second week of class.*** No student will be allowed to attend clinical until the completed health form is turned in. Print the Health Sciences Health Data Form. Phlebotomy students ARE NOT required to have a physical. If you have been accepted into another Health Science program you may want to get the physical out of the way. I will submit a copy of your health form to the appropriate health science program upon receiving your written request. The demographic information, emergency

contact, and verification of immunizations needs to be completed to meet the requirements for the Phlebotomy program. You may submit this form with a copy of your shot record, otherwise there must be documentation by a healthcare provider that these immunizations were given. Phlebotomy students *must* show proof of immunization to diphtheria, rubella, and tetanus prior to attending clinical assignments. Proof of immunization or record of physician-diagnosed illness for rubeola (measles) and mumps must be provided, as well as, documentation of a TB test performed *within the last 12 months*.

4. Students are strongly encouraged, but not required, to obtain immunization to the hepatitis B virus. Some clinical sites require students to complete the hepatitis B vaccine immunization series prior to being allowed to perform clinical rotations at their site. Therefore, unimmunized students may encounter limitations in the variety of clinical experiences assigned.
5. Each student must set up an Internet email account. If you do not have Internet access at home a free email account can be obtained through Yahoo. Yahoo accounts can be accessed from any computer connected to the Internet. Computers for student use are located on every ACC campus. I will communicate on a regular basis through email and you will be expected to communicate with me weekly concerning your progress in your clinical assignments.

H. Grading - Grade of 70% or better required for certification eligibility.

A = 90 - 100%

B = 80 - 89%

C = 70 - 79%

D = 60 - 69%

F = 59% or below

IX. Promotion, Failure and/or Dismissal From The Program

- A. A minimum grade of "C" (70%) is required to be eligible to receive their certificate of completion and be eligible to take the national certification examinations.
- B. Students must complete the required number of hours, required number of procedures, and successfully complete all objectives required in the clinical component.
- C. Any student may be withdrawn from the program for excessive absences (see Attendance Policy), and/or consistently failing to meet class assignments, disruptive conduct during lecture or laboratory, or for displaying conduct detrimental to the ethics of phlebotomy, and/or failure to meet minimum competency levels in the clinical component.
- D. Students are required to act in a courteous, professional manner at all times during the clinical rotation. Any display of unprofessional, or unethical conduct by the student may result in immediate dismissal from the Program.
- E. The student may utilize the "Student Grievance Procedure of Austin Community College" in the disposition of a grievance or complaint without fear of recrimination or

retaliation.

X. Standard Precautions

A. The concept of universal precautions was first introduced in 1987 by the Centers for Disease Control (CDC) to decrease the occupational risks of blood-borne diseases such as AIDS and hepatitis B to healthcare workers. Due to the lack of universal application of universal precautions new standards have evolved called Standard Precautions which requires that all body fluids be handled with the same precautions as blood. Blood, urine, and other biological specimens possibly containing pathogenic organisms will be used in this course; therefore, CDC guidelines will be followed as they apply.

Precautions specific for clinical laboratories:

1. Use barrier protection routinely to prevent skin and mucous membrane contamination with blood or other body fluids.
2. Wear gloves:
When cuts, scratches, or other breaks in skin are present.
 - a. When performing any type of blood collection.
 - b. Whenever blood and body fluid specimens are handled.
 - c. Anytime it appears that contamination of the hands may occur.
3. Change gloves after each patient contact or when visibly contaminated with blood.
4. Wear a mask, eye glasses or goggles, or face shield during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of the mucous membranes of the mouth, nose, and eyes.
5. Wear a fluid-resistant gown, apron, or other covering when there is a potential for splashing or spraying of blood or body fluids onto the body.
6. Wash hands or other skin surfaces thoroughly and immediately if contaminated with blood or other body fluids.
7. Wash hands immediately after gloves have been removed even when no external contamination has occurred. Organisms on the hands multiply rapidly in the warm moist environment within the glove.
8. Handle laboratory instruments, especially needles and scalpel blades, with extreme caution.
9. Place used needles, disposable syringes, skin lancets, scalpel blades, and other sharp items into a puncture-resistant biohazard container for disposal. The container should be located as close as possible to the work area. Phlebotomists should carry puncture-resistant containers with them on their phlebotomy tray.
10. Needles must not be recapped, purposely bent, cut, broken, removed from disposable syringes, or otherwise manipulated by hand. If recapping is unavoidable (blood gas syringes, etc.), do it with one hand and use great caution.
11. Place large-bore reusable needles (bone marrow, biopsy needles, etc.) and other reusable sharp objects into a puncture-resistant container for transport to the reprocessing area.

12. Use mouth pieces, resuscitation bags, or other ventilation devices during emergency resuscitation procedures.
13. Exudative lesions or weeping dermatitis should be covered with an occlusive dressing to prevent contamination.
14. All specimens of blood and body fluids should be put in well-constructed containers with secure lids to prevent leaking during transport. Care should be taken when collecting each specimen to avoid contaminating the outside of the container and the laboratory form accompanying the specimen.
15. Use biological safety hoods (Class 1 or 2) for procedures that have a high potential for generating droplets (e.g., blending, sonicating, and vortexing).
16. Fill evacuation tubes, vials, and bottles by using their internal vacuum only. If a syringe is used, the fluid should be transferred to an evacuation tube by attaching the transfer device to the syringe, pushing the tube in until the diaphragm of the rubber stopper is punctured and allowing the correct amount of fluid to flow slowly into the tube along the wall. The tube should not be hand held when puncturing the top. **Never** force fluid into an evacuation tube by exerting pressure on the syringe plunger..
17. Use mechanical pipettes for manipulating *all* liquids (including body fluids, chemicals, or reagents) in the laboratory.
18. Decontaminate all laboratory work areas with an appropriate chemical germicide after a spill of blood or other body fluids and when work activities are completed. Laboratory counter tops should be disinfected at least once per shift.
19. Rinse off all body fluids from reusable contaminated equipment prior to reprocessing according to your institution policies.
20. Clean and decontaminate scientific equipment that has been contaminated with blood or other body fluids before being repaired in the laboratory or transported to the manufacturer. Always follow manufacture's recommendations.
21. Pregnant laboratory workers are not thought to be at greater risk of infection than others in the laboratory. However, if an infection does develop during pregnancy or the mother is a carrier prior to the pregnancy, the infant is at risk of infection by perinatal transmission. Therefore, pregnant laboratory workers should be especially aware of universal precautions.
22. ***All accidents are to be reported immediately to the laboratory supervisor/instructor.***

XI. Physical Risk Statement

- A. Students with a temporary physical problem/limitation (i.e., broken bones, back injuries, recent surgery, etc.) may be admitted to, or choose to continue in the Phlebotomy Program. If a student chooses to stay in the Program, he/she understands and agrees that excessive absenteeism or inability to perform necessary duties related to the learning objectives and health care delivery can result in the necessity to discontinue the Program. It is the student's responsibility to obtain, and provide to the instructor, written permission to take part in all course functions from a physician during the period any physical problem / limitation is present. The College is not responsible for any

exacerbation of this problem which occurs as a result of the student's continued participation in the Program.

- B. Interactions with clients in the health care system carry inherent risks to both the client and care giver, including, but not limited to, communicable diseases. In this document, as well as in the curriculum, students will be given information regarding known risks for various diseases and provided skills to implement precautions appropriate to these risks. All students are expected to provide appropriate care to all clients assigned to them in any health care setting as a learning experience. These assignments may include clients with medical diagnoses of tuberculosis, hepatitis, AIDS, or other infectious diseases.
- C. Further more, the student understands that participation in this Program exposes the student to certain risks of illness, injury or infectious contact. The College will not be held responsible for any illness or injury, or infectious contact which occurs during the participation in the Program. The student's signature on the Statement of Understanding page is an acknowledgment of this policy.

XII. Exposure Policy

- A. Print out the Accident Report Forms from the following site:
http://www.austincc.edu/kotrla/phb_links.htm
- B. The Accident Report Forms must be taken to clinical with you each day.
- C. If an exposure occurs immediately notify your clinical instructor AND Terry Kotrla. This must be done within 1 hour of the exposure. Keep Terry's contact information in your wallet.

I have read the PLAB 1166/1066 Phlebotomy Practicum Course Syllabus and Phlebotomy Student Handbook. I agree to abide by the policies, procedures and requirements within.

Signature

Date

Printed Name