

**GRAYSON COLLEGE**

**PLAB 1160**

**PHLEBOTOMY CLINICAL**

**SPRING 2016**

**GRAYSON COLLEGE  
MEDICAL LABORATORY TECHNOLOGY**

**PLAB 1160 – PHLEBOTOMY CLINICAL**

**TEXTBOOKS:**

Required:

1. Warekois, R. S. & Robinson, R. (2016). Phlebotomy: Worktext and Procedures Manual. (4<sup>th</sup> ed.). St. Louis: Elsevier.

Recommended: Numerous additional texts covering this topic are available in the MLT library on West Campus or from the Instructor.

**COURSE DESCRIPTION:**

**PLAB 1160. Clinical I.** (0-4-1). No hours lecture. Four hours lab. One hour credit. Skill development in the performance of a variety of blood collection methods using proper techniques and universal precautions. Theoretical and practical aspects of specimen collections for clinical laboratories. Professionalism, ethics, medical terminology, related anatomy, physiology, and utilization of laboratory equipment. Practicum assignments are made on an individual basis.

**LEARNING OUTCOMES:**

As outlined in the learning plan, Apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

**\* GOALS:**

Upon completion of this course the graduate should be prepared to function as a member of the health care team with the following duties and/or responsibilities.

1. Obtain adequate and correct blood specimens by capillary puncture or venipuncture on adults and by capillary puncture on children
2. Label specimens accurately and completely
3. Distribute specimens to the appropriate area of the laboratory
4. Prepare specimens and perform special procedures (e.g. blood smears, glucose tolerance test, bleeding time, etc.)

5. Promote the comfort and well-being of the patient
6. Observe safety policies and procedures
7. Prepare collection trays for specimen collection
8. To apply the problem solving approach to distinguish situations that necessitate independent action from those that require referral to a supervisor.
9. To display a professional attitude toward colleagues.
10. To prepare records and transmit results accurately.
11. Project an image of professionalism in appearance and conduct at all times.

### **COURSE REQUIREMENTS:**

In order to achieve a passing grade, the following requirements must be met:

1. Satisfactory clinical performance, with minimally **50 hours participation** and at least **50 successful venipunctures**, and **5 successful capillary punctures**.
2. Regular attendance for clinical is required. See attendance policy below.

### **PROGRAM COMPLETION AWARDS:**

Upon satisfactory completion of the Phlebotomy courses (PLAB 1223 and PLAB 1160) the student is not eligible to take a national certification examination. However, if the student wishes to take PLAB 1160 a second time he/she is then eligible to take a national certification examination offered by the American Society for Clinical Pathology and other national organizations.

### **METHODS AND PROCEDURES OF INSTRUCTION:**

The course consists of a total of 50 clinical hours at one of several hospitals in the Northern Texas/Southern Oklahoma area. Current clinical sites may be up to 110 miles from the South Campus location. Prior to beginning clinical rotation, the student will attend lecture/practicum in the campus laboratory to learn basic phlebotomy skills. When these basic skills have been adequately mastered, the student will begin clinical rotation. Dates and times of clinical rotations will be arranged for each student.

### **EVALUATION OF STUDENT ACHIEVEMENT OF OBJECTIVES:**

Achievement of objectives will be determined using the Student Progress Reports, Campus Lab Check-off Lists, and the Student Clinical Evaluation Form. To pass the course, the Student Progress Report and Student Clinical Evaluation Form must be completed correctly, and turned in on time.

**COURSE GRADE WILL BE DETERMINED BY THE FOLLOWING PROCESS:**

<i>Category</i>	<i>r</i>	<i>Total</i>
Clinical Evaluation		70%
Attendance		10%
Student Evaluation of Clinical		5%
Progress Report		10%
Record for Campus Lab Hours		5%
		<b>Total = 100%</b>

**NUMERICAL VALUE OF GRADES:**

A	=	100% – 89.5%
B	=	< 89.5% – 79.5%
C	=	< 79.5% – 69.5%
D	=	< 69.5% – 59.5%
F	=	< 59.5% – 0.00%

**GENERAL POLICIES FOR COURSE:**

**DRESS CODE:**

Policy: The Medical Laboratory Technology (MLT) Faculty at Grayson College expects all MLT/Phlebotomy students to reflect professionalism and maintain high standards of appearance and grooming whether in class, campus lab, or a clinical setting. The faculty has final judgment on compliance of this policy and the appropriate corrective action for dress code infractions. Students not complying with this policy may not be allowed to remain in the classroom, laboratory or clinical setting.

**General Guidelines**

- ◆ Clothing
  - Students are to purchase one or more sets of scrubs to wear during attendance in classroom, laboratory and clinical activities.
  - Scrubs must be of the color, style and make approved at the beginning of the semester. For exceptions, see the Program Director. Scrub discounts are available at some area businesses.
  - The approved MLT patch must be sewed on the left side of each scrub top and jacket (if worn).
  - White long or short sleeved turtleneck or crew neck T-shirts without writing, images, logos or advertisements may be worn under scrub shirts.
  - Uniforms are to be clean and not unduly wrinkled.
  - Students may purchase, for warmth, a scrub jacket of the same approved color and make as the scrubs. No jackets or sweaters with hoods may be worn with the uniform.

- A laboratory coat will be worn over clean scrubs. Scrubs must be the approved color and style. Some clinical sites have specific colors for laboratory students; students must wear that color if attending one of those sites. Most laboratories furnish protective clothing to be worn while performing tests. The student must purchase a white laboratory coat to wear at sites which do not furnish protective clothing. See the Instructor prior to purchasing the lab coat.
- Head coverings: Nothing shall be worn on the head (baseball caps, scarves, hats, etc.) unless it is of a required religious nature. If the head covering falls below the shoulders it must be tucked securely inside the lab coat to prevent contamination by blood and/or body fluids.
- ◆ Shoes
  - Shoes are to be close-toed, low, closed-heeled, and soft-soled, clean and in good repair.
  - Shoes must be made of a material that will not absorb bio-hazardous materials and that can be cleaned. Therefore, they must be white leather or synthetic rubber-like material. They cannot be canvas or cloth.
  - Clog type shoes are prohibited for safety concerns.
  - White hose/socks (that come above the ankle) are required.
- ◆ Hair
  - Hair must be clean and neatly groomed. Hair longer than shoulder length must be worn up or secured so as not to fall forward.
  - Men may wear a neatly trimmed beard and/or mustache. The rest of the face must be clean shaven.
  - Hair must be of a color found in nature (no pink, blue, etc.).
- ◆ Nails
  - Nails are to be clean, groomed, and manicured.
  - Artificial nails are prohibited in the clinical setting.
  - Nails are to be cut to the tip of the finger and groomed. Reasonable length is defined as 1/8" above the fingertips.
  - Only clear nail polish may be worn. No fingernail jewelry.
- ◆ Jewelry
  - Watches, wedding rings only, earrings (one small stud per earlobe) may be worn.
  - Necklaces are not permitted unless maintained under clothing and not visible.
  - Except for one stud earring per earlobe, no other visible body piercing jewelry is permitted. Nose piercing jewelry must be removed or covered. No exceptions.
  - For safety purposes, it is preferable that no jewelry be worn.
- ◆ Other
  - Conservatively applied makeup is permitted.
  - Gum chewing is not permitted.
  - Personal beepers, cell phones, and other such technology shall be utilized only during breaks from patient care. Cell phones must be turned off during clinical and left in the student's purse or backpack.

- Tattoos must be covered (e.g., with clothing or Band-Aids) and not visible.
- Refrain from smoking in uniform as the smoke can cling to clothes and be an irritant to patients.
- The following suggestions are made in order to maintain appropriate body hygiene:
  - Take daily showers.
  - Wash hair daily.
  - Brush teeth.
  - Use unscented deodorant (no colognes, perfumes, scented lotions or aftershave) -- Scents sometimes make patients ill.

Additions to Dress Code for the Campus Lab Setting:

- ◆ Students entering the Campus Lab must be in uniform.
- ◆ Lab Coat: At the beginning of the semester, students will be provided one disposable lab coat. The lab coat must be worn, buttoned from top to bottom, at all times when working with biological samples. When not in use, the lab coat is to be stored in the student mail box. With normal wear, the lab coat should last throughout one semester. If a spill occurs or there is other major damage to the coat, another coat will be provided.
- ◆ Gloves: Gloves will be provided to the students in Campus lab
- ◆ Compliance: Students not conforming to the dress code may be sent home from class or clinical at the instructor's discretion. Any and all class or clinical time missed will need to be made-up, regardless of reason.

Additions to Dress Code for the Clinical Setting:

- ◆ The Grayson College Student Picture ID is to be worn above the waist and in clear view when in uniform.

**ATTENDANCE:**

Regular attendance for lecture, campus lab and clinical is required. Responsibility for work missed in lecture or campus lab is placed upon the student. Guidelines related to clinical absences are listed below.

1. Excessive absences at clinical will likely result in refusal by the site for continued attendance (see "h" below). If you are removed from the site for excessive absences and if an alternative site is not available, or if there are time constraints, you may not be able to complete the course. It is advisable that you either withdraw or seek an incomplete (if GC policy allows) for the course; otherwise an "F" may be given.
2. Regular attendance and being on time for clinical is an important part of your preparation for being a dependable employee. Each work place has attendance and tardy guidelines which employees must follow. Students enrolled in this

course will follow the guidelines below in order to emphasize the importance of this aspect of employment. The guidelines will also assure continuity of instruction since both the GC faculty and clinical instructors believe that sporadic attendance interferes with the learning process.

3. Students should report to their assigned clinical sites no more than fifteen (15) minutes early and are expected to stay the entire length of the assigned session. Unless arranged in advance with the clinical site and the GC faculty, students may not receive recognition nor credit for attendance at clinical outside the assigned hours.
4. A lunch break should be assigned if the clinical session lasts for more than six hours, in which case, students must take the assigned break. Students are expected to take a fifteen-minute break sometime in the middle of each four hours of an assigned clinical session. Smoking, eating and drinking are allowed only in designated areas.

**THE FOLLOWING GUIDELINES APPLY TO CLINICAL ABSENCES:**

- a. The clinical site must be notified of each late arrival (when possible) or each absence at least 15 minutes prior to the expected time of arrival.
- b. The GC faculty must be notified by the student to report each absence on each day missed.
- c. A signed physician's statement or some other documentation (e.g. prescription receipt, etc.) may be required for an illness requiring more than one day of absence. The documentation must be turned in at the first class meeting following the absences.
- d. Any circumstance requiring several days absence may result in a withdrawal, incomplete or failing grade for the semester.
- e. Time missed will be rescheduled if rescheduling does not conflict with another student's scheduled time. Rescheduling will not be done without approval from the clinical instructor at the clinical site.
- f. Make up days must be approved by both the clinical instructor and GC faculty. Make up days will not be scheduled on holidays. In cases of a planned absence which is necessary (e.g. elective surgery, court appearance, school related activities, etc.), days may be made up in advance on a day for day basis.
- g. Two tardies during one rotation will equal one absence.

- h. Make up time will be as follows (day = the number of hours you are scheduled for that day):

Days Absent During Semester

Number of Days to Make Up

First	One day
Second	Two days
Third	Three days
Fourth	Likely removal from clinical site

- i. The clinical site reserves the right to refuse the continuance of any student who, for any reason, has excessive absences and/or tardies.



## **PHLEBOTOMY POLICIES FOR CHILDREN:**

As a student, you will not perform venipunctures on children under the age of 7 years. Capillary punctures on children ages 2-6 years, may be performed by a student, without supervision, only after being approved to do so by appropriate laboratory staff. **No** procedures will be performed on children under the age of two years, by a student, without supervision.

## **ARTERIAL PUNCTURES:**

The student will only observe arterial punctures and **will not** perform this procedure at any time.

## **COLLECTING BLOOD FROM AN ARM WITH AN I.V.:**

If a patient has one IV running, the student will draw the sample from the other arm. If an IV is running in both arms, the student will not attempt a venipuncture. The student will return the request slips to the laboratory and inform his or her supervisor.

## **MISSING A VEIN:**

If the student is unsuccessful in obtaining a blood sample during a venipuncture, a second attempt may be made, providing the opposite arm is accessible and adequate, the patient is willing and written hospital policy allows it. The student **must** be confident that they will be successful on a second attempt. If, at any time, the student is unable to obtain an adequate sample, he/she must:

1. immediately inform nurse of the situation and tell him/her that another phlebotomist will attempt it promptly, and
2. immediately inform the laboratory supervisor.

## **PHONES:**

Personal cell phones are not allowed in the clinical setting.

## **ADDITIONAL POLICIES:**

1. Liability insurance is required before attending clinical. Liability release forms will be required for participation in campus laboratory. All health care workers are at risk of acquiring Hepatitis B from the exposure of blood and body fluids. It is required that all health science students participating in patient contact/care receive the Hepatitis B vaccine.
2. CPR certification is required before attending clinical. The certification must be in effect for the entire time the student is in clinical.

3. Complete and proper immunizations are required for all Health Science students before attending clinical. Proper documentation is necessary.

**COURSE OBJECTIVES:**

**TERMINAL PERFORMANCE OBJECTIVES:**

Upon completion of the course the student should be a well-trained, knowledgeable, employable individual, capable of proficiently performing venipunctures and capillary punctures.

**INTEGRATION OF SCANS COMPETENCIES:**

- \* Indicates Course Goals, Objectives, and/or Activities designed to achieve SCANS Competencies.

**INTEGRATION OF SCANS COMPETENCIES  
WITH COURSE GOALS, OBJECTIVES, AND ACTIVITIES**

**COURSE NUMBER** PLAB 1160

**COURSE NAME** Phlebotomy

<b>SCANS COMPETENCIES AND FOUNDATION SKILLS</b>	<b>COURSE GOALS, OBJECTIVES, AND ACTIVITIES</b>
<b>RESOURCES</b>	
ALLOCATES TIME	Arrives for clinicals at the assigned time Obtains adequate and correct blood specimens Prepares specimens and performs special procedures Displays increasing competency
ALLOCATES MONEY	
ALLOCATES MATERIAL AND FACILITY RESOURCES	Distributes specimens to appropriate area of laboratory Prepares specimens and perform special procedures Prepares collection trays
ALLOCATES HUMAN RESOURCES	
<b>INFORMATION</b>	
ACQUIRES & EVALUATES INFORMATION	Records results Demonstrates progressive accuracy, precision, and speed Recognizes situations which should be reported Associates unusual test results with indicated conditions or diseases
ORGANIZES & MAINTAINS INFORMATION	Follows written and verbal instructions Labels specimens Keeps records
INTERPRETS & COMMUNICATES INFORMATION	Labels specimens immediately upon collection Distributes specimens Reports results according to standard operating procedure
USES COMPUTERS TO PROCESS INFORMATION	Distributes samples to appropriate department

	Reports results according to standard operating procedure
<b>INTERPERSONAL</b>	
PARTICIPATES AS A MEMBER OF A TEAM	Observes laboratory personnel functioning as members of the general phlebotomy team Functions independently as a member of the phlebotomy team
TEACHES OTHERS	Promotes comfort and well-being of patient Prepares patient for testing
SERVES CLIENTS/CUSTOMERS	Obtains adequate specimens Promotes comfort and well-being of patient Projects an image of professionalism in appearance and conduct Keeps patient information confidential
EXERCISES LEADERSHIP	Seeks assistance when necessary
NEGOTIATES TO ARRIVE AT DECISION	
WORKS WITH CULTURAL DIVERSITY	Promotes comfort and well-being of patient Functions as a member of the phlebotomy team
<b>SYSTEMS</b>	
UNDERSTANDS SYSTEMS	Prepares specimens and performs special procedures Observes safety policies and procedures Selects specimen types and determines suitability
MONITORS & CORRECTS PERFORMANCE	Observes safety policies and procedures Performs procedures under supervision of laboratory staff Displays progressively increasing ability Functions independently as a member of the phlebotomy team Keeps class records current
IMPROVES & DESIGNS SYSTEMS	Keeps class records current Participates in continuing education

<b>TECHNOLOGY</b>	
SELECTS TECHNOLOGY	Collects samples using proper equipment Prepares patient and equipment Selects appropriate puncture site Determines type of specimen needed for test ordered
APPLIES TECHNOLOGY TO TASK	Prepares specimens Performs special procedures
MAINTAINS & TROUBLESHOOTS TECHNOLOGY	Assesses the patient's physical condition Recognizes complications associated with phlebotomy Assesses criteria for sample recollection or rejection Solves common problems
<b>BASIC SKILLS</b>	
READING	Identifies the patient Labels specimens accurately and completely Distributes specimens to appropriate departments Follows written instructions Transcribes information
WRITING	Labels specimens accurately and completely Transcribes information Keeps records Records results
ARITHMETIC	Keeps class records current
MATHEMATICS	
LISTENING	Promotes comfort and well-being of patient Following verbal instructions Participates in continuing education
SPEAKING	Promotes comfort and well-being of patient Assesses the patient's physical disposition Projects an image of professionalism in conduct Seeks clarification when needed

<b>THINKING SKILLS</b>	
CREATIVE THINKING	Promotes comfort and well-being of patient Associates unusual test results with indicated conditions or diseases
DECISION MAKING	Recognizes situations which should be reported Associates unusual test results with indicated conditions or diseases Selects appropriate puncture site Assesses criteria for specimen recollection or rejection Determines type of specimen needed
PROBLEM SOLVING	Solves common problems Recognizes situations which should be reported Obtains results within limits set for each test Selects specimen types and determines suitability
SEEING THINGS IN THE MIND'S EYE	Follows written and verbal instructions Acts in a professional manner Cooperates to maintain lab and equipment in good condition
KNOWING HOW TO LEARN	Follows written and verbal instructions Demonstrates increasing dexterity Demonstrates progressive accuracy, precision, and speed Demonstrates knowledge of theoretical concepts
REASONING	Prepares specimens and performs special procedures Assesses patient's physical disposition Solves common problems and complications of the procedure Selects specimen types and determines suitability Assesses criteria for sample recollection or rejection
<b>PERSONAL QUALITIES</b>	
RESPONSIBILITY	Projects an image of professionalism in

	<p>appearance and conduct</p> <p>Arrives for lab sessions at assigned time</p> <p>Adheres to GC dress code</p> <p>Observes safety rules and regulations</p> <p>Observes affiliate rules and regulations</p> <p>Protects patient confidentiality</p>
SELF-ESTEEM	<p>Projects an image of professionalism in appearance and conduct</p> <p>Adheres to GC dress code</p> <p>Demonstrates progressive accuracy, precision, and speed</p>
SOCIABILITY	<p>Promotes comfort and well-being of patient</p> <p>Projects an image of professionalism in appearance and conduct</p> <p>Displays progressively increasing ability to function as a member of a phlebotomy team</p>
SELF-MANAGEMENT	<p>Acts in a professional manner</p> <p>Keeps patient information confidential</p> <p>Arrives for lab sessions at the assigned time</p> <p>Observes safety rules and regulations</p> <p>Performs procedures with minimal supervision</p> <p>Functions independently as a member of a phlebotomy team</p> <p>Keeps class records current</p>
INTEGRITY/HONESTY	<p>Acts in a professional manner</p> <p>Keeps patient information confidential</p> <p>Records results exactly as determined</p> <p>Recognizes situations which should be reported</p>

**DISABILITY STATEMENT:**

Students with special needs should contact the Disability Services Coordinator in the Learning Assistance Center no later than the first week of classes. Once appropriate documentation for the disability is received, the Disability Services Coordinator will coordinate delivery of approved accommodations with students and their instructors.

**STATEMENTS REQUIRED BY THE COLLEGE:**

**Students are expected to maintain classroom decorum that includes respect for other students and the instructor, prompt and regular attendance and an attitude that seeks to take full advantage of the educational opportunity.**

**INSTRUCTOR INFORMATION:**

Instructor Name: Alan Jackson

Office Phone: 903-463-8779 Email: jacksona@grayson.edu

Office Location: STC 202 Office Hours: See Canvas or Outside Office

*Written By:* Alan Jackson  
*Last Revision:* January 2017



**GRAYSON COLLEGE**

Phlebotomy Clinical

PLAB 1160

**POLICY ACKNOWLEDGEMENT FORM**

**DIRECTIONS:**

1. Read/review the Phlebotomy Class Policies in the course syllabus.
2. Sign this form indicating your understanding of and your willingness to comply with these policies.

My signature below indicates that I have read the Phlebotomy Class Policies for the course, in full, and indicates that I understand these regulations and am willing to comply with them.

My signature below indicates that I understand that I am financially responsible for any emergency care which I might receive as a result of illness or injury while assigned to a clinical affiliate of the Grayson College Phlebotomy program.

**Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CLINICAL**  
**Venipuncture**  
**Check-Off List**

**INSTRUCTIONS:** Listed below is a step-by-step procedure for a routine, uncomplicated venipuncture. The clinical facility **MAY** use this check-off list to insure your proficiency for this procedure before you are allowed to perform it at their site. The clinical instructor will observe you and use the key to indicate your performance of this skill.

<b>KEY:</b>	<b>P = Performed</b>	<b>NI = Needs Improvement</b>	<b>NP = Not Performed</b>		
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>	
1. Have patient state name.					
2. Wash hands with disinfectant.					
3. Put on gloves.					
4. Identify patient by matching armband with requisition.					
5. Prepare equipment and materials.					
a. Obtain gauze, alcohol pad, needle, holder, tourniquet and necessary tube(s).					
b. Assemble needle onto holder.					
c. Place tube in holder.					
d. Place equipment within easy reach.					
6. Explain venipuncture procedure to patient.					
7. Position patient.					
8. Place the tourniquet around the patient's arm above the elbow. <b>CAUTION:</b> Do not allow the tourniquet to remain on the arm for more than 1 - 2 minutes.					
9. Instruct the patient to close the fist to help anchor the veins and make them more noticeable.					
10. Locate a suitable vein at the bend of the elbow.					
11. Palpate the vein with the fingertip to determine the direction of the vein, and to estimate its size and depth. Make a mental picture of its location, if visually unapparent.					
12. Release the tourniquet if venipuncture is not performed within 1 - 2 minutes.					
13. Cleanse the skin of the puncture site using alcohol soaked gauze.					
14. Allow alcohol to air dry. Avoid contaminating the site.					
15. Retie tourniquet, if previously released					

<b>KEY: P = Performed NI = Needs Improvement NP = Not Performed</b>				
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
16. Uncap needle and with holder in one hand, use the thumb or fingers of other hand to pull the skin below site taut.				
17. Hold the holder/needle assemble at a 15 - 30 degree angle and insert the needle into the vein.				
18. Instruct the patient to open the fist as soon as there is good blood flow into the tube.				
19. Allow the tube to fill to a sufficient amount and change tubes, if needed.				
20. Release the tourniquet when the desired amount of blood is in the last tube.				
21. Place a dry, sterile gauze over the puncture site immediately after withdrawing the needle from the vein (do not press down on the needle)				
22. Instruct the patient to press the gauze over the site for 3 - 5 minutes with the arm extended.				
23. Discard needle into needle disposal container (do not recap).				
24. Label tube(s) according to laboratory guidelines				
25. Check patient to be sure that bleeding has stopped; apply bandage, if necessary.				
26. Clean up area.				
27. Remove and discard gloves appropriately.				
28. Wash hands with disinfectant.				
<b>Comments:</b>				

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CLINICAL  
Capillary Puncture  
Check-Off List**

**INSTRUCTIONS:** Listed below is a step-by-step procedure for a routine, uncomplicated capillary puncture. The clinical facility **MAY** use this check-off list to insure your proficiency for this procedure before you can perform it at their site. The clinical instructor will observe you and use the key to indicate your performance of this skill.

<b>KEY:</b>	<b>P = Performed</b>	<b>NI = Needs Improvement</b>	<b>NP = Not Performed</b>	
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
1. Have patient state name.				
2. Wash hands with disinfectant.				
3. Put on gloves.				
4. Identify patient by matching armband with requisition.				
5. Prepare equipment and materials.				
a. Obtain gauze, alcohol pad, lancet, and necessary collection devices.				
b. Place equipment within easy reach.				
6. Explain procedure to patient.				
7. Select site and hold finger steady.				
8. Cleanse site with alcohol and allow to dry.				
9. Puncture site with quick, firm stroke.				
10. Wipe away first drop of blood.				
11. Hold finger tightly to obtain sample. Do not squeeze near puncture site.				
12. Collect blood into appropriate collection devices.				
13. Place gauze on puncture site.				
14. Instruct patient to hold gauze tightly for 3 - 5 minutes.				
15. Label tube(s) according to laboratory guidelines.				
16. Check patient.				
17. Clean up area.				
18. Remove and discard gloves appropriately.				
19. Wash hands with disinfectant.				
20. Return samples to laboratory and distribute to appropriate department(s).				

<b>KEY:      P = Performed      NI = Needs Improvement      NP = Not Performed</b>				
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
<b>Comments:</b>				

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CLINICAL  
Bleeding Time  
Check-Off List**

**INSTRUCTIONS:** Listed below is a step-by-step procedure for a bleeding time. The clinical facility **MAY** use this check-off list to insure your proficiency for this procedure before you are allowed to perform it at their site. The clinical instructor will observe the student and use the key to indicate the student's performance of this skill.

<b>KEY:</b>	<b>P = Performed</b>	<b>NI = Needs Improvement</b>	<b>NP = Not Performed</b>	
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
1. Have patient state name.				
2. Wash hands with disinfectant.				
3. Put on gloves.				
4. Identify patient by matching armband with requisition.				
5. Prepare equipment and materials.				
a. Obtain gauze, alcohol pad, lancet, and necessary procedural supplies.				
b. Place equipment within easy reach.				
6. Explain procedure to patient.				
7. Select site.				
8. Cleanse site with alcohol and allow to dry.				
9. Perform bleeding time according to laboratory procedure and manufacturer's directions.				
a. Cleanse site.				
b. Inflate B/P cuff to 40 mmHg.				
c. Puncture skin and start timer simultaneously.				
d. Blot blood at 30 second intervals until bleeding stops.				
e. Release B/P cuff when bleeding has stopped.				
f. Place bandage on puncture site.				
g. Record results.				
10. Make decision to continue or terminate prolonged tests.				
11. Instruct patient not to remove bandage for 24 hours.				
12. Clean up area.				
13. Remove and discard gloves appropriately.				

<b>KEY:      P = Performed      NI = Needs Improvement      NP = Not Performed</b>				
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
14. Wash hands with disinfectant.				
15. Return results to laboratory and distribute to appropriate department.				
<b>Comments:</b>				

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CLINICAL  
Glucose Determination  
Glucose Tolerance Test  
Blood Culture  
Check-Off List**

**INSTRUCTIONS:** Listed below is a step-by-step procedure for special blood collections listed above. The clinical facility **MAY** use this check-off list to insure your proficiency for these procedures before you are allowed to perform them at their site. The clinical instructor will observe the student and use the key to indicate the student's performance of this skill.

<b>KEY:</b>	<b>P = Performed</b>	<b>NI = Needs Improvement</b>	<b>NP = Not Performed</b>	
<b>PROCEDURES: You must:</b>	<b>P</b>	<b>NI</b>	<b>NP</b>	<b>Comments</b>
Glucose determination by glucometer				
Glucose Tolerance Test				
Blood Culture				
<b>Comments:</b>				

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## CLINICAL INSTRUCTIONAL PLAN

### PHLEBOTOMY

## PLAB 1160

CLINICAL SITE: \_\_\_\_\_

### **TERMINAL PERFORMANCE OBJECTIVES:**

The student will gain practical experience performing venipunctures and demonstrate the following competencies during this clinical assignment:

1. Display increasing competency in the performance of venipunctures
2. Collect sample to provide adequate and appropriate specimen for the test ordered
3. Distribute sample and request forms to appropriate department
4. Demonstrate ability to collect a blood specimen using skin puncture methods
5. Demonstrate the proper technique for collecting blood cultures
6. Demonstrate the proper technique for performing the bleeding time test
7. Explain the process of performing a Glucose Tolerance Test

### **Specific Terminal Objectives**

At the end of the course the student should be able to satisfactorily meet the following objectives. They encompass four areas, as follows:

#### **ATTENDANCE:**

##### **The student should:**

1. Arrive at the assigned time
2. Begin work promptly
3. Notify staff of absences or tardies
4. Use good judgment in taking break time
5. Arrange make-up time for absences

#### **PERSONAL APPEARANCE:**

##### **The student should:**

1. Maintain good personal hygiene
2. Adhere to the GC Program Dress Code

**PROFESSIONAL ATTITUDES:****The student should:**

1. Accept constructive criticism
2. Heed suggestions and uses them
3. Seek guidance for improvement
4. Display interest and enthusiasm
5. Show interest in learning new procedures
6. Demonstrate the following interpersonal relationships with patients and other hospital personnel:
  - a) Courtesy
  - b) Consideration
  - c) Tactfulness

**PROFESSIONAL INTEGRITY:****The student should:**

1. Practice professional confidentiality
2. Admit own errors
3. Assist others when own work is completed
4. Inform instructor when leaving assigned area
5. Accept responsibility and performs tasks with minimum supervision

**WORK HABITS AND TECHNICAL SKILLS:****The student should:**

1. Adhere to standard procedure for patient identification and specimen labeling
2. Organize work load well
3. Perform each task with reasonable speed
4. Demonstrate competency in:
  - a. Venipuncture technique
  - b. Capillary puncture technique
  - c. Blood Culture collection
5. Adhere to safety procedures
6. Properly dispose of equipment

**LENGTH OF CLINICAL ROTATION:**

Each student has been checked off in the Campus Lab as being able to perform a venipuncture. Additional practical experience will be gained during this clinical rotation of 50 hours.

## **METHOD AND PROCEDURE OF INSTRUCTION:**

Demonstration and supervision by the laboratory staff members.

The student will be observed and evaluated by a laboratory staff member prior to being allowed to collect blood specimens without supervision.

Each student's clinical rotation will begin with an orientation to allow the student to become familiar with location of hospital departments and patient units, and to allow the student to learn the laboratory's standard operating procedure for specimen collection.

Following an orientation period, the student will begin to observe and perform the various techniques as indicated on the checklist.

**EVALUATION:** Several evaluations are done in this course, some by the student; some by the Clinical Instructor, as explained below.

### **1. BY THE STUDENT:**

- a. Procedures observed/performed by the student should be recorded as they are done and then tallied on the **Student Progress Report** at the close of each day's clinical experience.
- b. After the required 50 clinical hours, the **Clinical Evaluation** should be completed.
- c. The completed copies of the **Student Progress Report** and the **Clinical Evaluation** should be turned in to the course instructor after completion of the clinical rotation (All paper is due by the day of the comprehensive final).

### **2. BY THE CLINICAL SITE:**

- a. The student is responsible for keeping up with and having the Clinical Instructor, or the appropriate designated clinical staff member, complete the following forms:
- b. The bottom section of the **Student Progress Report**, daily, after the student has completed the top section. This is to evaluate critical tasks on a daily basis and to confirm the student's daily tallies.
- c. **Student Evaluation Form**, after 50 hours in the clinical rotation.
- d. **Various Check-Off lists** - these are optional check-off lists for the various procedures the student will be performing in clinical. The clinical facility may want to use them to insure the student's proficiency before he/she is allowed to perform that procedure.

## STUDENT PROGRESS REPORT (4 hrs/day)

Student: \_\_\_\_\_ Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_  
 Year: \_\_\_\_\_ 20 \_\_\_\_\_

Clinical Site: \_\_\_TMC \_\_\_AHD \_\_\_WNJRCM \_\_\_HRMC \_\_\_TMCBH \_\_\_MCM

(other – write in name) \_\_\_\_\_

**INSTRUCTIONS TO STUDENT:** Put the data in the appropriate space for each day you attend clinical. Write in the time you arrive and leave each day and the total number of hours spent at the clinical site. Use this checklist to keep up with the procedures performed each day. Have your clinical instructor complete and sign the information at the bottom of this form to show that they are in agreement with the number you recorded for that day.

DATE (Month/Day) → → → → →	/	/	/	/	/	/	/	/	/	/	/	/
TIME (Arrive at Clinical)												
TIME (Leave Clinical)												
Number of Hours / Day at Clinical												
Cumulative Hours ( <b>Need 96 at Hosp.</b> )												
Target Cumul. Hours (for 4hr clinicals)	4	8	12	16	20	24	28	32	36	40	44	48
Venipunctures (# attempted)												
(# successful)												
Cumulative ( <b>Need 96 Total</b> )												
Target Cumulative Venipunctures	4	8	12	16	20	25	29	33	37	41	45	50
Capillary Punctures												
Cumulative ( <b>Need 5 Total</b> )												
Arterials (Optional: Observe & Assist)												
Cumulative												

**INSTRUCTIONS TO CLINICAL INSTRUCTOR:** Please evaluate the progress of this student for the following tasks according to the scale:

**P = Performed                      NI = Needs Improvement                      NP = Not Performed**

Include any additional comments on the back of this sheet. Sign your name at the bottom to indicate that you are in agreement with the above numbers.

DATE (Month/Day) → → → → →	/	/	/	/	/	/	/	/	/	/	/	/
Washes hands / wears gloves												
Identifies patients												
Labels tubes												
Distributes samples												
Observes safety procedures												
<b>CLINICAL INSTRUCTOR:</b>												
SIGN HERE → → → → → → → →												

## STUDENT PROGRESS REPORT (8 hrs/day)

Student: \_\_\_\_\_ Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_  
 Year: \_\_\_\_\_ 20 \_\_\_\_\_

Clinical Site: \_\_\_TMC \_\_\_AHD \_\_\_WNJRCM \_\_\_HRMC \_\_\_TMCBH \_\_\_MCM

(other – write in name) \_\_\_\_\_

**INSTRUCTIONS TO STUDENT:** Put the data in the appropriate space for each day you attend clinical. Write in the time you arrive and leave each day and the total number of hours spent at the clinical site. Use this checklist to keep up with the procedures performed each day. Have your clinical instructor complete and sign the information at the bottom of this form to show that they are in agreement with the number you recorded for that day.

DATE (Month/Day) → → → → →	/	/	/	/	/	/	/	/	/	/	/	/
TIME (Arrive at Clinical)												
TIME (Leave Clinical)												
Number of Hours / Day at Clinical												
Cumulative Hours ( <b>Need 96 at Hosp.</b> )												
Target Cumul. Hours (for 8hr clinicals)	8	16	24	32	40	48						
Venipunctures (# attempted)												
(# successful)												
Cumulative ( <b>Need 96 Total</b> )												
Target Cumulative Venipunctures	8	16	24	32	40	50						
Capillary Punctures												
Cumulative ( <b>Need 5 Total</b> )												
Arterials (Optional: Observe & Assist)												
Cumulative												

**INSTRUCTIONS TO CLINICAL INSTRUCTOR:** Please evaluate the progress of this student for the following tasks according to the scale:

**P = Performed                      NI = Needs Improvement                      NP = Not Performed**

Include any additional comments on the back of this sheet. Sign your name at the bottom to indicate that you are in agreement with the above numbers.

DATE (Month/Day) → → → → →	/	/	/	/	/	/	/	/	/	/	/	/
Washes hands / wears gloves												
Identifies patients												
Labels tubes												
Distributes samples												
Observes safety procedures												
<b>CLINICAL INSTRUCTOR:</b>												
SIGN HERE → → → → → → → →												

# GRAYSON COLLEGE

## MLT PROGRAM

### Student Evaluation of Clinical Instructor and Clinical Internship Rotation

Clinical Site: \_\_\_\_\_ Department: \_\_\_\_\_  
 Clinical Instructor: \_\_\_\_\_

Student: This evaluation will be confidential. Mark an X in one box on each line. Fill out an evaluation for each instructor. Write *NA* if the item is not applicable. Complete front and back.

	Never	Rarely	Sometimes	Often	Always
<b>I. The Clinical Instructor</b>					
Encouraged student questions and comments					
Answered questions					
Was available to discuss issues related to the rotation					
Presented material relevant to the rotation					
Presented topics clearly					
Communicated effectively (speech, mannerisms, delivery)					
Provided useful feedback on performance					
Showed respect for students					
<b>II. Instruction Methods</b>					
Assignment of tasks was appropriate.					
Department policies and procedures stated at the beginning of the rotation were clarified throughout the rotation.					
Additional study aids were provided to support the rotation (e.g., unknowns, slides, case studies, lectures).					
Feedback from exit examination was timely.					
Feedback from professional evaluation was timely.					
This rotation increased my interest in further study of this area.					
The personnel in this department hold a positive attitude toward students and teaching.					

**III. Comment on the strengths of this rotation.**

**IV. Suggestions for improving this rotation.**

**V. Comment on the strengths of your academic preparation for this rotation.**

**VI. Suggestions for improving your academic preparation for this rotation.**

**VII. Additional comments**

Would you recommend this rotation to a fellow student? \_\_\_\_\_ Yes \_\_\_\_\_ No

# GRAYSON COLLEGE

## Phlebotomy PLAB 1160

### CLINICAL AFFILIATES TELEPHONE NUMBERS

Hunt Regional Medical Center (Greenville).....	(903) 408-1815
Alliance Health Durant .....	(580) 924-3080
Medical City McKinney.....	(972) 540-4500
Texoma Medical Center (Denison).....	(903) 416-4270
Wilson N. Jones Regional Medical Center (Sherman).....	(903) 870-4489
North Texas Medical Center (Gainesville).....	(940) 612-8180
TMC Bonham Hospital.....	(903) 583-8585

Alan Jackson (903) 463-8779 (work)  
jacksona@grayson.edu (email)

Students should call the site in advance if a situation arises which makes it impossible to attend that day. There are no excused absences. All absences must be made up. Arrangements should be made with the clinical site and approved by the instructor.



## RECORD FOR CAMPUS LAB HOURS

Student: \_\_\_\_\_ Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_  
 Year: \_\_\_\_\_ 20 \_\_\_\_\_

**INSTRUCTIONS:** This form is to record the time you spend in campus lab and related activities. Record your time spent doing “courses” on the MediaLabInc website. For the courses listed, write in the total time spent performing it for each day performed (I will confirm this time online). For campus labs, write in the time you arrive and the time you leave each day, the total number of hours spent performing the activity and the type of activity performed.

<b>DATE (Month/Day) → → → → →</b>	/	/	/	/	/	/	/	/	/	/	/	/	/
<b>TIME</b> (Begin Activity)													
<b>TIME</b> (End Activity)													
Number of Hours / Activity													
Cumulative Hours ( <b>Need at least 4</b> )													
<b>Activity</b>													
Venipunctures ( <b>Need at least 1</b> )													
Capillary Puncture													
Bleeding Time													
Other Campus Lab Activity (write in below):													
1.													
2.													
3.													
4.													
<b>MediaLabInc. Courses:</b>													
1. HIPAA Privacy and Security Regulations													
2. OSHA Bloodborne Pathogens													
3. OSHA Fire Safety													
4. OSHA Chemical Hygiene													
5. OSHA Electrical Safety													
6. First Aid													
7. Introduction to Bioterrorism													
8. Phlebotomy													
9. Routine Venipuncture y													
10. Dermal Puncture and Capillary Blood Collection													
<b>PhlebotomyTUTOR (See Instructor for CD)</b>													
<b>Any Other Approved Activity:</b>													
1.													
2.													
3.													
4.													
5.													
6.													
7.													

**GRAYSON COLLEGE  
PLAB 1160 - PHLEBOTOMY  
Student Evaluation Form**

**Student:** \_\_\_\_\_ **Clinical Site:** \_\_\_\_\_

**INSTRUCTIONS:** The student exhibits the following characteristics regarding his/her performance in the laboratory. Please rank these characteristics according to the following scale:  
 0 = rarely (< 60% of the time)      2 = part of the time (70-79%)      4 = all of the time (90-100%)  
 1 = occasionally (60-69% of the time)      3 = majority of the time (80-89%)      NA = not observed

<b>CHARACTERISTICS</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>NA</b>
<b>ATTENDANCE:</b>						
Arrives at the assigned time						
Begins work promptly						
Notifies staff of absences or tardies						
Uses good judgement in taking break time						
Arranges make-up time for absences						
<b>PERSONAL APPEARANCE:</b>						
Maintains good personal hygiene						
Adheres to the GC Program Dress Code						
<b>PROFESSIONAL ATTITUDES:</b>						
Accepts constructive criticism						
Heeds suggestions and uses them						
Seeks guidance for improvement						
Displays interest and enthusiasm						
Shows interest in learning new procedures						
Demonstrates the following interpersonal relationships with patients and other hospital personnel:						
1. Courtesy						
2. Consideration						
3. Tactfulness						
<b>PROFESSIONAL INTEGRITY:</b>						
Practices professional confidentiality						
Admits own errors						
Assists others when own work is completed						
Informs instructor when leaving assigned area						
Accepts responsibility and performs tasks with minimum supervision						
<b>WORK HABITS AND TECHNICAL SKILLS:</b>						
Adheres to standard procedure for patient identification and specimen labeling						
Organizes work load well						
Performs each task with reasonable speed						
Demonstrates competency in:						
Venipuncture technique						
Capillary puncture technique						
Blood Culture collection						
Adheres to safety procedures						
Properly disposes of equipment						
<b>FOR GC USE ONLY</b>	<b>Total points</b>		<b>X Grade Factor</b>		<b>= Final points</b>	

**Clinical Instructor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Grayson College  
Health Sciences Department

BODY FLUID EXPOSURE INCIDENT REPORT

DATE \_\_\_\_\_

Name of Person Exposed	Social Security Number
Witness(es) to Incident	Date & Time of Exposure
Exposure Location	If in lab, lab partner's student ID number
Patient's Diagnosis	Patient's Medical Record Number

Is the person exposed a  Student?  Clinical Instructor?

Did the exposure involve a needle stick, laceration, or break in the skin?  Yes  No

Did the exposure involve mucous membrane exposure?  Yes  No

Were the Centers for Disease Control Universal Precautions followed?  Yes  No

If the exposed person was a student, was the Clinical or Lab Instructor present at the time of exposure?  Yes  No

Exposed Person's Description of the Exposure Events: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature

Witness(es)' Description of the Exposure Events: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature

Post Exposure Tests	Date Drawn on Patient/Lab Partner	Date Drawn on Exposed Person
---------------------	-----------------------------------	------------------------------

HIV

HbsAg

Referred for follow-up to one of the following:

Infection Control Department \_\_\_\_\_

Private Physician \_\_\_\_\_

Grayson County Health Department (HIV Coordinator at 903-465-2878) \_\_\_\_\_

Texas Department of Health (Ron Tomlinson at 817-460-3032) \_\_\_\_\_

Professor/Program Director \_\_\_\_\_ Date \_\_\_\_\_ Chairperson of Health Sciences \_\_\_\_\_ Date \_\_\_\_\_

DISTRIBUTION: ORIGINAL-Student's Permanent File  
COPY-Program Director & Chair of Health Sciences

6/08

**Grayson College  
Health Sciences Department**

**Protocol for the Prevention of Exposure to Body Fluids via Mucous Membranes or  
Parenteral Injury such as via contaminated needle sticks**

**Student Training**

Before participating in any laboratory or clinical experiences involving the potential for exposure to contaminated body fluids, students will receive training in Universal Precautions, including but not limited to:

- Handwashing
- Personal Protective Equipment
- Use of sharps containers
- Immediate care post-exposure

**Personal Protective Equipment (PPE)**

Gloves and other PPE are available in lab settings for student and employee use where body fluid exposure may occur.

**Disposal of sharps**

Puncture-proof sharps containers are available in any lab setting where disposable sharps are used. Filled sharps containers are sealed shut and taken to the MLT laboratory for sterilization and disposal.

**Grayson College  
Health Sciences Department**

**Protocol following Exposure to Body Fluids via Mucous Membranes or Parenteral Injury  
such as via contaminated needle sticks**

Following body fluid exposure to any source person through a needle stick, sharps-induced injury, or exposure via mucous membranes, GC employees and students should take the following steps:

Wash the wound and skin sites exposed to blood and body fluids with soap and water.

For percutaneous injuries (those that break the skin) where bleeding occurs, allow bleeding for a few seconds before washing with soap and water.

Flush mucous membranes exposed to blood and body fluids with water.

Topical use of antiseptics is optional.

Do not apply caustic agents, such as bleach, onto the wound or inject antiseptics or disinfectants into the wound.

Immediately inform the clinical or lab instructor, preceptor, or person in charge, of the exposure type and the action taken.

Once informed, the instructor or person in charge should take the following actions:

Assess the exposure to determine the risk of transmission.

Inform the source person (i.e. patient in the clinical setting; student lab partner in the campus lab setting) about the exposure and advise regarding HIV & Hepatitis testing.

Inform the exposed person (i.e., student or college employee) about the exposure and advise regarding HIV & hepatitis testing.

If exposure occurs in the clinical setting, follow the agency protocols

If exposure occurs on campus, immediately advise the exposed person to see their personal healthcare provider or the nearest provider who manages this type of injury.

If exposure occurs on campus, immediately advise the source person to obtain HIV and Hepatitis testing

Provide immediate support and information on post-exposure prophylaxis (PEP) to the exposed person and assist the exposed person to complete the Post-exposure Prophylaxis waiver form if indicated.

Assist the exposed person to complete the GC Body Fluid Exposure Incident Report.

Maintain the confidentiality of all related records.

Notify the appropriate Program Director and Department Chairperson.

The Health Science Chairperson and/or Program Director should:

- Ensure that the exposure incident is documented in the GC Sharps Injury Log  
Kept in the HS Lab Coordinator's office
- Report any sharps injury to the TDSHS via the Health Dept, using online form at:  
[http://www.dshs.state.tx.us/idcu/health/bloodborne\\_pathogens/reporting/](http://www.dshs.state.tx.us/idcu/health/bloodborne_pathogens/reporting/)
- Provide post-exposure support and follow-up to the exposed person

Revised 6/08

**Grayson College  
Health Sciences Department**

Post Exposure Recommendations

After exposure, both the exposed student and the source person should be tested for Hepatitis B, C, and HIV. This is important to establish a baseline if a false negative result is obtained from the source person.

**HIV**

If the source person has AIDS, is positive for the HIV antibody, or refuses the test, the student should be counseled regarding the risk of infection and evaluated clinically and serologically for evidence of HIV infection **AS SOON AS POSSIBLE** after the exposure. The student should be advised to report and seek medical evaluation for any acute febrile illness that occurs within twelve (12) weeks after the exposure.

A seronegative student should be retested six (6) weeks post-exposure and periodically thereafter [twelve (12) weeks and six (6) months after the exposure] to determine if seroconversion has occurred. If the patient has a parenteral or mucous membrane exposure to blood or other body fluid of a student, the same procedure outlined should be followed for the source student and the exposed patient.

**HEPATITIS B**

All Health Science students are required to receive the Hepatitis B vaccine series before beginning any clinical experience.

**SOURCE CHECK FOR Hbsag**

<u>Hbsag (-)</u>  No further testing for source. Test student for Hbsab to establish a baseline.	<u>Hbsag (+)</u>  Refer source to physician and check student Hbsab.
--------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------

**STUDENT CHECK FOR HbsAB**

If the source person is positive for Hbsag, initiate the following protocol:

<u>Vaccinated</u>	<u>Not Vaccinated</u>						
If titer is low, give two (2) lcc boosters of Hepatitis B vaccine (thirty days apart).	<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">(-)</td> <td style="text-align: center;">Titer</td> <td style="text-align: center;">(+)</td> </tr> <tr> <td style="vertical-align: top;">Give Hbig and the first of three (3) doses of the vaccine within seven (7) days. Follow with a second dose of Hbig and a second vaccine at thirty (30) days. Final dose of vaccine six (6) months later.</td> <td></td> <td style="vertical-align: top;">No further treatment. If titer is low, give two (2) lcc boosters</td> </tr> </table>	(-)	Titer	(+)	Give Hbig and the first of three (3) doses of the vaccine within seven (7) days. Follow with a second dose of Hbig and a second vaccine at thirty (30) days. Final dose of vaccine six (6) months later.		No further treatment. If titer is low, give two (2) lcc boosters
(-)	Titer	(+)					
Give Hbig and the first of three (3) doses of the vaccine within seven (7) days. Follow with a second dose of Hbig and a second vaccine at thirty (30) days. Final dose of vaccine six (6) months later.		No further treatment. If titer is low, give two (2) lcc boosters					

Hbig = Hepatitis B Immune Globulin

The GC Health Sciences Department recommends that any exposed student follow the Centers for Disease Control's (CDC) Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Post-exposure Prophylaxis, June 29, 2001 ([www.cdc.gov/mmwr/preview/mmwrhtml/rr501a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr501a1.htm)).

These recommendations are summarized below:

### **HBV – Hepatitis B Virus Exposure**

“...Postexposure prophylaxis (PEP) with hepatitis B immune globulin (HBIG) and/or hepatitis B vaccine series should be considered for occupational exposures after evaluation of the hepatitis B surface antigen status of the source and the vaccination and vaccine-response status of the exposed person. Guidance is provided to clinicians and exposed health-care personnel (HCP) for selecting the appropriate HBV PEP [National Clinicians' Post-Exposure Prophylaxis Hotline (PEpline) 1.888.448.4911].”

### **HCV – Hepatitis C Virus Exposure**

“Immune globulin and antiviral agents (e.g., interferon with or without ribavirin) are not recommended for PEP of hepatitis C. For HCV post-exposure management, the HCV status of the source and the exposed person should be determined, and for exposure to an HCV positive source, follow-up HCV testing should be performed to determine if infection develops.”

### **HIV – Human Immunodeficiency Virus**

“Recommendations for HIV PEP include a basic 4-week regimen of two drugs (zidovudine [ZDV] and lamivudine [3TC]; 3TC and stavudine [d4T]; or didanosine [ddI] and d4T) for most HIV exposures and an expanded regimen that includes the addition of a third drug for HIV exposures that poses an increased risk for transmission. When the source person's virus is known or suspected to be resistant to one or more of the drugs considered for the PEP regimen, the selection of drugs to which the source person's virus is unlikely to be resistant is recommended.”

For special circumstances (e.g., delayed exposure report, unknown source person, pregnancy in the exposed person, resistance of the source virus to antiretroviral agents, or toxicity of the PEP regimen), consult with local experts and/or call the National Clinicians' Post-Exposure Prophylaxis Hotline (PEpline) at 1.888.448.4911.

**Preventive measures are the responsibility of the student and must be performed at once. If a student refuses the recommended treatment and/or counseling as stated, then the student must fully complete, sign, and date the Postexposure Prophylaxis Protocol Waiver (which must be notarized). Any expense incurred is the responsibility of the student.**

Name: \_\_\_\_\_  
 City (you will be driving from): \_\_\_\_\_

### AVAILABILITY SCHEDULE

**Instructions:** Mark the ENTIRE square below with an "X" for each time and day you **ARE NOT** available to go to clinical. You must go for 8 hours/week, and preferable two 4 hour sessions. Also, indicate the clinical site you prefer, if any. Every attempt will be made to assign you there, but there are no guarantees!

Mark three choices: **1** = first choice, **2** = second choice and **3** = third choice:

- |                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Texoma Medical Center – Bonham<br><input type="checkbox"/> Texoma Medical Center (Denison)<br><input type="checkbox"/> Alliance Hospital Durant<br><input type="checkbox"/> Medical City McKinney | <input type="checkbox"/> Wilson N. Jones Regional Medical Center<br><input type="checkbox"/> Hunt Regional Medical Center (Greenville)<br><input type="checkbox"/> North Texas Medical Center (Gainesville)<br><input type="checkbox"/> Does not matter |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

		Monday	Tuesday	Wednesday	Thursday	Friday
<b>5 AM</b>	:00					
	:15					
	:30					
	:45					
<b>6 AM</b>	:00					
	:15					
	:30					
	:45					
<b>7 AM</b>	:00					
	:15					
	:30					
	:45					
<b>8 AM</b>	:00					PLAB 1223
	:15					PLAB 1223
	:30					PLAB 1223
	:45					PLAB 1223
<b>9 AM</b>	:00					PLAB 1223
	:15					PLAB 1223
	:30					PLAB 1223
	:45					PLAB 1223
<b>10 AM</b>	:00					PLAB 1223
	:15					PLAB 1223
	:30					PLAB 1223
	:45					PLAB 1223
<b>11 AM</b>	:00					PLAB 1223
	:15					PLAB 1223
	:30					PLAB 1223
	:45					PLAB 1223
<b>12 PM</b>	:00					PLAB 1223
	:15					PLAB 1223
	:30					PLAB 1223
	:45					PLAB 1223
<b>1 PM</b>	:00					
	:15					
	:30					
	:45					
<b>2 PM</b>	:00					
	:15					
	:30					
	:45					
<b>3 PM</b>	:00					
	:15					
	:30					
	:45					
<b>4 PM</b>	:00					
	:15					
	:30					
	:45					
<b>5 PM</b>	:00					
	:15					
	:30					
	:45					
<b>6 PM</b>	:00					
	:15					
	:30					
	:45					
<b>7 PM</b>	:00					
	:15					
	:30					
	:45					
<b>8 PM</b>	:00					
	:15					
	:30					
	:45					