

PL-TEC-EFR-010 COMPETENCY ASSESSMENT FORM FOR PHLEBOTOMIST

EMPLOYEE NAME	NAZIA SHANJAHAN	EMPLOYEE ID	10004823
DESIGNATION	PHLEBOTOMIST	DATE OF JOINING	26/10/2015
DEPARTMENT	LABORATORY	LOCATION	MMB2 CLINIC
SELF ASSESSMENT		EVALUATOR ASSESSMENT	
<p>A = Never performed. You have never performed the stated task and have no experience with this type of skill.</p> <p>B = Familiar with. You are familiar with the stated task, but you would need more experience and practice to feel comfortable and proficient in this type of skill.</p> <p>C = Experienced in. You have performed this task several times; you feel moderately comfortable functioning independently, but you would require a resource person nearby.</p> <p>D = Expert. You have performed this task frequently; you feel comfortable and proficient in this skill; you would not require supervision or practice.</p> <p>E = Evaluation mechanism used by evaluator (place applicable numeric code):</p> <ol style="list-style-type: none"> 1) Direct observation 2) Monitoring, recording of information and reporting of examination results 3) Review of records, worksheets, quality control (QC) and preventive maintenance (PM) 4) Direct observations of equipment maintenance/function checks. 5) Assessment of examination/task performance 6) Evaluation of problem-solving skills. 			
		F = Needs improvement	
		G = Observation and training required	
		H = Competent	
		I = Professional	



COMPETENCY ASSESSMENT FORM FOR PHLEBOTOMIST

PL-TEC-EFR-010

PERFORMANCE CRITERIA	SELF ASSESSMENT						EVALUATOR ASSESSMENT						
	A	B	C	D	EMPLOYEE INITIALS/ID	DATE OF ASSESSMENT	E	F	G	H	I	EVALUATOR INITIALS/ID	DATE OF ASSESSMENT
AGE SPECIFIC													
Neonatal				<input checked="" type="checkbox"/>	Mr. Nouri	08 FEB 2024	-						07 FEB 2024
Paediatrics				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Adolescent				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Adults				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Geriatrics				<input checked="" type="checkbox"/>	Mr. Nouri		-						
SAFETY WORK PRACTICES, HEALTH, AND SAFETY													
Knowledge of and demonstrate good practice in Standard Precautions				<input checked="" type="checkbox"/>	Mr. Nouri	06 FEB 2024	-						07 FEB 2024
Knowledge of and demonstrate good practice in Disinfection and decontamination				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Knowledge of and demonstrate good practice in Hand wash, Hand Rub and Hand hygiene				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Knowledge of and demonstrate good practice in the use of PPE - gloves, gown, mask, and shields (Correct order of donning and removing)				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Describe safety measures to be taken before and after blood collection				<input checked="" type="checkbox"/>	Mr. Nouri	06 FEB 2024	-						
Knowledge of and demonstrate good practice and safe practice when assembling, handling, and disposal of sharps (i.e., safety-engineered vacutainer needles)				<input checked="" type="checkbox"/>	Mr. Nouri		-						
Report to manager/supervisor and any incidents related to safety and personal injury (e.g., needle stick injuries), in a timely manner				<input checked="" type="checkbox"/>	Mr. Nouri		-						



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Knowledge of fire safety and use of fire extinguishers Verbalize what is R.A.C.E. and P.A.S.S.				✓		06 FEB 2024	✓				✓		
Knowledge of use of spill kits and containment procedures for biological or chemical hazards.				✓		06 FEB 2024	✓				✓		
Knowledge of the importance of dealing, documentation, and reporting requirements for blood, body fluids, and needle stick injuries				✓		06 FEB 2024	✓				✓		
Knowledge and awareness of the risk associated with Phlebotomy (i.e., hematoma)				✓		06 FEB 2024	✓				✓		
Knowledge of and demonstrate good practice in disposal and segregation of waste according to established protocols				✓		06 FEB 2024	✓				✓		
Knowledge of safety guidelines (emergency codes)				✓		06 FEB 2024	✓				✓		
Organized room and proper placement of blood collection supplies and materials (red and green area, if applicable)				✓		06 FEB 2024	✓				✓		
Demonstrate and observe aseptic techniques during phlebotomy				✓		06 FEB 2024	✓				✓		
Respond appropriately to patient crisis and stop collection if warranted (nausea, fainting)				✓		06 FEB 2024	✓				✓		
Responds appropriately to stressful situations (difficult patient, combative patient)				✓		06 FEB 2024	✓				✓		
Responds appropriately when unable to obtain blood or patient unavailable (inpatient)				✓		06 FEB 2024	✓				✓		
PHLEBOTOMY: PRE-EXAMINATION TECHNIQUE, VENIPUNCTURE COLLECTION AND SPECIMEN HANDLING													
PATIENT PREPARATION													
Greet the client and introduce yourself.				✓		06 FEB 2024	✓				✓		
• Discuss the procedure to be done				✓		06 FEB 2024	✓				✓		



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<ul style="list-style-type: none"> Comfortably position the Client (Supine position) Ask if she/he did the same procedure before Ask Patient if he/she had any adverse reactions (i.e., fainting) with regards to blood collection. Receive verbal consent 				<input checked="" type="checkbox"/>	<i>R. Mansour</i> 10004823	06 FEB 2024	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>R. Mansour</i>	07 FEB 2024
PATIENT IDENTIFICATION													
Understand the need to accurately match patient and specimen				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Accurately identify patient using minimum points of identification (name at least 2):				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
<ul style="list-style-type: none"> Full Name Date of Birth Medical Record Number Demographic ID Checking the requisition barcode and arm band for inpatients 				<input checked="" type="checkbox"/>	<i>R. Mansour</i>	06 FEB 2024	<input type="checkbox"/>				<input checked="" type="checkbox"/>	<i>R. Mansour</i>	07 FEB 2024
Correlates test request with the proper label and specimen tube collected from the patient				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Check the test Special examination indications (light, temperature, timed, fasting)				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Verification of the Physician's order				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
States Action to be taken if information is incorrect or missing				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Ensure patient confidentiality, privacy, dignity, and safety is upheld in accordance with Pure Lab policy				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Cough Etiquette				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	
Accessioning (Individual specimens and batching)				<input checked="" type="checkbox"/>			<input type="checkbox"/>					<input checked="" type="checkbox"/>	

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Demonstrate proficiency in collection of patient specimens requiring special collection procedures				✓	10009823 R.K. ROQA	✓				✓		07 FEB 2024
CLINICAL SKILLS												
Identify and select appropriate phlebotomy equipment for venipuncture:												
• Needles (gauges)												
• Holders/Adaptors (single use)												
• Winged or butterfly needle set (when it is necessary to use)												
• Blood collection tubes for routine testing												
Identify and select appropriate vein for venipuncture and unsuitable vein for puncture				✓								07 FEB 2024
Identify patients with poor venous access where assistance maybe needed				✓								
Correctly apply a tourniquet				✓	10009823							
State optimum time for tourniquet				✓	R.K. ROQA							
VENIPUNCTURE												
Prepare puncture site using appropriate solution and disinfection techniques:												
• Using alcohol swab, apply firm but gentle pressure start from the centre of puncture site, work outward and downward covering at least 2 cm												
• Allow alcohol to air dry for 30 seconds												
• Do not touch cleaned site												
• Verbalize corrective action if the site was touched												
Performs venipuncture as follows:												
• Anchor the vein				✓								
				✓								06 FEB 2024
				✓								06 FEB 2024
				✓								06 FEB 2024
				✓								06 FEB 2024

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<ul style="list-style-type: none"> Ask patient to form a fist Puncture the vein swiftly at 30-degree angle or less Check if sufficient blood has been collected in the tube Release tourniquet before (or as soon as the blood flows) needle withdrawal Release needle gently and apply gentle pressure to the site with clean gauze Ask patient to continue apply pressure and not to bend arm to avoid hematoma Apply dressing or bandage if needed Removes gloves and discards properly Washes hands properly 				<input checked="" type="checkbox"/>	<p>10004823 R.K. Jozar</p>	06 FEB 2024	-							
				<input checked="" type="checkbox"/>			06 FEB 2024	-						
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POST VENIPUNCTURE				<input checked="" type="checkbox"/>	<p>10004823 R.K. Jozar</p>	06 FEB 2024	-							
<ul style="list-style-type: none"> Discard used needle/blood sampling device into sharp containers Check label against form for accuracy Discard used items into appropriate waste category (medical and non-medical) 			<input checked="" type="checkbox"/>			06 FEB 2024	-							
			<input checked="" type="checkbox"/>			06 FEB 2024	-							
					<p>10004823 R.K. Jozar</p>	06 FEB 2024	-							
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<ul style="list-style-type: none"> Observe correct technique in removing the gloves and perform Hand hygiene 				<input checked="" type="checkbox"/>	10004823 S.K. Adnan	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
<p>Recheck and observe proper labelling on the tube before dispatching the patient</p> <p>Signature on the label of the tube (if required)</p>				<input checked="" type="checkbox"/>	10004823 S.K. Adnan	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
<p>POST PATIENT-CARE</p> <ul style="list-style-type: none"> Inform patient when the procedure is done Ask the patient how they are feeling Check insertion site to verify bleeding has stopped Thank the patient (say something reassuring or encouraging) Leaves Patient settled comfortably Ensures relevant information is on the requisition receipt, transport sheet/transfer list received with the request and match the number of collected tubes with the transport list Signs the transport list before sending the samples 				<input checked="" type="checkbox"/>	10004823 S.K. Adnan	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
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<p>CLINICAL SKILLS</p>													
<p>Prepares the materials and equipment required for skin puncture:</p> <ul style="list-style-type: none"> Microtainer tubes Micro-lancet Alcohol swab Clean Gauze 				<input checked="" type="checkbox"/>	10004823 S.K. Adnan	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
<p>Knowledge on the preferred capillary collection sites:</p> <ul style="list-style-type: none"> Finger 				<input checked="" type="checkbox"/>	10004823 S.K. Adnan	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Signature)	07 FEB 2024

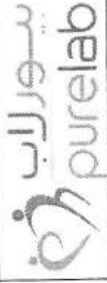
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<ul style="list-style-type: none"> Collect sufficient blood by touching the microtainer scoop to drop of blood. Allow the drop of blood slide down the tube and periodically tap the microtainer to mix the blood with the anticoagulant. Cover the site with clean gauze. Ask patient/parent/guardian apply pressure until bleeding stops. 				<input checked="" type="checkbox"/>	<i>[Signature]</i> 10004823 A.K. Nazki	06 FEB 2024	<input checked="" type="checkbox"/>					<i>[Signature]</i> 10004812	07 FEB 2024
<p>Performs heel puncture as follows:</p> <ul style="list-style-type: none"> With the index finger wrapped around the foot supporting the arch and the thumb around the ankle, grasp the heel firmly, but gently. Apply firm pressure towards the site. Puncture the recommended side of the heel Wipe first drop of blood with clean gauze Position site downwards and apply moderate pressure. Collect required blood by touching the microtainer scoop to drop of blood Allow the drop of blood slide down the tube and periodically tap the microtainer to mix the blood with the anticoagulant Cover the site with clean gauze Ask patient/parent/guardian apply pressure until bleeding stops. 				<input checked="" type="checkbox"/>	<i>[Signature]</i> 10004823 A.K. Nazki	06 FEB 2024	<input checked="" type="checkbox"/>					<i>[Signature]</i> 10004812	07 FEB 2024
<p>Knowledge of and practice correct order of draw for multiple microtainer tubes collection: Haematology specimen first followed by the chemistry and Blood bank.</p>				<input checked="" type="checkbox"/>	<i>[Signature]</i> 10004823 A.K. Nazki	06 FEB 2024	<input checked="" type="checkbox"/>					<i>[Signature]</i> 10004812	07 FEB 2024
<p>POST CAPILLARY PUNCTURE</p> <ul style="list-style-type: none"> Discard used lancet into sharp container Check label against form for accuracy 				<input checked="" type="checkbox"/>	<i>[Signature]</i> 10004823 A.K. Nazki	06 FEB 2024	<input checked="" type="checkbox"/>					<i>[Signature]</i> 10004812	07 FEB 2024

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COMPETENCY ASSESSMENT FORM FOR PHLEBOTOMIST



PERFORMANCE CRITERIA	SELF ASSESSMENT						EVALUATOR ASSESSMENT						
	A	B	C	D	EMPLOYEE INITIALS/ID	DATE OF ASSESSMENT	E	F	G	H	I	EVALUATOR INITIALS/ID	DATE OF ASSESSMENT
<ul style="list-style-type: none"> Discard used items into appropriate waste category (medical and non-medical) Observe correct technique in removing the gloves/dispose in proper waste bin Perform Hand hygiene Recheck labels on the tube and forms before dispatch Register specimen into Laboratory Information System such as logbook, Log-in thru Mallafi/WAREED				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
POST PATIENT-CARE <ul style="list-style-type: none"> Inform patient when the procedure is done Ask the patient how they are feeling Check insertion site to verify bleeding has stopped Thank the patient (say something re-assuring or encouraging) Ensures relevant information is on the requisition receipt, transport sheet/transfer list received with the test request Procures and labels blood and other specimens (sputum, UBT, etc) according to specific requirements				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
SPECIMEN PREPARATION, TRANSPORT AND DOCUMENTATION <ul style="list-style-type: none"> Have read and understood all related Policies and Procedures Reject and accept specimen as per the existing laboratory procedure Performs corrective action and document when errors/rejection in specimen receipt are identified Maintain complete record of specimen receipt as per the standard operating procedure 				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024
				<input checked="" type="checkbox"/>	10004823 R.K. Aljara	06 FEB 2024	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	07 FEB 2024

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PL-TEC-EFR-010

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	A	B	C	D	EMPLOYEE INITIALS/ID	DATE OF ASSESSMENT	E	F	G	H	I	EVALUATOR INITIALS/ID	DATE OF ASSESSMENT
Referral to reference laboratories (Proper collection, storage and dispatch)				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						07 FEB 2024
Understand the specimen transportation requirements				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						
<ul style="list-style-type: none"> Samples were correctly stored Centrifuged (when applicable) PT (group A) and urgent specimen are placed plastic leak proof biohazard bag (with attached request form) 				<input checked="" type="checkbox"/>	SK. NAWAZ	06 FEB 2024	<input checked="" type="checkbox"/>						
Transport form should be outside the transport box (to prevent contamination)				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						
Multiple tubes should be arranged in a rack				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						
Verifies specimen suitability including adequate amount/volume, integrity and complies with storage requirement prior to transport				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>						
Proper documentation of Specimen Transportation (Temperature Monitoring, Security lock)				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						
Transport sheet available and complete information provided by sending and receiving facilities				<input checked="" type="checkbox"/>		06 FEB 2024	<input checked="" type="checkbox"/>						
OTHER SKILLS													
Incident Reporting/QDMS Corrective and Preventive Action (CAPA) Module				<input checked="" type="checkbox"/>	10004823	06 FEB 2024	<input checked="" type="checkbox"/>						
Laboratory information system (LIS)				<input checked="" type="checkbox"/>	SK. NAWAZ	06 FEB 2024	<input checked="" type="checkbox"/>						
This skill list is part of the successful applicant's orientation package within the unit. False representation of information will result in a review of the applicant's contractual status.													
<input checked="" type="checkbox"/> I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS AN ACCURATE ACCOUNT OF MY PROFICIENCY.													
Signature: <u>SK. NAWAZ</u> <u>JAZIA SHANJHAN</u>													



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LABORATORY MANAGER/SUPERVISOR NAME AND EMPLOYEE ID				<input checked="" type="checkbox"/>	SK.N.P.R.	09 FEB 2024					<input checked="" type="checkbox"/>	[Signature]	07 FEB 2024
HEAD OF LABORATORY NAME AND EMPLOYEE ID													

*A minimum of 2 out-patient and 1 in-patient collection, if applicable.