

Durham VAMC Research Blood Collection Competency Initial and Annual Review Checklist^{1,2}

Research staff member: _____
Printed Name
Signature/Date

_____ (*initials*) The requirement to complete this competency does not apply because of at least one of the following: (a) I am currently subject to an annual competency (e.g., a RN), (b) I am employed as a phlebotomist by Pathology and Laboratory Medicine. If this waiver applies, you only need to submit this document **ONE TIME** unless the status of your waiver changes.

If the above waiver does not apply, observe the research staff member perform the following activities. After the employee demonstrates proficiency, check each item and initial.

Preceptor: _____
Printed Name
Signature/Date

1. Selection and use of appropriate equipment and supplies:

Materials	Proficient	Initials
Gloves		
Needle device		
Alcohol swabs		
Blood collection container (check expiration dates)		
Tourniquet		
Tape/ Gauze, bandage		
Correct labels		

2. Collection Technique:

Technique	Proficient	Initials
Handwashing		
Study Subject Identification		
Selection of venipuncture site		
Donning/Doffing PPE (gloves)		
Application of tourniquet/removal		
Palpation of vein		
Cleansing of site		
Proper use of needle device		
Proper use of collection container		
Inspection of needle		
Needle angle and bevel		
Dressing of site		
Collection container labeling		

Submit this form at **Initial Review and annually thereafter**, or when **adding blood collection authority**, for all staff members authorized by the Principal Investigator to collect human blood samples.

¹ Licensed Independent Practitioners (e.g., M.D.), including Residents, holding core privileges to perform phlebotomy are exempt from completing this competency checklist and are not required to submit this document to the DVAMC Research Office.

² Completion of this form does not constitute training.