

# DEPARTMENT OF CLINICAL LABORATORY SCIENCES

SCHOOL OF HEALTH PROFESSIONS  
STONY BROOK UNIVERSITY  
STONY BROOK, NEW YORK 11794-8205

## IMMUNOHEMATOLOGY COMPETENCY EVALUATION FORM

STUDENT NAME: \_\_\_\_\_ CLINICAL AFFILIATE: \_\_\_\_\_

Section: \_\_\_\_\_ Duration: \_\_\_\_\_ Supervisor/Instructor: \_\_\_\_\_

### Instructions:

1. The student must complete all pertinent objectives/checklist items in order to complete the rotation within each section. If the items are not applicable, indicate "n/a."
2. The evaluator(s) must document the student's acceptable performance in meeting the established tasks in the **Laboratory Safety and Infection Control, Quality Control and Blood Bank Procedures and Protocols categories** by putting the date the task was performed. The evaluator(s) must document the student's acceptable performance in meeting the established tasks in the **Blood Bank Test Skills and Affective Skills category** by checking the appropriate column (1 = none of the time, 2 = some of the time, 3 = most of the time, 4 = all of the time).
3. The instructor and student must sign this form after it has been completed at the end of the clinical rotation.
4. **PLEASE NOTE** that grades of 2 or 1 may result in remediation for the student and need to be brought to the attention of the Clinical Coordinator and the student.

LABORATORY SAFETY AND INFECTION CONTROL	DATE PERFORMED	EVALUATOR SIGNATURE
1. IDENTIFIES LOCATION OF SAFETY DEVICES		
A. Fire Extinguishers		
B. Fire Alarms		
C. Fire Blankets		
D. Eye Washes		
E. Emergency Exits		
F. Safety Showers		
G. First Aid Kit		
H. Incident Reports		
2. REVIEWS DEPARTMENT'S PROTOCOL FOR HANDLING BLOOD & BODY FLUIDS		

QUALITY CONTROL	DATE PERFORMED	EVALUATOR SIGNATURE
PERFORMS APPROPRIATE QC PROCEDURES ACCORDING TO PROTOCOL:		
A. Reagent red blood cells		
B. Reagent antisera		
C. Refrigerators		
D. Freezers		
E. Heating block		
F. Water Bath		
G. Platelet rotator		
H. Cell Washers		

BLOOD BANK PROCEDURES AND PROTOCOLS	DATE PERFORMED	EVALUATOR SIGNATURE
1. Identifies location of the standard operating procedure manual		
2. Reviews protocol for the use of the Laboratory Information System. Demonstrates ability to enter, review and retrieve data.		
3. Reviews protocol for transfusion reactions workups		
4. Reviews protocol for component preparation and release		
5. Reviews protocol for testing donor blood received from an outside source		
6. Reviews protocol for resolving ABO discrepancies		
7. Observes protocol for inspection and release of blood and components		
8. Observes blood donation		
9. Observes cytophoresis		
COMMENTS:		



1 = None of the Time    2 = Some of the time    3 = Most of the time    4 = All of the time

BLOOD BANK TEST SKILLS		1	2	3	4	EVALUATOR SIGNATURE
1. Disposes of hazardous waste according to protocol						
2. Decontaminates work area and spills according to protocol						
3. Uses gloves appropriately						
4. Labels tubes legibly and accurately						
5. Dispenses reagents according to protocol						
6. Prepares red blood cell suspensions according to protocol						
7. Organizes the workload in appropriate priority order						
8. Records test results accurately and legibly						
<b>ABO/Rh Testing -</b>	<b># of Tests Performed</b>					
1. Performs routine ABO/Rh typing according to protocol - <b>Minimum # of Tests = 25</b>						
2. Interprets results of routine ABO/Rh typing accurately						
3. Interprets results of ABO/Rh typing discrepancies accurately						
4. Performs ABO/Rh testing on samples with discrepancies - <b>Minimum # of Tests = 10 - 25</b>						
List all ABO/Rh discrepancies performed:						
A.						
B.						
C.						
D.						
<b>Antibody Screens - Minimum # of Tests =10- 25</b>						
1. Performs antibody screens according to protocol						
2. Interprets results of negative antibody screens accurately						
3. Interprets results of positive antibody screens accurately						

1 = None of the Time    2 = Some of the time    3 = Most of the time    4 = All of the time

BLOOD BANK TEST SKILLS (Cont'd)		1	2	3	4	EVALUATOR SIGNATURE
<b>Antibody Identification</b>	<b># of tests performed</b>					
1. Performs antibody identification on samples with single antibody according to protocol - minimum # of tests =5 - 10						
2. Performs antibody identification on samples with multiple antibodies according to protocol - minimum # of tests = 5						
1. Plans approach to antibody identification appropriately						
2. Interprets results of antibody panels accurately						
List all antibody specificities identified						
A.						
B.						
C.						
D.						
3. Describes/performs appropriate confirmatory/follow-up tests to be performed						
<b>Crossmatch Testing - Minimum # of Tests = 10-20</b>						
1. Performs crossmatch testing according to protocol						
A. Immediate spin						
B. AHG phase						
C. Computer crossmatch						
2. Interprets results of crossmatch testing accurately						
<b>Direct Antiglobulin Tests - Minimum # of Tests = 10</b>						
1. Performs testing according to protocol						
2. Interprets negative results accurately						
3. Interprets positive results accurately						
4. Recommends/performs appropriate follow-up testing						
<b>Red Blood Cell Phenotyping - Minimum # of Tests = 5</b>						
1. Performs testing according to protocol						
2. Interprets testing results accurately						
3. Selects appropriate controls						
<b>Red Blood Cell Elution Studies - Minimum # of Tests = 2</b>						
1. Performs elution according to protocol						
A. Heat elution						
B. Freeze-thaw elution						
C. Acid elution						
D. Other (Please specify)						
2. Results of testing conform to expectations						
3. Interprets test results accurately						
4. Recommends appropriate follow-up testing						
<b>Donor Blood Testing - Minimum # of Tests = 10 - 20</b>						
1. Performs testing according to protocol						
2. Interprets test results accurately						
<b>Cord Blood Testing - Minimum # of Tests = 5</b>						
1. Performs cord blood testing according to protocol						
2. Interprets results of cord blood testing accurately						
3. Recommends/performs appropriate follow-up testing						

1 = None of the Time    2 = Some of the time    3 = Most of the time    4 = All of the time

BLOOD BANK TEST SKILLS (Cont'd)		1	2	3	4	EVALUATOR SIGNATURE
<b>Fetal Blood Screen Test -</b>	<b># of tests performed</b>					
1. Performs Fetal Bleed test according to protocol - Minimum # of Tests = 5						
2. Interprets test results accurately						
3. Recommends appropriate follow-up testing						
If hospital does not have an OB-GYN unit, has student reviewed the protocol for the fetal-blood test? <input type="checkbox"/> Yes <input type="checkbox"/> No						
COMMENTS:						

80

AFFECTIVE SKILLS	1	2	3	4	EVALUATOR SIGNATURE
1. Arrives at the laboratory at the designated time					
2. Wears the required uniform					
3. Presents a neat and clean professional appearance					
4. Begins work promptly on arrival					
5. Completes all assigned work					
6. When confronted with an error, understands the error, repeats the test and avoids making the same error again.					
7. Makes optimum use of available time by seeking assignments, offering assistance to others and reading relevant instructional aids					
8. Accepts criticism without resentment and attempts to improve					
9. Is respectful of others' feelings					
10. Exhibits a genuine interest in clinical laboratory sciences					
11. Adheres to the concept of patient confidentiality					
COMMENTS:					

## NOTE: MID-ROTATION PERFORMANCE

A mid-rotation performance evaluation has been included in order to allow the student to recognize and improve on laboratory tests before the student's rotation is finished. Please indicate below, and inform the student of any area he/she may need to improve.

LABORATORY TEST(S) NEEDING IMPROVEMENT: (Please indicate date of comment)

LABORATORY TEST(S) - PROGRESS REPORT: (Please indicate date of comment)

Signature of Person

Completing Form:\_\_\_\_\_ Title:\_\_\_\_\_ Date:\_\_\_\_\_

Student Signature:\_\_\_\_\_ Date:\_\_\_\_\_