March 18, 2011

Mr. Daniel Tice  
Staff Program Coordinator  
NAACLS  
5600 N. River Road, Suite 720  
Rosemont, IL 60018

Dear Mr. Tice,

Phillips Community College of the University of Arkansas is seeking continued approval of our Phlebotomy Program. Enclosed are 3 copies of the Self-Study Report. Included in each Self-Study Report binder is a copy of the 2010-2011 PCCUA College Catalog, Phlebotomy Student Handbook, and program brochure for review.

You may contact me at 870-338-6474, extension 1079 should you need additional information.

Sincerely,

Claude Rector, MA, MLS(ASCP)CM  
Program Director

Cc:  Dr. Steven Murray, PCCUA Chancellor  
     Dr. Deborah King, PCCUA Vice Chancellor for Instruction  
     Dean Amy Hudson, PCCUA Dean of Allied Health
Phillips Community College
of the
University of Arkansas

Phlebotomy Program
Self Study
March 2011
Table of Contents

Sponsoring Institution program Fact Sheet......................................................................................... 1
Brief Description of the Program........................................................................................................... 2

**Standard 1, Institutional Affiliation**
- NCA Accreditation Renewal Letter.................................................................................................. 4
- Clinical Facility Fact Sheets (and facility information, pertaining to capital equipment,
  Periodicals, instructional resources, rules and policies)....................................................................... 9
- Sample Affiliation Agreement........................................................................................................... 11

**Standard 2, Acceptable Institutions................................................................................................ 43
- Organizational Chart......................................................................................................................... 44

**Standard 3, Sponsoring Institution’s Responsibilities....................................................................... 45
- Granting of Degrees............................................................................................................................. 46
- Sample Communication with Education Coordinators and Affiliates.................................................. 48

**Standard 4, General Resources**
- Admission Rates, Admission Dates and Instructor-to-Student Ratios.................................................. 52

**Standard 5, Financial Resources.................................................................................................... 53
- Budget Statements................................................................................................................................. 54

**Standard 6, Physical Resources...................................................................................................... 61
A. Facilities
B. Equipment and Supplies
C. Required Textbooks, Sample of Periodicals and References
D. Instructional Resources
E. Computer Technology

**Standard 7, Program Description/Publications................................................................................ 66

**Standard 8, Admissions.................................................................................................................... 68
- Application for Admissions Form
- Published Admissions Policies
- Progression Policy and Essential Functions

**Standard 9, Acceptable Conduct..................................................................................................... 80
- Policies governing Acceptable Conduct and Academic Integrity

**Standard 10, Student Records.......................................................................................................... 88

**Standard 11, Health and Safety........................................................................................................ 89

**Standard 12, Guidance..................................................................................................................... 103
<table>
<thead>
<tr>
<th>Standard</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Appeal Procedures</td>
<td>104</td>
</tr>
<tr>
<td>14</td>
<td>Fair Practices</td>
<td>105</td>
</tr>
<tr>
<td>A</td>
<td>Programmatic announcements</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>Non-discrimination statement regarding students</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>Non-discrimination statement regarding faculty</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>Publications addressing academic credits and cost</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>Withdrawal and refund policies</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>Levels of CLS curriculum</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>Issuing of the degree</td>
<td></td>
</tr>
<tr>
<td>H</td>
<td>Policy relating to student complaints</td>
<td></td>
</tr>
<tr>
<td>I</td>
<td>Evaluation, placement and certification information</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Systematic Review</td>
<td>124</td>
</tr>
<tr>
<td></td>
<td>Assessment Mechanisms</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Outcome Measures</td>
<td>135</td>
</tr>
<tr>
<td></td>
<td>ASCP Examination</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Graduation and Placement Rates</td>
<td>144</td>
</tr>
<tr>
<td>18</td>
<td>Program Evaluation and Modification</td>
<td>152</td>
</tr>
<tr>
<td>19</td>
<td>Program/Sponsoring Institution Responsibilities</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Program Director</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Program Director’s Faculty Fact Sheet</td>
<td>171</td>
</tr>
<tr>
<td></td>
<td>Position Description</td>
<td></td>
</tr>
<tr>
<td></td>
<td>curriculum vitae</td>
<td>174</td>
</tr>
<tr>
<td></td>
<td>NACCLS Approval Date</td>
<td>175</td>
</tr>
<tr>
<td></td>
<td>Faculty Appointment</td>
<td>177</td>
</tr>
<tr>
<td></td>
<td>Faculty Fact Sheets and Professional Development Activities</td>
<td>181</td>
</tr>
<tr>
<td>21</td>
<td>Faculty</td>
<td>182</td>
</tr>
<tr>
<td></td>
<td>Faculty Fact Sheets and Professional Development Activities</td>
<td>186</td>
</tr>
<tr>
<td>22A</td>
<td>Curricular Structure</td>
<td>194</td>
</tr>
<tr>
<td></td>
<td>Sequence of Courses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Program Goals</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Program Competencies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sample Unit of Instruction</td>
<td></td>
</tr>
<tr>
<td>22B</td>
<td>Instructional Areas</td>
<td>268</td>
</tr>
<tr>
<td></td>
<td>Course Descriptions</td>
<td></td>
</tr>
<tr>
<td>22C</td>
<td>Learning Experiences</td>
<td>269</td>
</tr>
</tbody>
</table>
Standard 22D, Evaluations

Program Progression Policy
Evaluation Systems for One Sample Unit of Instruction
Sponsoring Institution

Program Fact Sheet

Program Level: PHLE-TC

Institution: Phillips Community College of the University of Arkansas

Address: 1000 Campus Drive  (P.O. Box 785)

City, State, Zip: Helena-West Helena, Arkansas 72342

Email: crector@pccua.edu  Program URL: www.pccua.edu/alliedhealth

Agencies that accredit the institution:  North Central Association of Colleges and Secondary Schools

Arkansas Department of Higher Education

Administrative officer of the organizational unit in which the program is located:

Name: Dr. Steven Murray  Title: Chancellor

Name: Dr. Deborah King  Title: Vice Chancellor for Instruction

Name: Amy Hudson  Title: Dean of Allied Health

Program Director: Claude Rector  Credentials: MA, MLS(ASCP)CM

Medical Director: Dr. John Brineman  Credentials: MD, Pathology

Number of students per class: Ten (10)  Number of classes: Two (2) per year

List academic and/or clinical affiliate(s):

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>CITY/STATE</th>
<th>ACCREDITED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helena Regional Medical Center</td>
<td>Helena-West Helena, AR</td>
<td>JCAHO</td>
</tr>
<tr>
<td>Norwest Mississippi Regional Medical Center</td>
<td>Clarksdale, MS</td>
<td>JCAHO</td>
</tr>
<tr>
<td>Baptist Health Medical Center-Stuttgart</td>
<td>Stuttgart, AR</td>
<td>CLIA, State of Arkansas</td>
</tr>
<tr>
<td>DeWitt Hospital &amp; Nursing Home</td>
<td>DeWitt, AR</td>
<td>CLIA, State of Arkansas</td>
</tr>
</tbody>
</table>
Phlebotomy Program Mission Statement

The Phlebotomy Program within the Division of Allied Health is dedicated to providing students with the appropriate education necessary for the development of entry-level competencies phlebotomy. Graduates of the Phlebotomy Program will be prepared to sit for entry-level national certification examinations in the discipline and will be prepared to practice as ethical and competent professionals.

Description of the Program

Phillips Community College of the University of Arkansas is located in Helena-West Helena, Arkansas. PCCUA has three campuses located in DeWitt, Stuttgart, and Helena-West Helena. The Helena-West Helena campus is the location for the Medical Laboratory Technology Program.

Phillips Community College (PCCC) was established in 1965 through Act 560 of the Arkansas Legislature and an affirmative vote that same year by Phillips County residents to provide financial support for the college. The first class was admitted to the Helena-West Helena (HWH) campus in September of 1966. Since its inception, the college has increased its curriculum and facilities, recruiting students from surrounding counties in Arkansas and Mississippi. In March of 1996, Arkansas County was annexed into the PCCC taxing district by referendum. The Board of Trustees changed the name of the college to Phillips Community College (PCC) to recognize multi-county support. At the same time, plans were being made to send off-campus programs to Stuttgart. In June of 1996, Rice Belt Technical Institute in DeWitt, AR was transferred by the state to PCC. On July 1st of that same year, PCC joined the University of Arkansas System. Thus, the name of the college was changed to Phillips Community College of the University of Arkansas to denote this relationship.

The main campus in HWH includes the Fine Arts Center and Lily Peter Auditorium, the Easley Administration, Nursing/Mitchell Science Annex, Lewis Library, Arts and Sciences, Gymnasium/Fitness Center, Bonner Student Center, Adult Education, Maintenance, and Industrial Education buildings. These facilities serve students and have the technical capabilities to allow educational as well as technical programs and courses to be sent via on-line or compressed video instruction to distance sites. The college’s historic Pillow Thompson House is located a short distance from the main campus and is used for college and community activities.

Shortly after acquisition, the DeWitt campus facility was renovated to double the floor space. This facility currently houses traditional and distance learning classrooms, computer labs, a library, and student center. The National Guard Armory in DeWitt is houses the agricultural program.

The Stuttgart campus facility houses traditional and distance learning classrooms, science and computer labs, library and student center. In 2003, the college entered into a long-term lease agreement with Grand Prairie War Memorial Auditorium Board to use the auditorium as a technical training center. In May of 2008, this structure was severely damaged by a tornado and is currently being repaired. Recently, the Stuttgart Council of the Phillips College Foundation raised monies to build a Grand Prairie Center which will be located on the Stuttgart campus. This center will host college and community events.

Full- and part-time enrollment on all three campuses in fall 2008 was approximately 2,400 students. The college is an open-door, nonresidential, public institution offering academic, occupational/technical, community service, and continuing education programs reflecting the needs of the communities served.
The history of phlebotomy education at PCCUA began in 1991, when a need was expressed by Helena Regional Medical Center for educated phlebotomist. Initial approval of the phlebotomy program was granted in 1992 by NAACLS. The program is under the Allied Health Division at PCCUA. The Allied Health Division offers educational opportunities for students in the allied health professions to prepare them as graduates to assume professional roles. The Division of Allied Health is comprised of seven programs. The Phlebotomy Program has a full-time Program Director and one additional full-time faculty position. In addition, each clinical affiliate has a clinical education coordinator. The education coordinators are employees of the affiliated hospitals.

Until 1999, the phlebotomy program at PCCUA was a 12 credit hour, non-degree, certificate program with three courses required which were all in phlebotomy. In an effort to meet the new skills and increasing requirements of phlebotomist and their duties in the central processing area of the laboratory, the phlebotomy faculty, with input from the area hospital laboratory managers, added an additional semester to the phlebotomy curriculum. Computer and communication skills were added along with medical terminology, basic anatomy, and math skills. With these additional requirements added to the phlebotomy program in 1999, PCCUA applied to the Arkansas Department of Higher Education and received approval to offer a Technical Certificate degree program in Phlebotomy. The program is limited to ten students per class with a new class beginning each fall and spring semester. Prior to enrollment in the professional program, students must have a high school diploma or equivalent, 18 years old, and acceptable pre-admission test scores.
Standard 1
Standard 1. Institutional Affiliation

The sponsoring institution (or at least one participating entity in the case of a consortium or joint venture) and affiliates, clinical and/or academic, if any, must be accredited by recognized regional and/or national agencies.

In programs in which the education is provided by two or more institutions, responsibilities of the sponsoring institution and each affiliate for program administration, instruction, and supervision must be described in writing and signed by both parties. All provisions of the agreement must be active with written documentation of the following items:

A. General

1. Reason for the agreement
2. Responsibilities of the academic faculty
3. Responsibilities of the clinical faculty
4. Joint Responsibilities

B. Specific

1. Supervisory responsibilities for the students
2. Student professional liability coverage
3. Student health and safety policies
4. Provision for renewal
5. Termination clause providing for program completion of enrolled students

Response to Standard 1:

Phillips Community College of the University of Arkansas (PCCUA) is the sponsoring institution for the Phlebotomy Program. PCCUA maintains accreditation through the Higher Learning Commission of the North Central Association of Colleges and Schools (NCA). A copy of the letter of accreditation renewal from NCA is provided.

The Phlebotomy Program is located within the PCCUA Division of Allied Health and utilizes the following accredited affiliates to provide clinical instruction:

<table>
<thead>
<tr>
<th>Affiliate</th>
<th>Location</th>
<th>Accredited by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helena Regional Medical Center</td>
<td>Helena-West Helena, AR</td>
<td>JCAHO</td>
</tr>
<tr>
<td>Northwest Mississippi Regional Medical Center</td>
<td>Clarksdale, MS</td>
<td>JCAHO</td>
</tr>
<tr>
<td>Baptist Health Medical Center- Stuttgart</td>
<td>Stuttgart, AR</td>
<td>CLIA, State of Arkansas</td>
</tr>
<tr>
<td>DeWitt Hospital and Nursing Home</td>
<td>DeWitt, AR</td>
<td>CLIA, State of Arkansas</td>
</tr>
</tbody>
</table>
STATEMENT OF AFFILIATION STATUS

PHILLIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS
Box 785 1000 Campus Drive
Helena, AR 72342

Affiliation Status: Candidate: 1970*
Accreditation: (1972- )

PEAQ PARTICIPANT

Nature of Organization
Public
K-

Degrees Awarded:

Conditions of Affiliation:
None.

Stipulations on Affiliation Status:
Prior Commission approval required.

Approval of New Degree Sites:
Prior Commission approval required for additional degrees beyond those offered through the consortium of three institutions: University of Arkansas Community College at Hope, the University of Arkansas Community College at Batesville, and Phillips Community College at the University of Arkansas.

Reports Required:
Progress Report: 02/01/2008; A report on planning processes.

Other Visits Scheduled:
None.

Summary of Commission Review

Year of Last Comprehensive Evaluation: 2004 - 2005

Date of Last Action: 02/15/2005
February 18, 2008

Dr. Steven F. Murray  
Chancellor  
Phillips Community College of The University of Arkansas  
Box 785  
1000 Campus Drive  
Helena, AR 72342

Dear Chancellor Murray:

The progress report you submitted to our office has now been reviewed. A staff analysis of the report is enclosed.

On behalf of the Commission, I accept the report on planning processes. No further reports are required. The institution's next comprehensive evaluation is scheduled for 2014.

I am also enclosing a copy of the institution's Statement of Affiliation Status, which reflects the actions I have taken on behalf of the Commission. If you have any questions about this analysis or any other evaluation matters, please let me know. I can be reached via email at jtaylor@ncahlc.org or by voice at (800) 621-7440 x 104.

Sincerely,

[Signature]

John A. Taylor, D.Mus.Ed.  
Director, Program to Evaluate and Advance Quality

Enclosures
STAFF ANALYSIS OF INSTITUTIONAL REPORT

DATE: February 18, 2008
STAFF: John A. Taylor
REVIEWED BY: Katherine C. Delaney

INSTITUTION: Phillips Community College of The University of Arkansas, Helena, AR

EXECUTIVE OFFICER: Steven F. Murray, Chancellor

PREVIOUS COMMISSION ACTION RE: REPORT: A progress report due on 2/01/08 focused on planning processes.

ITEMS ADDRESSED IN REPORT: The office of the Commission received Phillips Community College of The University of Arkansas's report on the above topic on 2/4/08.

STAFF ANALYSIS: Phillips Community College of The University of Arkansas presented a very rich progress report on planning at the College. The years since the last comprehensive visit in the fall 2004 have been productive ones for the College in terms of planning.

The progress report documented at least three very productive planning initiatives at the College:

- **Vital Focus**: This planning initiative started in preparation for the comprehensive visit in 2004 and continued beyond. From conversations throughout the College community, three planning foci were identified: communication, recruitment and retention. The institutional plan is organized around these three overriding planning priorities for the College.

- **Foundations of Excellence**: The Winthrop Rockefeller Foundation sponsored the foundations of Excellence (FoE) in Arkansas. PPUAR was invited to participate in this program for change, which includes an institutionally driven self-study, and improvement plan focused on the experiences of the first year student. The College’s involvement in this program has resulted in an enrollment management plan, increased campus-wide awareness of the importance of the first year
experience, a greater interest in student success, and improved collaboration among academic services and student service.

- Achieving the Dream: In the spring of 2007, the College applied for and received a five-year grant for Achieving the Dream. This initiative, based on a program of the Lumina Foundation, is also sponsored by the Winthrop Rockefeller Foundation. The $50,000 planning grant for the first year will enable the College to complete the planning and prioritizing work of FoE and provide funding in years two through five to implement the planning initiatives.

In addition, the progress report outlined the College's involvement with the community in planning, as well as the community's involvement in the College's planning activities.

On a three-year cycle, the College will conduct a Community Conversation similar to that of the Achieving the Dream initiative and a College Conversation much like the Conversation Days of Vital Focus. Strategic goals and objectives will be developed from these conversations.

Appended to the report was the Institutional Plan, which included the three foci of Vital Focus and supporting plans from the Assessment, Enrollment, Business & Industry, Distance Learning, Instructional & Curriculum, Resource Development, Technology and Web Advisory committees. It is a very thorough, detailed and realistic institutional plan.

The overall Technology Plan was also appended to the report, as was the Facilities Master Plan for the College's three campuses.

This was an impressive progress report on planning that documented sound and innovative planning processes, focused and credible planning documents, and broad outreach of the College through its planning functions. The College is commended for its remarkably effective planning processes and documents.

STAFF ACTION: Accept the report focused on planning processes. No further reports are required. The institution's next comprehensive evaluation is scheduled for 2014-2015.
Clinical Facility
Phlebotomy Fact Sheet

Institution: Helena Regional Medical Center

Address: 1801 Martin Luther King, Jr. Drive

City, State, Zip Code: Helena-West Helena, AR 72342

Telephone: (870) 816-3840  Fax: (870) 338-3768

# of Beds: 150  # of Bassinets: 13  # of Annual Admissions: 3600  # of Out Patients: 18000

Accredited by: JCAHO

Clinical Coordinator or Contact Person at site: Deborah Fields, MS, BSMT(ASCP)®

Clinical Laboratory Volume (specify annual number of procedures):

265,000/yr

Phlebotomies per year: 30000  Total space of the laboratory: 3700 sq ft

<table>
<thead>
<tr>
<th>TYPE OF SITE</th>
<th>NUMBER USED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Collection</td>
<td>0</td>
</tr>
<tr>
<td>Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient / Drawing Stations</td>
<td>2</td>
</tr>
<tr>
<td>Outpatient Clinic</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of sites used by students: 4

Number of students in clinical experience assignments: 0-4

Laboratory staff (convert part-time to full-time equivalent):

<table>
<thead>
<tr>
<th></th>
<th>NUMBER BUDGETED</th>
<th>NUMBER EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathologists</td>
<td></td>
<td>0 *Pathologist Consultant</td>
</tr>
<tr>
<td>Phlebotomists</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Technologist (baccalaureate)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Technician (AD or certificate)</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>
Helena Regional Medical Center

Helena-West Helena, AR

Capital Equipment Utilized for Phlebotomy Student Instruction

- Biosite Triage Meter Plus
- Roche Accuchek
- Clintek 100

Facility Specific Required Textbooks

N/A

Access to Periodicals

Medical Laboratory Observer, ASCP Lab Medicine, CAP Today, Advance for MLP

Instructional Resources

- Lab section policy and procedure manuals
- CLSI manuals
- Blood Collection DVDs
- Laboratory Textbooks located in each section of lab

Objectives and Evaluations Utilized Exclusively by the Facility

N/A

Rules and Policies Unique to the Facility

HR student orientation and Laboratory safety orientation required
May 4, 2010

Helena Regional Medical Center  
Jim Sato  
PO Box 788  
Helena-West Helena, AR 72342

Re: Educational Affiliation Agreement between Phillips Community College of the University of Arkansas ("Institution") and Helena Regional Medical Center ("Agency") dated May 4, 2010 ("Agreement").

MLT and PLB Contract

Dear Mr. Sato:

Our current Agreement between Helena Regional Medical Center and Phillips Community College of the University of Arkansas expires June 30, 2010. As a continuation of our mutual cooperation, we would like to renew this Agreement, under the same terms and conditions currently existing in the Agreement.

This letter therefore serves as written agreement between the parties to renew the Agreement for a one (1) year term, beginning July 1, 2010 and ending June 30, 2011.

If this renewal to the Agreement is acceptable to you, please sign and return an original of this document.

Accepted by:


Dr. Steven Murray  
Chancellor

Amy Hudson, RN, MSN  
Dean of Allied Health
AGREEMENT BY AND BETWEEN
HELENA REGIONAL MEDICAL CENTER AND PHILLIPS COMMUNITY COLLEGE OF
THE UNIVERSITY OF ARKANSAS

WITNESSETH

This MEMORANDUM OF AGREEMENT is entered into by and between Helena Regional Medical Center, Helena, AR (hereinafter referred to as “Hospital”) and Phillips Community College of the University of Arkansas, Helena, AR (hereinafter referred to as “SCHOOL”).

WHEREAS, Phillips Community College of the University of Arkansas desires to provide its Medical Laboratory Technology and Phlebotomy students (hereinafter referred to as “STUDENTS”) with clinical training available at Hospital; and

WHEREAS, HOSPITAL is an acute care hospital duly licensed in the state of Arkansas;

NOW, THEREFORE, in consideration of the promises herein contained and for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

I. RESPONSIBILITIES OF THE PARTIES

A. PARTIES JOINTLY AGREE

The term of the training will be Monday through Friday, June 1, 2006 through June 30, 2008; however, extensions to the training period can be approved by the Chancellor at SCHOOL and the Chief Executive Officer at HOSPITAL.

The clinical rotations shall be provided at the HOSPITAL’S facilities located at 1801 Martin Luther King Drive, Helena, AR 72342.

Consideration for this agreement shall consist of the mutual promises contained herein, the parties agreeing that monetary compensation shall neither be expected nor received by either party.

B. SCHOOL’S RESPONSIBILITIES:

1. Be responsible, in coordination with HOSPITAL, for the assignment of STUDENTS and the planning of the program. Students assigned shall only be those who meet the criteria for eligibility as established by the SCHOOL and approved by HOSPITAL, and no student shall be assigned to HOSPITAL without prior consent of SCHOOL.

2. To inform STUDENTS that they will be expected to comply with the rules and regulations of HOSPITAL, including, but not limited to the use of personal protective equipment, the rules...
of patient confidentiality, and the procedures relating to medical record documentation. Education and training relating to these specific policies and procedures shall be provided to STUDENTS prior to their clinical rotation at HOSPITAL, as well as any other HOSPITAL specific policies and procedures deemed appropriate and necessary by SCHOOL and/or HOSPITAL.

3. To require address code of STUDENTS which meets the standards of the dress code of HOSPITAL and which clearly identifies the STUDENTS as students (not licensed personnel) and as students of SCHOOL (not as agents or affiliates of HOSPITAL).

4. Requires of STUDENTS prior to coming to HOSPITAL, to:
   a. Provide written evidence of either a negative TB skin test within the past one-year, or a chest x-ray within three years, in the event of a positive TB skin test.
   b. Provide written documentation of completed series of Hepatitis B vaccine or provide documentation of having begun the series, or documentation of informed refusal of the vaccine.
   c. In the event of STUDENT rotation through the maternal and child care departments/services, provide evidence of any other appropriate immunizations or immunities requested by HOSPITAL.

5. To require staff from SCHOOL who practices at HOSPITAL that they must also meet the requirements for STUDENTS outlined in section I. B. 4 above.

6. To educate and train STUDENTS in OSHA blood borne pathogens standards and tuberculosis prior to their clinical rotation at HOSPITAL.

7. To schedule STUDENTS and appropriate SCHOOL staff for training at HOSPITAL on HOSPITAL'S fire and emergency response plans.

8. To require STUDENTS and SCHOOL staff not to submit for publication any material relating to the clinical education experience at HOSPITAL without prior written approval of HOSPITAL.

9. To provide contact person and liaison between HOSPITAL and SCHOOL, who shall be responsible for the oversight of the STUDENTS' clinical experiences.
10. To, upon request by the HOSPITAL, remove immediately from the premises any STUDENT who in the opinion of HOSPITAL poses a threat or danger to the health and well-being of any person, or who violates HOSPITAL rules, regulations, policy or procedure.

11. To have in place a mechanism to notify the HOSPITAL if a STUDENT (or faculty, if applicable) is unable for any reason to report for training.

12. As a condition of referring any STUDENT of SCHOOL to HOSPITAL to provide services to HOSPITAL, SCHOOL agrees to not refer any STUDENT to HOSPITAL to provide services to HOSPITAL until it requires STUDENT to undergo a substance abuse test to test STUDENT for the presence of alcohol, drugs, or controlled substances, except to the extent prohibited by law. If such test (including any re-tests) reveals that STUDENT is currently engaging in the illegal use of drugs, is otherwise impaired and unable to perform one or more essential functions of his or her job (as jointly defined by SCHOOL and HOSPITAL) with or without any reasonable accommodation as may be required by law, or poses a direct threat to the health or safety of STUDENT or others, SCHOOL agrees not to refer such STUDENT to HOSPITAL to provide services to HOSPITAL. SCHOOL further agrees not to refer HOSPITAL any student who SCHOOL knows or has reason to know has within the past twenty-four months illegally used, manufactured, distributed, dispensed, possessed, purchased or been under the influence of drugs (excluding STUDENT who is participating in or has successfully completed a supervised drug rehabilitation program or has otherwise been successfully rehabilitated and no longer engaging in such use); or poses a direct threat to the health or safety of STUDENT or others. SCHOOL agrees to use the services of a licensed health care professional and laboratory in conducting the substance abuse test and to obtain the consent and waiver of liability of STUDENT to any such testing. The SCHOOL agrees and represents that such tests will be conducted in accordance with the Americans with Disabilities Act, to the extent required, and other applicable laws.

C. RESPONSIBILITIES OF HOSPITAL:

1. To accept and provide clinical experiences to STUDENTS from SCHOOL. However, HOSPITAL shall be under no obligation to accept any student or students unless mutually agreed upon by SCHOOL and HOSPITAL.
2. To maintain a sufficient number of staff support to carry out normal service functions, so STUDENTS will not be performing in lieu of staff.

3. To provide orientation to STUDENTS assigned to HOSPITAL to include, but not limited to, personal protective equipment availability and use, and the fire and emergency response plans.

4. To provide first aid for work-related accidents and illnesses, such as blood and body fluid exposures, to STUDENTS. The charges for such medical services shall be billed to the STUDENT or his/her insurance carrier. HOSPITAL assumes no responsibility, financial or otherwise, beyond the initial first aid provided immediately after the injury, and any services or other liability shall not be borne by HOSPITAL, but shall be the responsibility of the individual, financial or otherwise, beyond the initial first aid provided immediately after the injury, and any services or other liability shall not be borne by HOSPITAL, but shall be the responsibility of the individual STUDENT regardless of whether these services are covered by the STUDENT'S insurance. In the event the accident is a blood borne pathogen (BBP) or other potentially infectious materials (OPIM) exposure, the agency will provide at no cost to the STUDENT the initial testing on the Source as outlined in OSHA standards.

5. To designate a staff member to serve as a contact person for the SCHOOL staff assigned to oversee and supervise the STUDENTS. The HOSPITAL’S Laboratory Manager shall be the liaison between HOSPITAL and SCHOOL.

6. To provide a reasonable amount of storage space for apparel and personal effects of participating students, and reasonable classroom or conference room space at HOSPITAL for use in the program.

7. HOSPITAL shall have the right to discuss any incident, occurrence, or investigation with STUDENTS from SCHOOL that may arise out of or as a result of the training of said students at HOSPITAL, and the students will cooperate with HOSPITAL and SCHOOL in said investigation.

II. TERM AND TERMINATION

A. This Agreement shall be effective upon execution by HOSPITAL AND SCHOOL and may be renewed on an annual basis upon mutual agreement of the parties.

B. Notwithstanding any other terms and conditions hereunder, this Agreement may be terminated without cause by either party by written notification to the other party at least thirty (30) days prior to the desired effective date of termination. In this case, the terms of the
Agreement shall continue to be in full force and effect until STUDENTS enrolled in current program complete said program.

C. In the event that either party shall become insolvent, make a general assignment for the benefit of creditors, suffer or permit the appointment of a receiver for its business or its assets or shall avail itself of, or become subject to, any proceeding under the Federal Bankruptcy Act or any other statute of any state relating to insolvency or the protection of rights of collectors, then, at the option of either party, this Agreement may be terminated immediately by either party and be of no further force and effect.

III. INSURANCE

A. SCHOOL shall provide evidence that health insurance is in effect for STUDENTS during the term of their clinical rotation at HOSPITAL.

B. The SCHOOL is self-insured for Worker’s Compensation purposes. Worker’s compensation claims are handled by the Public Employees Claims System.

C. The SCHOOL shall require all participating STUDENTS, clinical instructors, faculty and other personnel of SCHOOL to maintain and provide proof of professional liability insurance in the amount of $1 million per occurrence/$3 million aggregate of the occurrence type of coverage.

D. HOSPITAL shall be notified in writing within 15 days of any material alteration, cancellation, or nonrenewal of coverage. Inadequate insurance or proof of insurance shall be grounds for immediate termination of this Agreement. Insurance shall be provided by a carrier who is acceptable to HOSPITAL, which acceptance shall not be unreasonably withheld.

IV. NOTIFICATION OF CLAIMS

A. It is hereby stipulated and agreed between HOSPITAL AND SCHOOL that with respect to any claim or action arising out of any activities performed under or pursuant to this Agreement, each entity shall be liable for payment of that portion of any and all claims, liability, costs, expenses, demands, settlements, or judgments resulting from the negligence, actions or omissions of itself or its own directors, representatives, and employees.

B. “Under Arkansas law, the SCHOOL may not enter into a covenant or agreement to hold a party harmless or to indemnify a party from prospective damages. However, with respect to liability, loss, damage, claims, causes of action, demands or expenses, either at law or in
equity, for actual or alleged injuries to persons or property arising out of any negligent act or omission by an agent, representative, student or employee of SCHOOL, SCHOOL agrees with the HOSPITAL that: (a) it will cooperate with the HOSPITAL in the defense of any action or claim brought against the HOSPITAL seeking the foregoing damages or relief; (b) it will in good faith cooperate with the HOSPITAL should the HOSPITAL present any claims of the foregoing nature against the SCHOOL before the Arkansas State Claims Commission; (c) it will not take any action to frustrate or delay the prompt hearing of claims of the foregoing nature by the Arkansas State Claims Commission and will make reasonable efforts to expedite said hearing; provided, however, the SCHOOL reserves its right to assert in good faith all claims and defenses available to it in any proceedings before the Arkansas State Claims Commission or other appropriate forum. The obligations of this paragraph shall survive the expiration or termination of this Agreement.

C. HOSPITAL agrees to indemnify, hold harmless, and defend the SCHOOL from and against any and all claims, demands, actions, settlements, costs, damages, or judgments, including reasonable attorney's fees and litigation expenses, based upon or arising out of the activities described in this Agreement, where such claims, demands, actions, settlements, costs, damages, or judgments related to the negligence, actions, omissions of HOSPITAL or its representatives, or employees. HOSPITAL also agrees that the provisions of this section shall survive the termination of this Agreement.

D. The parties agree to notify each other as soon as possible in writing of any incident, occurrence, or claim arising out of or in connection with this Agreement, which could result in a liability or claim of liability to the other party. Either party shall have the right to investigate any incident or occurrence and that the parties shall cooperate fully in any such investigation.

V. CONFIDENTIALITY

A. The SCHOOL, its students, employees, agents and representatives agree to keep confidential from third parties all information which relates to or identifies a particular patient, including, but not limited to name, address, medical treatment or condition, financial status, or any other personal information which is deemed to be confidential in accordance with applicable state and federal law and standards of professional ethics.

B. All patient records shall remain the property of the HOSPITAL. Retention and release shall be in accordance with applicable regulations, policies and procedures. Access and use of patient information is restricted to only what is necessary to provide the services so noted herein.
C. HIPAA

VI. NOTICES

All notices or other communications provided for in this Agreement shall be given to the parties addressed as follows:

SCHOOL: Dr. Steven Murray
Chancellor
Phillips Community College of the University of Arkansas
PO Box 785
Helena, AR 72342

HOSPITAL: Tom Fewell
Chief Executive Officer
Helena Regional Medical Center
PO Box 788
Helena, AR 72342

VII. ASSIGNMENT OF CONTRACT AND BINDING EFFECT

Neither party shall assign, subcontract, or transfer any of its rights or obligations under this Agreement to a third party without prior written consent of the other party. If there is a valid assignment, subcontract or transfer, this Agreement shall be binding upon and inure to the benefit of the parties hereto and their respective successors and assigns.

VIII. DISCRIMINATION

In compliance with federal law, including the provisions of the Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination in Employment Act of 1967 and the Americans with Disabilities Act of 1990, each party hereto will not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability, or military service in its administration of its policies, including admissions policies, employment, programs or activities.

IX. INDEPENDENT CONTRACTOR STATUS

Each party shall be considered to be an independent party and shall not be construed to be an agent or representative of the other party, and therefore, has no liability for the acts or omissions of the other party. In addition, neither party, nor any of its employees, agents, or subcontractors, shall be deemed to be employees or agents of the other party. Therefore, neither party nor any of its employees, agents or subcontractors, shall be entitled to compensation, worker's compensation, or employee benefits of the other party by virtue of this Agreement.
X. COUNTERPART SIGNATURE

This Agreement may be executed in one or more counterparts (facsimile
transmission or otherwise), each counterpart shall be deemed an original and
all of which shall constitute but one Agreement.

XI. WRITTEN AMENDMENTS

This Agreement cannot be amended, modified, supplemented or rescinded
except in writing signed by the parties hereto. No waiver of any provision of
this Agreement shall be valid unless such waiver is in writing signed by both
parties.

XII. GOVERNING LAW AND JURISDICTION

This Agreement shall be governed in all respects by, and be construed in
accordance with, the laws of the state of Arkansas, and the County of Phillips.

XIII. HEADINGS NOT BINDING

The headings used in this Agreement have been prepared for the convenience
of reference only and shall not control, affect the meaning of, or be taken as an
interpretation of any provisions of this Agreement.

XIV. NON-EXCLUSIVITY

Each party shall have the right to enter into similar agreements with other
parties.

XV. SEVERABILITY

If any part of this agreement should be held to be void or unenforceable, such
part shall be treated as severable, leaving valid the remainder of this
Agreement notwithstanding the part of parts found void or unenforceable.

XVI. ENTIRE AGREEMENT

This Agreement constitutes the entire agreement between the parties hereto
with respect to the subject matter herein and supersedes any other
agreements, restrictions, representations, or warranties, if any, between the
parties hereto with regard to the subject matter herein.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be
executed by their duly authorized representatives on the last signature date
below.
Clinical Facility
Phlebotomy Fact Sheet

Institution: Northwest Mississippi Regional Medical Center

Address: 1970 Hospital Drive

City, State, Zip Code: Clarksdale, MS 38614

Telephone: (662) 627-3211 Fax: (662) 627-5440

# of Beds: 194 # of Bassinets: 23 # of Annual Admissions: 7000 # of Out Patients: 45,000

Accredited by: JCAHO

Clinical Coordinator or Contact Person at site: Ginger Coats, MT(ASCP)

Clinical Laboratory Volume (specify annual number of procedures):

250,000/yr

Phlebotomies per year: 42,000 Total space of the laboratory: 6000 sq ft

<table>
<thead>
<tr>
<th>TYPE OF SITE</th>
<th>NUMBER USED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Collection</td>
<td>0</td>
</tr>
<tr>
<td>Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>0</td>
</tr>
<tr>
<td>Outpatient / Drawing Stations</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient Clinic</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of sites used by students: 3

Number of students in clinical experience assignments: 0-4

Laboratory staff (convert part-time to full-time equivalent):

<table>
<thead>
<tr>
<th></th>
<th>NUMBER BUDGETED</th>
<th>NUMBER EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathologists</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Phlebotomists</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Technologist (baccalaureate)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Technician (AD or certificate)</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

20
Northwest Mississippi Regional Medical Center

Clarksdale, MS

Facility Specific Required Textbooks
N/A

Access to Periodicals
N/A

Instructional Resources
- Lab section policy and procedure manuals
- CLSI manuals
- Blood Collection DVDs
- Laboratory Textbooks located in each section of lab
- Access to internet

Objectives and Evaluations Utilized Exclusively by the Facility
N/A

Rules and Policies Unique to the Facility
N/A
May 4, 2010

Northwest Mississippi Regional Medical Center
Formerly Northwest Regional Medical Center
Jack Hill
PO Box 1218
Clarksdale, MS 38614

Re: Educational Affiliation Agreement between Phillips Community College of the
University of Arkansas ("Institution") and Northwest Mississippi Regional Medical
Center formerly Northwest Regional Medical Center ("Agency") dated May 4, 2010
("Agreement").

MLT and PLB Contract

Dear Mr. Hill:

Our current Agreement between Northwest Mississippi Regional Medical Center
formerly Northwest Regional Medical Center and Phillips Community College of the
University of Arkansas expires June 30, 2010. As a continuation of our mutual
coopration, we would like to renew this Agreement, under the same terms and
conditions currently existing in the Agreement.

This letter therefore serves as written agreement between the parties to renew the
Agreement for a one (1) year term, beginning July 1, 2010 and ending June 30, 2011.

If this renewal to the Agreement is acceptable to you, please sign and return an original
of this document.

Accepted by:

[Signature]

[Title]

Dr. Steven Murray
Chancellor

Amy Hudson, RN, MSN
Dean of Allied Health
AFFILIATION AGREEMENT

I. PARTICIPATING AGENCIES

This agreement between Phillips Community College of the University of Arkansas (hereinafter referred to as the “Institution”), NORTHWEST REGIONAL MEDICAL CENTER (hereinafter referred to as the “Agency”), shall be effective from June 1, 2007 and continue until such time as either party notifies all concerned in writing at least one semester prior to the end of desired termination. The decision to terminate relationship must allow sufficient time for currently enrolled students to complete program.

II. PURPOSE OF THE AGREEMENT

Both parties agree to enter into this Agreement (hereinafter referred to as the “Agreement”) and state that the purpose of this Agreement is to provide a comprehensive learning experience for students (hereinafter referred to as “Participants”) of the Institution within the Agency’s clinical setting.

III. GENERAL PROVISIONS OF AGREEMENT

A. In accordance with provisions of Federal and State Laws regarding discrimination, both parties agree that there will be no distinction in employment or placement unless permitted by law because of race, sex, color, creed, age, national or ethnic origin, religion, marital status, veteran’s status, disability or receipt of public assistance, and the parties agree to adhere to the provisions of Federal and State Laws regarding discrimination.

B. This Agreement shall be subject to review and renewal annually by a Letter of Agreement, provided, however, that either party shall have the right to terminate this Agreement upon one semester’s written notice.

C. The schedule of the Participant’s course work experience will be determined in advance of the Participant’s experience by mutual agreement of the Institution and the Agency.

IV. SPECIFIC RESPONSIBILITIES OF THE INSTITUTION

The Institution is responsible for the following:

A. To designate a course coordinator to act as liaison with the appropriate designated Agency’s personnel.
B. To ensure that Participants have the necessary requirements and medical laboratory technology and phlebotomy course prerequisites as established by the required course work in the Institution’s catalog.

C. To inform the Participants of the Agency’s rules and regulations and ensure that the Participants meet the necessary qualifications to participate under this agreement.

D. The Institution shall require all participating medical laboratory technology and phlebotomy students, faculty and other personnel of the Institution to maintain and provide proof of liability insurance in an amount satisfactory to the Institution and Agency. Such insurance shall be with an insurance company reasonably acceptable to the Agency and in accordance with the provisions and requirements of any applicable laws of the State of Arkansas. Upon request by Agency, each medical laboratory technology and phlebotomy student, faculty or other personnel of the Institution shall provide to Agency an acceptable certificate of insurance evidencing such insurance coverage, which shall include an endorsement if available from the insurance carrier which provides that such insurance shall not be modified, non-renewed or canceled except upon thirty (30) days prior written notice to Agency.

E. To abide by the Agency’s policies.

F. To evaluate the clinical experience with the Agency’s designated personnel.

G. To wear appropriate attire and adequate identification.

H. To comply with any health requirements the Agency determines as needed by the course coordinator or Participants before they interact with the Agency’s clients (e.g., TB skin test and Hepatitis B vaccinations).

I. To provide clinical instructors who will be responsible for providing Participants with experiences of the daily routine, procedures, and practices of the Agency’s laboratory.

J. To obtain prior written approval of the Agency before publishing any material related to the learning experience provided under the Agreement’s terms.
V. SPECIFIC RESPONSIBILITIES OF THE AGENCY

A. To serve as a clinical laboratory in which Participants may be assigned for educational experience.

B. To provide a coordinator from its staff to act as the liaison with the Institution’s designate in this Agreement.

C. To provide first aid for work-related accidents to Participants. In the event the accident is a bloodborne pathogen (BBP) or other potentially infectious materials (OPIM) exposure, the agency will provide at no cost to the Participant the initial testing on participant and source as outline in OSHA standards.

D. To provide staff for the Institution’s course coordinators’ and Participants’ orientation to the Agency.

E. To provide Participants with a written copy of the policies and procedures that pertains to the Participants.

F. To provide staff time for planning with the Institution’s faculty for suitable Participant experiences.

G. To provide and maintain adequate, qualified, supervisory personnel in those areas where the Participants are assigned.

H. To provide adequate conference room space, storage space, and necessary instructional materials when appropriate.

I. To provide the required supplies such as gloves and protective clothing, which enable standard precautions to be implemented, should such action be necessary for the Participant’s protection. Also, Participant should be informed of the location of these materials and have access to these materials during the period of time in which the Participant is performing the Institution’s course at the Agency.

VI. SPECIFIC RESPONSIBILITIES OF PARTICIPANTS

The Participant, assigned to work with the Agency through this agreement, shall have the following responsibilities:

A. To wear appropriate attire and identification while performing client care for the Agency.
B. To comply with the Agency’s policies and procedures.

C. To obtain prior written approval of both parties to this agreement before publishing any material related to the learning experience provided under the terms of this Agreement.

VII. CONFIDENTIALITY

A. The Institution, its students, employees, agents and representatives agree to keep confidential from third parties all information which relates to or identifies a particular patient, including, but not limited to name, address, medical treatment or condition, financial status, or any other personal information which is deemed to be confidential in accordance with applicable state and federal law and standards of professional ethics.

B. All patient records shall remain the property of the Agency. Retention and release shall be in accordance with applicable regulations, policies and procedures. Access and use of patient information is restricted to only what is necessary to provide the services so noted herein.

C. Institution will ensure that its students, employees, agents and representatives will comply with the regulations promulgated under the Health Insurance Portability and Accountability Act of 1996. Students, employees, agents, and representatives shall keep Protected Health Information confidential from third parties and use such information only for matters of treatment.

VIII. REQUEST FOR WITHDRAWAL OF PARTICIPANT

The Agency shall reserve the right to make the Institution to withdraw any Participant from its facility whose conduct and work with the clients or personnel is not in accordance with the policies and procedures of the Agency or is detrimental to clients or others. If the Agency should request that the Institution remove a Participant from the Agency because the Participant has committed academic misconduct or is determined to be a safety hazard to himself or herself, clients or other Participants, the Agency will provide the Institution all information (except for information which violates privacy laws) used in any decision to discipline or return the Participant to the Institution.
IX. MODIFICATION OF AGREEMENT

Modification of this Agreement may be made by mutual consent of the parties, in writing, and attached to this Agreement, and shall include the date and the signature of the parties agreeing to the modification.

X. INVESTIGATION OF OCCURRENCES

Should a claim arise in which the Institution and/or one of the Institution’s Participants are involved, the Institution or its duly authorized agent has the authority to participate in the investigation(s) or to obtain such information from the Agency as may be required in the defense of claims related to Participant or course coordinator actions.

XI. COPIES OF THE AGREEMENT

A copy of this signed Agreement shall be placed in the Institution’s file and be available at the Agency.

INSTITUTION: Phillips Community College of the University of Arkansas

BY: [Signature]
Chancellor

DATE: 5/3/07

AGENCY: Northwest Regional Medical Center

BY: [Signature]
Chief Executive Officer

DATE: 5/25/07

[Signature]
Laboratory Director

DATE: 5-23-07
Clinical Facility
Phlebotomy Fact Sheet

Institution: DeWitt Hospital and Nursing Home

Address: 1641 Whitehead Dr

City, State, Zip Code: DeWitt, AR 72042

Telephone: (870) 946-3571 Fax: (870) 946-4577

# of Beds: 25 # of Bassinets: 0 # of Annual Admissions: 500 # of Out Patients: 8000

Accredited by: CLIA, State of Arkansas

Clinical Coordinator or Contact Person at site: Rhonda Reed, BSMT(ASCP)

Clinical Laboratory Volume (specify annual number of procedures):

37,750/yr

Phlebotomies per year: 4,000 Total space of the laboratory: 900 sq ft

<table>
<thead>
<tr>
<th>TYPE OF SITE</th>
<th>NUMBER USED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Collection</td>
<td>0</td>
</tr>
<tr>
<td>Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>2</td>
</tr>
<tr>
<td>Outpatient / Drawing Stations</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient Clinic</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of sites used by students: 4

Number of students in clinical experience assignments: 0-1

Laboratory staff (convert part-time to full-time equivalent):

<table>
<thead>
<tr>
<th></th>
<th>NUMBER BUDGETED</th>
<th>NUMBER EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathologists</td>
<td></td>
<td>0 *Pathologist Consultant</td>
</tr>
<tr>
<td>Phlebotomists</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Technologist (baccalaureate)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Technician (AD or certificate)</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

28
DeWitt Hospital and Nursing Home
DeWitt, AR

Capital Equipment Utilized for PLB Student Instruction

- Clinitek 100

Facility Specific Required Textbooks

None

Access to Periodicals

- Internet access
- MLO magazines on site

Instructional Resources

- Patient Samples
- Survey Samples
- Stock Cultures
- Reference books

Rules and Policies Unique to the Facility

None
May 4, 2010

DeWitt Hospital
Darrin Caldwell
PO Box 428
DeWitt, AR 72042

Re: Educational Affiliation Agreement between Phillips Community College of the University of Arkansas ("Institution") and DeWitt Hospital ("Agency") dated May 4, 2010 ("Agreement").

MLT and PLB Contract

Dear Mr. Caldwell:

Our current Agreement between DeWitt Hospital and Phillips Community College of the University of Arkansas expires June 30, 2010. As a continuation of our mutual cooperation, we would like to renew this Agreement, under the same terms and conditions currently existing in the Agreement.

This letter therefore serves as written agreement between the parties to renew the Agreement for a one (1) year term, beginning July 1, 2010 and ending June 30, 2011.

If this renewal to the Agreement is acceptable to you, please sign and return an original of this document.

Accepted by:

Signature

Title

Dr. Steven Murray
Chancellor

Amy Hudson, RN, MSN
Dean of Allied Health
AFFILIATION AGREEMENT

I. PARTICIPATING AGENCIES

This agreement between Phillips Community College of the University of Arkansas (hereinafter referred to as the "Institution"), **DEWITT HOSPITAL** (hereinafter referred to as the "Agency"), shall be effective from June 1, 2007 and continue until such time as either party notifies all concerned in writing at least one semester prior to the end of desired termination. The decision to terminate relationship must allow sufficient time for currently enrolled students to complete program.

II. PURPOSE OF THE AGREEMENT

Both parties agree to enter into this Agreement (hereinafter referred to as the "Agreement") and state that the purpose of this Agreement is to provide a comprehensive learning experience for students (hereinafter referred to as "Participants") of the Institution within the Agency's clinical setting.

III. GENERAL PROVISIONS OF AGREEMENT

A. In accordance with provisions of Federal and State Laws regarding discrimination, both parties agree that there will be no distinction in employment or placement unless permitted by law because of race, sex, color, creed, age, national or ethnic origin, religion, marital status, veteran's status, disability or receipt of public assistance, and the parties agree to adhere to the provisions of Federal and State Laws regarding discrimination.

B. This Agreement shall be subject to review and renewal annually by a Letter of Agreement, provided, however, that either party shall have the right to terminate this Agreement upon one semester's written notice.

C. The schedule of the Participant's course work experience will be determined in advance of the Participant's experience by mutual agreement of the Institution and the Agency.

IV. SPECIFIC RESPONSIBILITIES OF THE INSTITUTION

The Institution is responsible for the following:

A. To designate a course coordinator to act as liaison with the appropriate designated Agency's personnel.
B. To ensure that Participants have the necessary requirements and medical laboratory technology and phlebotomy course prerequisites as established by the required course work in the Institution’s catalog.

C. To inform the Participants of the Agency’s rules and regulations and ensure that the Participants meet the necessary qualifications to participate under this agreement.

D. The Institution shall require all participating medical laboratory technology and phlebotomy students, faculty and other personnel of the Institution to maintain and provide proof of liability insurance in an amount satisfactory to the Institution and Agency. Such insurance shall be with an insurance company reasonably acceptable to the Agency and in accordance with the provisions and requirements of any applicable laws of the State of Arkansas. Upon request by Agency, each medical laboratory technology and phlebotomy student, faculty or other personnel of the Institution shall provide to Agency an acceptable certificate of insurance evidencing such insurance coverage, which shall include an endorsement if available from the insurance carrier which provides that such insurance shall not be modified, non-renewed or canceled except upon thirty (30) days prior written notice to Agency.

E. To abide by the Agency’s policies.

F. To evaluate the clinical experience with the Agency’s designated personnel.

G. To wear appropriate attire and adequate identification.

H. To comply with any health requirements the Agency determines as needed by the course coordinator or Participants before they interact with the Agency’s clients (e.g., TB skin test and Hepatitis B vaccinations).

I. To provide clinical instructors who will be responsible for providing Participants with experiences of the daily routine, procedures, and practices of the Agency’s laboratory.

J. To obtain prior written approval of the Agency before publishing any material related to the learning experience provided under the Agreement’s terms.
V. SPECIFIC RESPONSIBILITIES OF THE AGENCY

A. To serve as a clinical laboratory in which Participants may be assigned for educational experience.

B. To provide a coordinator from its staff to act as the liaison with the Institution’s designate in this Agreement.

C. To provide first aid for work-related accidents to Participants. In the event the accident is a bloodborne pathogen (BBP) or other potentially infectious materials (OPIM) exposure, the agency will provide at no cost to the Participant the initial testing on participant and source as outline in OSHA standards.

D. To provide staff for the Institution’s course coordinators’ and Participants’ orientation to the Agency.

E. To provide Participants with a written copy of the policies and procedures that pertains to the Participants.

F. To provide staff time for planning with the Institution’s faculty for suitable Participant experiences.

G. To provide and maintain adequate, qualified, supervisory personnel in those areas where the Participants are assigned.

H. To provide adequate conference room space, storage space, and necessary instructional materials when appropriate.

I. To provide the required supplies such as gloves and protective clothing, which enable standard precautions to be implemented, should such action be necessary for the Participant's protection. Also, Participant should be informed of the location of these materials and have access to these materials during the period of time in which the Participant is performing the Institution's course at the Agency.

VI. SPECIFIC RESPONSIBILITIES OF PARTICIPANTS

The Participant, assigned to work with the Agency through this agreement, shall have the following responsibilities:

A. To wear appropriate attire and identification while performing client care for the Agency.
B. To comply with the Agency’s policies and procedures.

C. To obtain prior written approval of both parties to this agreement before publishing any material related to the learning experience provided under the terms of this Agreement.

VII. CONFIDENTIALITY

A. The Institution, its students, employees, agents and representatives agree to keep confidential from third parties all information which relates to or identifies a particular patient, including, but not limited to name, address, medical treatment or condition, financial status, or any other personal information which is deemed to be confidential in accordance with applicable state and federal law and standards of professional ethics.

B. All patient records shall remain the property of the Agency. Retention and release shall be in accordance with applicable regulations, policies and procedures. Access and use of patient information is restricted to only what is necessary to provide the services so noted herein.

C. The Institution will ensure that its students, employees, agents and representatives will comply with the regulations promulgated under the Health Insurance Portability and Accountability Act of 1996. Students, employees, agents, and representatives shall keep Protected Health Information confidential from third parties and use such information only for matters of treatment.

VIII. REQUEST FOR WITHDRAWAL OF PARTICIPANT

The Agency shall reserve the right to make the Institution to withdraw any Participant from its facility whose conduct and work with the clients or personnel is not in accordance with the policies and procedures of the Agency or is detrimental to clients or others. If the Agency should request that the Institution remove a Participant from the Agency because the Participant has committed academic misconduct or is determined to be a safety hazard to himself or herself, clients or other Participants, the Agency will provide the Institution all information (except for information which violates privacy laws) used in any decision to discipline or return the Participant to the Institution.
IX. MODIFICATION OF AGREEMENT

Modification of this Agreement may be made by mutual consent of the parties, in writing, and attached to this Agreement, and shall include the date and the signature of the parties agreeing to the modification.

X. INVESTIGATION OF OCCURRENCES

Should a claim arise in which the Institution and/or one of the Institution’s Participants are involved, the Institution or its duly authorized agent has the authority to participate in the investigation(s) or to obtain such information from the Agency as may be required in the defense of claims related to Participant or course coordinator actions.

XI. COPIES OF THE AGREEMENT

A copy of this signed Agreement shall be placed in the Institution’s file and be available at the Agency.

INSTITUTION: Phillips Community College of the University of Arkansas

BY: [Signature] [Signature] 5/8/07
Chancellor

AGENCY: DEWITT HOSPITAL

BY: [Signature] [Signature] 6/18/07
Chief Executive Officer

[Signature] 5/25/07
Laboratory Director
Clinical Facility
Phlebotomy Fact Sheet

Institution: Baptist Health Medical Center-Stuttgart

Address: 1703 North Buerkle

City, State, Zip Code: Stuttgart, AR 72160

Telephone: (870) 673-3511          Fax: (870) 672-6868

# of Beds: 50          # of Bassinets: 6          # of Annual Admissions: 1000          # of Out Patients: 16000

Accredited by: CLIA, State of Arkansas

Clinical Coordinator or Contact Person at site: Taylor Gregory, BSMT(ASCP)

Clinical Laboratory Volume (specify annual number of procedures):
141,000/yr

Phlebotomies per year: 14,000          Total space of the laboratory: 2104 sq ft

<table>
<thead>
<tr>
<th>TYPE OF SITE</th>
<th>NUMBER USED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Collection</td>
<td>0</td>
</tr>
<tr>
<td>Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>0</td>
</tr>
<tr>
<td>Outpatient / Drawing Stations</td>
<td>2</td>
</tr>
<tr>
<td>Outpatient Clinic</td>
<td>1</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
</tr>
</tbody>
</table>

Number of students in clinical experience assignments: 0-1

Laboratory staff (convert part-time to full-time equivalent):

<table>
<thead>
<tr>
<th></th>
<th>NUMBER BUDGETED</th>
<th>NUMBER EMPLOYED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathologists</td>
<td></td>
<td>0 *Pathologist Consultant</td>
</tr>
<tr>
<td>Phlebotomists</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Technologist (baccalaureate)</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Technician (AD or certificate)</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

36
May 4, 2010

Baptist Health Stuttgart
Formerly Stuttgart Regional Medical Center
Jennifer Payton
PO Box 1905
Stuttgart, AR 72160

Re: Educational Affiliation Agreement between Phillips Community College of the University of Arkansas ("Institution") and Baptist Health Stuttgart formerly Stuttgart Regional Medical Center ("Agency") dated May 4, 2010 ("Agreement").

MLT and PLB Contract

Dear Mr. Sato:

Our current Agreement between Baptist Health Stuttgart formerly Stuttgart Regional Medical Center and Phillips Community College of the University of Arkansas expires June 30, 2010. As a continuation of our mutual cooperation, we would like to renew this Agreement, under the same terms and conditions currently existing in the Agreement.

This letter therefore serves as written agreement between the parties to renew the Agreement for a one (1) year term, beginning July 1, 2010 and ending June 30, 2011.

If this renewal to the Agreement is acceptable to you, please sign and return an original of this document.

Accepted by:

Dr. Steven Murray
Chancellor

Amy Hudson, RN, MSN
Dean of Allied Health
AFFILIATION AGREEMENT

I. PARTICIPATING AGENCIES

This agreement between Phillips Community College of the University of Arkansas (hereinafter referred to as the "Institution"), Stuttgart Regional Medical Center (hereinafter referred to as the "Agency"), shall be effective from June 1, 2007 and continue until such time as either party notifies all concerned in writing at least one semester prior to the end of desired termination. The decision to terminate relationship must allow sufficient time for currently enrolled students to complete program.

II. PURPOSE OF THE AGREEMENT

Both parties agree to enter into this Agreement (hereinafter referred to as the "Agreement") and state that the purpose of this Agreement is to provide a comprehensive learning experience for students (hereinafter referred to as "Participants") of the Institution within the Agency’s clinical setting.

III. GENERAL PROVISIONS OF AGREEMENT

A. In accordance with provisions of Federal and State Laws regarding discrimination, both parties agree that there will be no distinction in employment or placement unless permitted by law because of race, sex, color, creed, age, national or ethnic origin, religion, marital status, veteran’s status, disability or receipt of public assistance, and the parties agree to adhere to the provisions of Federal and State Laws regarding discrimination.

B. This Agreement shall be subject to review and renewal annually by a Letter of Agreement, provided, however, that either party shall have the right to terminate this Agreement upon one semester’s written notice.

C. The schedule of the Participant’s course work experience will be determined in advance of the Participant’s experience by mutual agreement of the Institution and the Agency.

IV. SPECIFIC RESPONSIBILITIES OF THE INSTITUTION

The Institution is responsible for the following:

A. To designate a course coordinator to act as liaison with the appropriate designated Agency’s personnel.
B. To ensure that Participants have the necessary requirements and medical laboratory technology and phlebotomy course prerequisites as established by the required course work in the Institution’s catalog.

C. To inform the Participants of the Agency’s rules and regulations and ensure that the Participants meet the necessary qualifications to participate under this agreement.

D. The Institution shall require all participating medical laboratory technology and phlebotomy students, faculty and other personnel of the Institution to maintain and provide proof of liability insurance in an amount satisfactory to the Institution and Agency. Such insurance shall be with an insurance company reasonably acceptable to the Agency and in accordance with the provisions and requirements of any applicable laws of the State of Arkansas. Upon request by Agency, each medical laboratory technology and phlebotomy student, faculty or other personnel of the Institution shall provide to Agency an acceptable certificate of insurance evidencing such insurance coverage, which shall include an endorsement if available from the insurance carrier which provides that such insurance shall not be modified, non-renewed or canceled except upon thirty (30) days prior written notice to Agency.

E. To abide by the Agency’s policies.

F. To evaluate the clinical experience with the Agency’s designated personnel.

G. To wear appropriate attire and adequate identification.

H. To comply with any health requirements the Agency determines as needed by the course coordinator or Participants before they interact with the Agency’s clients (e.g., TB skin test and Hepatitis B vaccinations).

I. To provide clinical instructors who will be responsible for providing Participants with experiences of the daily routine, procedures, and practices of the Agency’s laboratory.

J. To obtain prior written approval of the Agency before publishing any material related to the learning experience provided under the Agreement’s terms.
V. SPECIFIC RESPONSIBILITIES OF THE AGENCY

A. To serve as a clinical laboratory in which Participants may be assigned for educational experience.

B. To provide a coordinator from its staff to act as the liaison with the Institution’s designate in this Agreement.

C. To provide first aid for work-related accidents to Participants. In the event the accident is a bloodborne pathogen (BBP) or other potentially infectious materials (OPIM) exposure, the agency will provide at no cost to the Participant the initial testing on participant and source as outline in OSHA standards.

D. To provide staff for the Institution’s course coordinators’ and Participants’ orientation to the Agency.

E. To provide Participants with a written copy of the policies and procedures that pertains to the Participants.

F. To provide staff time for planning with the Institution’s faculty for suitable Participant experiences.

G. To provide and maintain adequate, qualified, supervisory personnel in those areas where the Participants are assigned.

H. To provide adequate conference room space, storage space, and necessary instructional materials when appropriate.

I. To provide the required supplies such as gloves and protective clothing, which enable standard precautions to be implemented, should such action be necessary for the Participant’s protection. Also, Participant should be informed of the location of these materials and have access to these materials during the period of time in which the Participant is performing the Institution’s course at the Agency.

VI. SPECIFIC RESPONSIBILITIES OF PARTICIPANTS

The Participant, assigned to work with the Agency through this agreement, shall have the following responsibilities:

A. To wear appropriate attire and identification while performing client care for the Agency.
B. To comply with the Agency’s policies and procedures.

C. To obtain prior written approval of both parties to this agreement before publishing any material related to the learning experience provided under the terms of this Agreement.

VII. CONFIDENTIALITY

A. The Institution, its students, employees, agents and representatives agree to keep confidential from third parties all information which relates to or identifies a particular patient, including, but not limited to name, address, medical treatment or condition, financial status, or any other personal information which is deemed to be confidential in accordance with applicable state and federal law and standards of professional ethics.

B. All patient records shall remain the property of the Agency. Retention and release shall be in accordance with applicable regulations, policies and procedures. Access and use of patient information is restricted to only what is necessary to provide the services so noted herein.

C. Institution will ensure that its students, employees, agents and representatives will comply with the regulations promulgated under the Health Insurance Portability and Accountability Act of 1996. Students, employees, agents, and representatives shall keep Protected Health Information confidential from third parties and use such information only for matters of treatment.

VIII. REQUEST FOR WITHDRAWAL OF PARTICIPANT

The Agency shall reserve the right to make the Institution to withdraw any Participant from its facility whose conduct and work with the clients or personnel is not in accordance with the policies and procedures of the Agency or is detrimental to clients or others. If the Agency should request that the Institution remove a Participant from the Agency because the Participant has committed academic misconduct or is determined to be a safety hazard to himself or herself, clients or other Participants, the Agency will provide the Institution all information (except for information which violates privacy laws) used in any decision to discipline or return the Participant to the Institution.
IX. MODIFICATION OF AGREEMENT

Modification of this Agreement may be made by mutual consent of the parties, in writing, and attached to this Agreement, and shall include the date and the signature of the parties agreeing to the modification.

X. INVESTIGATION OF OCCURRENCES

Should a claim arise in which the Institution and/or one of the Institution's Participants are involved, the Institution or its duly authorized agent has the authority to participate in the investigation(s) or to obtain such information from the Agency as may be required in the defense of claims related to Participant or course coordinator actions.

XI. COPIES OF THE AGREEMENT

A copy of this signed Agreement shall be placed in the Institution's file and be available at the Agency.

INSTITUTION: Phillips Community College of the University of Arkansas

BY: [Signature] Murray

Chancellor

Date: 5-31-07

AGENCY: Stuttgart Regional Medical Center

BY: [Signature] Neel

Chief Executive Officer

Date: 5-31-07

[Signature] Brey

Laboratory Director

Date: 5-31-07
Standard 2. Sponsorship

Educational programs must be established in:

A. Colleges and universities;
B. Hospitals and medical centers;
C. Medical laboratories;
D. Consortia or joint ventures, consisting of two or more participating entities and formed by agreement to undertake a common enterprise as a sponsoring entity, whereby at least one member of the consortium or joint venture must meet the requirements of Standard 1, or;
E. Other institutions which meet comparable standards for education in clinical laboratory science.

Response to Standard 2:

Phillips Community College of the University of Arkansas (PCCUA) is one of 13 academic institutions of the University of Arkansas System. The Governor appoints the University of Arkansas Board of Trustees, which governs the University of Arkansas System.
Standard 3. Responsibilities of the Sponsor

Approval is granted to the sponsor (and participating entities, in cases of consortia) that assumes primary responsibility for curriculum planning and selection of course content; coordinates classroom teaching and applied education, appoints faculty to the program, receives and processes applications for admission, and assures that graduates of the program have obtained the appropriate certificate upon completion of the program.

Response to Standard 3:
The Phlebotomy Program Director and faculty are responsible for curriculum planning and selection of course content, coordinating classroom teaching and supervised clinical education, receiving and processing applications for admission, and assuring that activities assigned to students in the clinical setting are appropriately educational. Upon successful completion of the program requirements, the Technical Certificate in Phlebotomy is awarded. A statement to this effect and a list of all degrees awarded by the college can be found in the PCCUA College Catalog and on the PCCUA web site (http://www.pccua.edu/alliedhealth/Phlebotomy.htm).

3A. The sponsor (and participating entities, in cases of consortia) must be responsible for providing assurance that the activities assigned to students in the clinical setting are educational.

Response to Standard 3A:
Before a clinical laboratory is accepted as a clinical affiliate, program faculty visit the facility to ensure that the laboratory has adequate space and performs a sufficient number of testing procedures to comply with program requirements. Each clinical affiliate site has an assigned education coordinator. The education coordinator serves as liaison between the affiliate laboratory and the program. Whenever necessary, the education coordinators communicate with the phlebotomy core faculty to discuss student progress, training concerns, curriculum, and testing. In addition, faculty meetings with core faculty and education coordinators are held on a regular basis. The education coordinators relay needed information to the clinical instructors at the affiliate sites who are teaching students in the laboratory. All student competency checklists and evaluations are returned to the program office for core faculty review. The Phlebotomy Program assumes final responsibility for assuring that student activities in the clinical setting are appropriately educational, including hands-on experience to complete required competencies, written and/or oral quizzes, and practical examinations.

3B. There must be documented ongoing communication between the sponsor (and participating entities, in cases of consortia) and its affiliates for exchange of information and coordination of the program.

Response to Standard 3B:
Faculty meetings between phlebotomy core faculty and education coordinators are held at least annually. These meetings are supplemented with frequent telephone calls, emails, faxes, and mail communications. Meetings are designed to inform and remind affiliates about internship competency requirements, evaluations, scheduling, testing, and any new developments. Attendees are encouraged to discuss concerns.
Phillips Community College
of the University of Arkansas
Campuses at
DeWitt, Helena, Stuttgart

To all to whom these presents may come, Greetings

Be it known that

Temika Shanta Seals

having successfully completed the course of study as prescribed by this Institution is

hereby granted this

Technical Certificate
Phlebotomy

In witness whereof have been affixed the seal of the College and the signatures

of its executive officers.

May 14, 2010

Date

[Signatures]

President
University of Arkansas System

Chairman, Board of Trustees
University of Arkansas

[Signatures]

Chancellor
Phillips Community College

Chairman, Board of Visitors
Phillips Community College
Associate of Applied Science Degrees & Certificates

The Arkansas Department of Higher Education has asked all Arkansas institutions offering an A.A.S. Degree to print the following general disclaimer:

“The Associate of Applied Science Degree is designed for employment purposes and it should not be assumed that the degree or the courses in the degree can be transferred to another institution. While some institutions do accept some courses in A.A.S. Programs, the general rule is that courses in A.A.S. Degrees are not accepted in transfer toward bachelors degrees. Students to whom transfer is important should get assurances in writing in advance from the institution to which they wish to transfer.”

Allied Health

MEDICAL LABORATORY TECHNOLOGY (MLTAAS H)

MLT Prerequisites: High school diploma or equivalent, two years high school algebra or equivalent, acceptable pre-admission test scores. Application must be made to the MLT program. Eighty percent of the required clinical hours must be completed on a clinical site. Graduates are eligible to take the national registry examination for MLT.

The curriculum of the MLT program which leads to an Associate of Applied Science degree is an integrated program of technical courses in medical laboratory science, fundamental courses in natural science, and complementary humanities and social sciences. A minimum grade of "C" is required in each medical laboratory science course. The MLT program is NAACLS accredited.

GROUP I: ENGLISH AND FINE ARTS

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>EH 113</td>
<td>4</td>
</tr>
<tr>
<td>EH 123</td>
<td>4</td>
</tr>
</tbody>
</table>

GROUP II: SOCIAL SCIENCE

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSY 213</td>
<td>3</td>
</tr>
<tr>
<td>SV 213</td>
<td>3</td>
</tr>
<tr>
<td>HY 113</td>
<td>3</td>
</tr>
<tr>
<td>HY 123</td>
<td>3</td>
</tr>
<tr>
<td>HY 213/222</td>
<td>3</td>
</tr>
<tr>
<td>ES 213</td>
<td>3</td>
</tr>
<tr>
<td>ES 223</td>
<td>3</td>
</tr>
<tr>
<td>PLS 213</td>
<td>3</td>
</tr>
</tbody>
</table>

Total Hours Required: 70

PHLEBOTOMY TECHNICAL CERTIFICATE (PHLETC H)

The Phlebotomy Program is a two (2) semester Technical Certificate Program. Graduates of the program are eligible to take the national phlebotomy certification examination. Application must be made to the Phlebotomy Program. Admission requirements are: high school graduate or equivalent, 18 years old and acceptable pre-admission test scores. Acceptance into the phlebotomy program is on a first-come, first-accepted basis of those meeting the minimum entrance requirements. The phlebotomy program is NAACLS approved.

FALL SEMESTER

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>BY 103</td>
<td>3</td>
</tr>
<tr>
<td>OT 113</td>
<td>3</td>
</tr>
<tr>
<td>EH 113</td>
<td>3</td>
</tr>
<tr>
<td>MS 1023</td>
<td>3</td>
</tr>
<tr>
<td>CT 114</td>
<td>3</td>
</tr>
</tbody>
</table>

SPRING SEMESTER

<table>
<thead>
<tr>
<th>Course</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PLB 113</td>
<td>3</td>
</tr>
<tr>
<td>PLB 123</td>
<td>3</td>
</tr>
<tr>
<td>PLB 116</td>
<td>3</td>
</tr>
</tbody>
</table>

Total Hours Required: 28

NURSING (ADN) (NG)

The Associate Degree Nursing (ADN) is approved by the Arkansas Board of Nursing and accredited by the League for Nursing Accrediting (NLNAC). Program graduates submit an application to write the National Council Licensure Examination for Nurses (NCLEX-RN). Applicants to the Arkansas Board of Nursing may be required to pass a criminal background check.

3343 Peachtree Road, NE
Atlanta, GA 30303
Phone: (404) 975-55
Fax: (404) 975-56
Web Site: [http://www.na](http://www.na)
Claude, 
We have one student that we are having a hard time training. She is just not catching on. We have talked one on one, but she is just not comprehending. Do you have any suggestions.... She is not a problem, she is just not catching on...

Looking for ideas...
Ginger

Ginger Coats, MT (ASCP)  
Laboratory Director  
Northwest Mississippi Regional Medical Center  
1970 Hospital Drive  
Clarksdale, MS 38614  
Phone: 662-624-3425 Fax: 662-624-3128  
e-mail: ginger.coats@hma.com

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.
Mr. Rector,

We will be having a Joint Commission surveyor at our facility on November 30th and December 1st. Students should not be in the area on those days. Also, we would appreciate receiving more than a few days notice when students are scheduled in the future. We are used to receiving notice "at least" 2 months prior to the clinical rotation, as it allows us to more efficiently schedule staff for training purposes. Thank you in advance for your assistance with this matter.

Deborah Fields / Laboratory Administrative Director / Helena Regional Medical Center
1801 Martin Luther King Drive / Helena, AR 72342 / Tel.: 870-816-3841 / FAX: 870-338-3768

The following is the class roster for PLB 116 Phlebotomy Skills. The class will again be split into two groups.

The class is scheduled to attend Helena Regional's orientation on Monday, October 25 @ 9am. The class is scheduled to attend NWMRC's orientation on Tuesday, October 26 @ 9am.

Each group will attend clinical from October 25 thru December 10.

Oct 25-Nov 12
Helena Group
Colley Mackintosh
Elizabeth Moore
Juanita Mora

Clarksdale Group
Angela Chestnut
Tommie Warwick
Gina Webster

Nov 15-Dec 10
Clarksdale Group
Colley Mackintosh
Elizabeth Moore
Juanita Mora

Helena Group
Angela Chestnut
Tommie Warwick
Gina Webster

49
The following is the class roster for MLS 202. The MLT students are scheduled for clinical on Tuesday and Thursday from 9am-10am.

Oct 26-Dec 2
Helena Only
Edica Evans
Christina Quattlebaum

Scheduled days off are as follows according to PCCUA calendar:
- Nov 24, 25, 26 Thanksgiving Break

Claude Rector, MA, MT(ASCP)
MLT/PLB Program Director
Phillips Community College of the University of Arkansas
1000 Campus Drive
P.O. Box 785
Helena-West Helena, AR 72342
(870) 338-6474 Ext 1079
crector@pccua.edu

--------------------------------------------------------------------------------------------------- Disclaimer: This electronic message may contain information that is Proprietary, Confidential, or legally privileged or protected. It is intended only for the use of the individual(s) and entity named in the message. If you are not an intended recipient of this message, please notify the sender immediately and delete the material from your computer. Do not deliver, distribute or copy this message and do not disclose its contents or take any action in reliance on the information it contains.
PLB 116
Phlebotomy Skills

The following is the class roster for PLB 116 Phlebotomy Skills. The class will again be split into two groups.

The class is scheduled to attend Helena Regional’s orientation on Monday, October 25 @ 9am. The class is scheduled to attend NWMRMC’s orientation on Tuesday, October 26 @ 9am.

Each group will attend clinical from October 25 thru December 10.

Oct 25-Nov 12
Helena Group
Colley Mackintosh
Elizabeth Moore
Juanita Mora

Nov 15-Dec 10
Clarksdale Group
Colley Mackintosh
Elizabeth Moore
Juanita Mora

Clarksdale Group
Angela Chestnut
Tommie Warwick
Gina Webster

Helena Group
Angela Chestnut
Tommie Warwick
Gina Webster

MLS 202
Phlebotomy

The following is the class roster for MLS 202. The mt students are scheduled for clinical on Tuesday and Thursday from 9am-10am.

Oct 26-Dec 2
Helena Only
Edica Evans
Christina Quattlebaum

Scheduled days off are as follow according to PCCUA calendar:
- Nov 24, 25, 26 Thanksgiving Break

Claude Rector, MA, MT(ASCP)
MLT/PLB Program Director
Phillips Community College of the University of Arkansas
1000 Campus Drive
P.O. Box 785
Helena-West Helena, AR 72342
(870) 338-6474 Ext 1079
crector@pccua.edu
Standard 4. General Resources

Resources must support the number of students admitted into the program. The instructor to student ratio shall be adequate to achieve the stated program goals.

Response to Standard 4:
The program has two (2) full-time core faculty positions including the Program Director.

Students are admitted to the program each August at the beginning of the fall semester and each January at the beginning of the spring semester. The maximum number of students per class is ten (10).

<table>
<thead>
<tr>
<th>Maximum number of students per class:</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admission Date:</td>
<td>August, Fall Semester and January, Spring Semester</td>
</tr>
<tr>
<td>Instructor to student ratios:</td>
<td></td>
</tr>
<tr>
<td>Lecture</td>
<td>Maximum of 1:10</td>
</tr>
<tr>
<td>Student Laboratory</td>
<td>Maximum of 1:10</td>
</tr>
<tr>
<td>Clinical Laboratory</td>
<td>1:1</td>
</tr>
</tbody>
</table>
Standard 5. Financial Resources

Financial resources for continued operation of the educational program must be ensured by an adequate, institutionally approved budget or by a statement of continued financial support from an executive officer of the sponsor (or one from each participating entity, in cases of consortia).

Response to Standard 5:
The program receives an annual budget at the beginning of each new fiscal year. This budget is developed through a process that begins the preceding December when the Program Director prepares and presents a program budget request to the Dean of Allied Health. The Dean incorporates requests from all departments into a college budget request presented to the PCCUA Chancellor in the spring of each year. The Chancellor incorporates requests from the various campus units into the annual PCCUA budget that is submitted to the University of Arkansas (System) President and finally to the Board of Trustees for approval.

PCCUA is a member of the Arkansas Delta Training and Education Consortium (ADTEC). The U.S. Department of Labor Employment and Training Administration awarded ADTEC a three year grant to develop allied health programs. The College will receive $400,000 from this grant. The College also committed to relinquish all indirect costs ($172,500) so that the maximum funds can be focused on capacity building and training. The College also committed to an additional $100,000 to support this project. PCCUA will commit all of these funds ($672,500) over the next three years for the Medical Laboratory Technology Program and Phlebotomy Program. The college is currently in the third and final year of this grant.
<table>
<thead>
<tr>
<th>GL Account</th>
<th>Allocated Budget</th>
<th>Actual</th>
<th>% Used</th>
<th>Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-10-00-12060-53100 Travel (Pooled Acct) : MLT</td>
<td>3,000.00</td>
<td>205.40</td>
<td>6.85</td>
<td>2,794.60</td>
</tr>
<tr>
<td>Totals for GL.SUBCLASS: 53 - Travel</td>
<td>3,000.00</td>
<td>205.40</td>
<td>6.85</td>
<td>2,794.60</td>
</tr>
<tr>
<td>10-10-00-12060-54009 Supplies/Services (Pooled) : MLT</td>
<td>15,000.00</td>
<td>13,027.02</td>
<td>86.85</td>
<td>1,972.98</td>
</tr>
<tr>
<td>Totals for GL.SUBCLASS: 54 - Supplies and Services</td>
<td>15,000.00</td>
<td>13,027.02</td>
<td>86.85</td>
<td>1,972.98</td>
</tr>
<tr>
<td>Totals for GL.CLASS: 5 - Expenditure</td>
<td>18,000.00</td>
<td>13,232.42</td>
<td>73.51</td>
<td>4,767.58</td>
</tr>
<tr>
<td>Totals for LOCATION: 10 - Helena</td>
<td>18,000.00</td>
<td>13,232.42</td>
<td>73.51</td>
<td>4,767.58</td>
</tr>
</tbody>
</table>
April 20, 2009

Mr. Claude A. Rector, MA, MT(ASCP)
MLT/PLB Program Director
Allied Health Division
Phillips Community College of the University of Arkansas
1000 Campus Drive
Helena-West Helena, AR 72342

Dear Mr. Rector:

As Chancellor of Phillips Community College of the University of Arkansas (PCCUA), I can assure you that this office supports the Medical Laboratory Technology Program. PCCUA will continue to allocate funding to support the program, as it has done every year for the past 30 years.

Given the limited number of MLT programs in Arkansas, it is imperative for the College to have a Medical Laboratory Technology Program. The College is committed to providing quality educational opportunities for the citizens of eastern Arkansas. This includes educating a healthcare workforce that includes an ample number of skilled medical laboratory technicians to meet the healthcare needs of the impoverished Mississippi Delta region.

PCCUA is a member of the Arkansas Delta Training and Education Consortium (ADTEC). The U.S. Department of Labor Employment and Training Administration just awarded ADTEC a three year grant to develop allied health programs. The College will receive $400,000 from this grant. The College also committed to relinquish all indirect costs ($172,500) so that the maximum funds can be focused on capacity building and training. The College also committed to an additional $100,000 to support this project. PCCUA will commit all of these funds ($672,500) over the next three years for the Medical Laboratory Technology Program.

Sincerely,

Steven F. Murray, Ed.D.
Chancellor
ARKANSAS DELTA ALLIED HEALTH
TRAINING & EDUCATION INITIATIVE

Arkansas Delta WIRED
Sponsored Project
BUDGET NARRATIVE

Arkansas Northeastern College (ANC) is the applicant community college on behalf of the Arkansas Delta Training and Education Consortium, which is a five community college partnership committed to workforce and economic development in the Arkansas Delta. If the funding in this proposal is approved, then ANC will sub-award the budgeted amounts to each ADTEC community college. The 424a does not reflect these sub-awards under line f, Contractual, but rather includes the cost breakdown under the other line items.

The total cost of this project is $3,365,500, with $2,000,000 of this amount requested under this U.S. Department of Labor Employment and Training Administration Community-Based Job Training Grant Proposal. The ADTEC community colleges will provide the additional $1,365,500 (68.3% match). The detailed budget is shown following this narrative. Of the amount of $2,000,000 requested under the grant proposal from USDOL/ETA, the amount of $100,000 will be used to support tuition and training fees. This pool of tuition and training fees will be jointly accessed by community colleges and one-stop centers. All training and education funded by the grant must be accomplished at an ADTEC community college. The remaining $1,900,000 will support capacity building at the five Arkansas Delta Training and Education Consortium community colleges. These capacity-building funds will support the salary and fringe benefits for one faculty member, part-time faculty, equipment, travel, and supplies at each of the ADTEC community colleges.

The majority of DOL/ETA funding is budgeted in the first two years of the grant. There are two reasons for this:

1. The majority of capacity building must occur early in the project so that the community colleges can provide the training to participants, thus more funds are required in Year 1, and to a lesser degree in Year 2.
2. The phased nature of DOL/ETA funding, i.e., $1,470,531 in Year 1; $485,082 in Year 2; and $44,387 in Year 3 requires the community colleges to assume increasing cost sharing in the project, after the initial capacity building in Year 1, and to a lesser degree in Year 2.

Total project funding is derived from the following sources:

1. U.S. DOL/ETA $2,000,000
2. ADTEC community college indirect cost contribution $865,500
3. Direct match of community colleges $500,000

Total $3,365,500
Total Amount Leveraged from Federal Resources: $11,532,518.

Total Amount Leveraged from Non-Federal Resources: $1,365,500. The five partnering community colleges have decided to forego their indirect cost for this project--$865,500. The community college presidents and chancellors will provide $100,000 each to support this project--$500,000.

Partners Contributing the Resources:

Federal: Pell grants at each partnering community college support students in the career pathways which will be developed with funds for this project--$6,912,518. Each community college has TANF (Transitional Assistance for Needy Families) totaling $4,620,000, which can support participants receiving training under this project.

Note: While the Pell and TANF funds are available to participants receiving training, there is no way to know in advance which of the participants will qualify for these funds, therefore actual amounts leveraged of the totals available will vary.

State: Mid-South Community College, Arkansas Northeastern College, East Arkansas Community College, Arkansas State University-Newport, and Phillips Community College of the University of Arkansas.

Amount of Grant Funds Spent on Tuition and Training Fees: $100,000 of the funds requested are committed to tuition and training fees which will be jointly accessed by community colleges and one-stop centers.

Cost per Participant: Based on the 3-year period of the grant and the goal of a minimum of 400 workers trained, the cost per participant is $5,000. However, the capacity created at each of the partnering community colleges will support continued training after the grant period and the cost per participant amortized over 6 years is $2,500.

Explanation of SF-424a

Section A: Budget Summary: Line e in the amount of $1,470,531 includes all federal funding for Year 1. Line f includes funding provided by the partnering community colleges in the amount of $508,956 in Year 1 of the project.

Section B: Budget Categories: Amounts listed in the budget categories reflect the total federal committed to the project. The community college contribution is shown by college in the Budget Narrative.

Section C: Non-Federal Resources: The amount entered under "Federal" lists only fund requested in this proposal. The amount entered under "Non-Federal" reflects cash and indirect cost loss from the partnering community colleges.
Section D: Forecasted Cash Needs: Forecasted cash needs are greater in Year 1 and then lessen in the latter years of the project. This is to insure that the partnering community colleges gain the needed capacity to accomplish program and training goals, and to begin the assumption of costs by the partnering community colleges as the grant period begins to end.

Detailed Budget Breakdown: The subsequent pages are the budget breakdown by college by year.
Phillips Community College of the University of Arkansas

<table>
<thead>
<tr>
<th>PERSONNEL</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty F/T</td>
<td>$45,000</td>
<td>$46,350</td>
<td>$47,741</td>
<td>$139,091</td>
</tr>
<tr>
<td>Fringes (33%)</td>
<td>$14,850</td>
<td>$15,296</td>
<td>$15,755</td>
<td>$45,900</td>
</tr>
<tr>
<td>Faculty P/T</td>
<td></td>
<td>$20,000</td>
<td>$30,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Total Personnel</td>
<td>$59,850</td>
<td>$81,646</td>
<td>$93,496</td>
<td>$234,991</td>
</tr>
<tr>
<td>Travel</td>
<td></td>
<td></td>
<td></td>
<td>$3,000</td>
</tr>
<tr>
<td>Supplies</td>
<td></td>
<td></td>
<td></td>
<td>$5,000</td>
</tr>
<tr>
<td>Tuition Support</td>
<td></td>
<td></td>
<td></td>
<td>$20,000</td>
</tr>
<tr>
<td>Evaluator</td>
<td></td>
<td></td>
<td></td>
<td>$6,000</td>
</tr>
<tr>
<td>Equipment</td>
<td></td>
<td></td>
<td></td>
<td>$231,009</td>
</tr>
<tr>
<td>SUB-TOTAL</td>
<td>$294,859</td>
<td>$36,646</td>
<td>$108,496</td>
<td>$500,000</td>
</tr>
<tr>
<td></td>
<td>$400,000 funded by CBJT grant, and $100,000 funded by college</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect costs (34.5%)</td>
<td>$101,726</td>
<td>$33,343</td>
<td>$37,431</td>
<td>$172,500</td>
</tr>
<tr>
<td>Funded by College</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>$396,585</td>
<td>$129,989</td>
<td>$145,927</td>
<td>$672,500</td>
</tr>
</tbody>
</table>

$400,000 will be derived from the Community-Based Job Training grant and $100,000 is committed by the college. The Facility & Administrative (Indirect) costs will be totally absorbed by the college. This $172,500 together with the committed $100,000 represents a match of $272,500. The term Facility is included since it may be more cost effective to lease an existing facility that already has the required equipment. The final decision on equipment (over $5,000) purchase vice leasing of a facility will be coordinated with DOL/ETA if the grant is funded.
Standard 6. Physical Resources

A. Facilities
Classrooms, laboratories, administrative offices and other facilities must be adequate, equipped for safety, and shall be in compliance with pertinent governmental laws.

Response to Standard 6A:
The Phlebotomy Program is located in the Technical & Industrial (TI) building on the west side of the campus. The student laboratory is located on the north end of the building. The student laboratory provides over 1600 square feet of working space. The campus student laboratory is well equipped to provide the student with the learning of manual to automated techniques. The student laboratory is equipped with an emergency shower, fire blanket, eye wash station, fire extinguishers, chemical spill kit, broken glass receptacle, emergency exit, and a first aid kit. Fire alarm pull stations are located in the main hallways outside the laboratory. Each student’s work station is equipped with a safety shield. The College provides the students’ gloves. Fluid resistant laboratory coats are purchased by the students. Written and oral safety statements and demonstrations are given to students during the first laboratory session for each course.

Across the hall from the laboratory is the classroom designated for the phlebotomy program (TI 123). The classroom which is 520 square feet is allocated to the phlebotomy program. A wide variety of audiovisual equipment is available for use in the classroom and laboratory. The equipment available for use includes a Smart board, overhead projector, VCR/DVD players, slide projectors, computers, and data projectors. Most classrooms have a computer port that allows access to the PCCUA computer network and the internet. Designated classrooms are equipped with video equipment that can be reserved for live, compressed, interactive video presentations or taping of live presentations. All classrooms are equipped with fire extinguishers, fire alarm pull stations, and clearly marked fire exists.

Ample space for educational purposes is available in each of the clinical laboratories of the affiliate hospitals. Each laboratory has, in addition to service space, a conference area that may be used for student meetings, presentations, reviews, seminars, etc. Clinical sites also have library resources and internet access in or near the facility available for student use.
6B. Equipment and Supplies

Each student must have reasonable access to and experience with modern equipment and supplies.

Response to Standard 6B:
The capital equipment and supplies utilized in student instruction on the PCCUA campus are listed below. For a list of major equipment used for student instruction at each clinical experience site, refer to Standard 1 documentation.

**Major equipment and supplies utilized in student instruction on the PCCUA campus for core laboratory courses (Nonexpendable)**

<table>
<thead>
<tr>
<th>Equipment/Supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) Arterial and Venous Training Arms</td>
</tr>
<tr>
<td>(4) Adult arm simulators</td>
</tr>
<tr>
<td>(3) Adult hand simulators</td>
</tr>
<tr>
<td>(2) Newborn simulators</td>
</tr>
<tr>
<td>(2) Damon centrifuges</td>
</tr>
<tr>
<td>(1) Analytical centrifuge</td>
</tr>
<tr>
<td>Clinitek 100 urine chemistry analyzer</td>
</tr>
<tr>
<td>LabDaq Lab Information System</td>
</tr>
<tr>
<td>Glucometer</td>
</tr>
<tr>
<td>(1) Older adult arm simulator</td>
</tr>
<tr>
<td>Evacuated tubes, shields, needles, skin puncturing devices and collection tubes</td>
</tr>
<tr>
<td>Disposable transfer pipets</td>
</tr>
<tr>
<td>Glove, gowns, and masks</td>
</tr>
<tr>
<td>Organon Teknika Bac T alert blood culture system</td>
</tr>
</tbody>
</table>
6C. informational resources

Each student must have reasonable access to information resources containing current editions of books, periodicals and other reference materials in contemporary formats related to all content areas of the curriculum.

Response to Standard 6C:
The PCCUA Lewis Library is located on campus and houses over 36,581 book volumes. The library is open for student use during the day and evenings during the week. Information regarding the library and their services and hours of operation are provided to students in the college catalog and through the PCCUA Web site.

The courses in the program use current textbooks, instructor-prepared manuals and handouts, and computer software. The textbooks used in the program are representative samples of periodicals, references and computer software programs are listed below.

Phlebotomy Program Required Textbooks

Phlebotomy Essentials, 4th Edition
McCall, Tankersley; Lippincott, Williams & Wilkins, 2008

Phlebotomy Essentials Workbook, 4th Edition
McCall, Tankersley; Lippincott, Williams & Wilkins, 2008

List of Current Periodicals and References Available in the PCCUA Library. Many are also available electronically to students and faculty off-site.

Advance for Medical Laboratory Professionals
American Biotechnology Laboratory
American Laboratory
Bioscience Technology
BioTechniques
Clinical Laboratory Science
Laboratory Equipment
Lab Medicine
MLO, Medical Laboratory Observer
Morbidity and Mortality Weekly Report

Partial List of PCCUA Electronic Databases
Available to Students through the PCCUA Lewis Library Homepage

Academic Search Elite (EBSCO)-Full text articles from 1,850 scholarly journals
CINAHL (EBSCO)-Database of nursing and allied health articles
ERIC (EBSCO)-Index of education journals and resources
Gale Discovering Collection- Dictionary and specialized encyclopedias with coverage of science & health, geography, cultures, history, biography, and literature. Includes multimedia collection (images, video clips)
SIRS Discover on the Web- Site has full text magazine and newspaper articles as well as web sites, an almanac, dictionary, thesaurus, and current events.
**SIRS Knowledge Source** - Provides a portal to relevant, credible information carefully, hand-selected by SIRS editorial staff. When students use SIRS SKS, they receive best-of content designed to support student research, study, and homework in key curricula subjects.

**World Cat** - Database of information the things libraries own that is constantly updated by information professionals.

6D. Instructional Resources

Adequate instructional resources must be available to facilitate each student’s attainment of entry level competencies.

Response to Standard 6D

Demonstration materials are available for all core courses on campus. These materials include, but are not limited to, commercially-prepared sera, commercial control materials, preserved urine sediments, glucose tolerance solution, and many CLIA test kits including HCG, mono, strep and flu. The faculty also has access to patient samples/specimens from the HRMC Clinical Laboratory. For purposes of confidentiality, all patient identifiers are removed from these samples.

**Instructional Materials**

**Computer Tutorials:**
- Needlestick Prevention Training

**DVDs:**
- The Applied Phlebotomy DVD Series
- Part 1 Basic Venipuncture
- Part 2 Preventing Preanalytical Errors
- Part 3 Avoiding Phlebotomy-Related Lawsuits
- Part 4 Skin Puncture and Newborn Screens
- Part 5 Arterial Blood Gas Collection

- Standards for Infection Control
- Part 1 Principles of Infection Control
- Part 2 Preventing Bloodborne Pathogens Transmission

- Break the Chain: Your Role in Preventing the Spread of Infection
- Confidentiality: HIPAA Today
- Human Immune System
- The Human Body: How It Works Circulatory System

**Student Laboratory:**
- Arterial and Venous Training Arms
- Adult Simulation Arms
- Pediatric Simulation Arms
- Adult Simulation Hands
- Newborn Simulation
- Heel Simulation
6E. Computer Technology

Each student must have access to and experience with contemporary computer technology.

Response to Standard 8E
Students have access to extensive computerized instructional materials on the PCCUA campus. PCCUA has a combined total of 145 PC workstations for library catalog searches, internet access, database searches, computer-based learning sessions, and electronic mail. Eight (8) computers are also available for use in the student computer laboratory in the Technical & Industrial building, which are accessible during scheduled laboratory sessions. All PCCUA students are given a PCCUA email account.
I. STUDENTS

Standard 7. Program Description/Publications

Students must be provided with a clear description of the program and its content and current publications, which must include:

A. Program mission statement;
B. Program goals and competencies;
C. Course objectives;
D. Applied education assignments (if applicable);
E. Admission criteria, both academic and non-academic;
F. A list of course descriptions;
G. Names and academic rank or title of the program director and faculty;
H. Tuition and fees with refund policies;
I. Causes for dismissal;
J. Rules and regulations;
K. A listing of clinical facilities (if applicable);
L. Essential functions, and
M. Policies and procedures when applied experience cannot be guaranteed.

Response to Standard 7:
The above stated items (7 A-M) can be found in a variety of publications and resources which are available to students. Many of these items are located in more than one publication.

Publications and resources include the following:

- The PCCUA Web site (http://www.pccua.edu)
- The PCCUA Student Catalog
- The PCCUA Phlebotomy Program Student Handbook
- The PCCUA Phlebotomy Program Information Packet and Application

The following table identifies specific publications in which items in Standard 7A-M are found.
<table>
<thead>
<tr>
<th>Standard 7</th>
<th>Publications</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Catalog</td>
</tr>
<tr>
<td>Program mission statement</td>
<td>✔</td>
</tr>
<tr>
<td>Program goals and competencies</td>
<td>✔</td>
</tr>
<tr>
<td>Course objectives**</td>
<td></td>
</tr>
<tr>
<td>Applied education assignments**</td>
<td></td>
</tr>
<tr>
<td>Admission criteria, both academic and non-academic</td>
<td>✔</td>
</tr>
<tr>
<td>A list of course descriptions</td>
<td>✔</td>
</tr>
<tr>
<td>Names and academic rank or title of the program director and faculty</td>
<td>✔</td>
</tr>
<tr>
<td>Tuition and fees with refund policies</td>
<td>✔</td>
</tr>
<tr>
<td>Causes for dismissal</td>
<td>✔</td>
</tr>
<tr>
<td>Rules and regulations</td>
<td>✔</td>
</tr>
<tr>
<td>Listing of clinical facilities</td>
<td></td>
</tr>
<tr>
<td>Essential functions</td>
<td></td>
</tr>
<tr>
<td>Policies and procedures when applied experience cannot be guaranteed**</td>
<td></td>
</tr>
</tbody>
</table>

**Written into syllabus
Standard 8. Admissions

Admission of students, including advanced placement if available, must be made in accordance with the clearly defined and published practices of the institution. Specific academic standards and essential functions required for admission to the program must be clearly defined, published and provided to prospective students and made available to the public. The signature of the student indicating full understanding of the policies for progression in the program and completion of the program must be secured.

Response to Standard 8:
Admission information for Phillips Community College of the University of Arkansas can be found in a variety of places.
• PCCUA Application Packet
• PCCUA Web site (www.pccua.edu)
• PCCUA College Catalog

The PCCUA Phlebotomy Program application information can also be found in a variety of places.
• PCCUA Phlebotomy Brochure
• PCCUA Application Packet
• PCCUA College Catalog
• PCCUA Web site (www.pccua.edu)
STUDENT HANDBOOK SIGNATURE FORM

I have read and understand the 2010-2011 Phlebotomy Student Handbook and agree to abide by the policies of Phillips Community College of the University of Arkansas Phlebotomy Program. I understand this document will become a part of my permanent file.

__________________________________________  ____________
Student                                          Date

__________________________________________  ____________
Witness                                          Date

THIS DOCUMENT MUST BE SIGNED AND RETURNED TO THE PROGRAM DIRECTOR. IT WILL BECOME A PART OF YOUR PERMANENT FILE.
Admission Requirements

1. Complete an Application for Admission (which may be obtained from the Admissions/Student Services Office or via online at www.pccua.edu).

2. Provide results of ACT or COMPASS testing. Scores are used to determine placement in English, reading, and math. Students enrolling must submit ACT scores (19 or above in English/Math) or take the COMPASS placement test administered at the college. PCCUA administers the COMPASS test on a daily basis. Appointments may be made with Glenda Allen at (870) 946-3506 ext. 1607 (DeWitt), Susie Puckett at (870) 338-6474, ext. 1134 (Helena) or Terry Simpson at (870) 673-4201, ext. 1609 (Stuttgart).

3. Provide a copy of high school transcript or GED scores. Must be an official high school transcript with graduation date and a stamped school seal, General Educational Development (GED) scores, and/or college transcript(s). Please request that the institution mail the transcript directly to the PCCUA Office of Admissions, P.O. Box 785, Helena, AR 72342. (If transcript is in a maiden name, please ask high school to indicate your current last name on form.) A request form may be obtained from the Admissions/Student Services Office or via online at www.pccua.edu.

4. Provide shot record. Arkansas State Law requires all students born on or after January 1, 1967, provide proof of immunity against measles and rubella. Students must have proof of two measles immunizations and one rubella immunization.

5. Financial Aid. Students applying for financial aid may contact Glenda Allen at (870) 946-3506 ext. 1607 (DeWitt), Barbara Stevenson at (870) 338-6474, ext. 1160 (Helena), or Toni Carter at (870) 673-4201 ext. 1822 (Stuttgart). Students may also apply online at www.fafse.ed.gov.

6. Parking Permit. Students parking on-campus are required to have an annual permit. This may be obtained at the time of registration.

7. Arrange for Payment. Payment arrangements should be completed with the Business Office before the start of class.

* These documents needed prior to admission and receipt of financial aid.

Note: Students transferring from another college or university must provide the following documents in addition to the requirements listed in section “A” above.

Provide an official transcript from all colleges attended. Transfer applicants should submit an official transcript from all colleges attended. Please request that the institution mail the transcript directly to PCCUA, P.O. Box 785, Helena, AR 72342. (If transcript is in a maiden name, please ask college to indicate your current last name on form.)

* These documents needed prior to admission and receipt of financial aid.

1. Complete a PCCUA Application for Admission.

2. For enrollment in a college-level Math or English course: Provide results of ACT or COMPASS testing along with a completed application.

Note: Provisional students are not eligible for financial aid. When a Provisional Student has completed a total of 12 credit hours or wishes to enroll in courses which will cause him/her to exceed 12 credit hours, he/she is no longer eligible to enroll in a provisional status. Prior to enrolling in courses which exceed the 12-hour limit, the student must complete all of the General Admission Requirements and be admitted to the College. After being admitted to the College, these students will be assigned an academic advisor and may continue to take courses without pursuing an award.

PCCUA does not discriminate on the basis of sex, disability, race, color, national origin, creed, family, religion, or age in its admissions, access, or employment policies. If you have any questions, contact the Admissions Office or one of the numbers listed below or via e-mail which is located on our website at www.pccua.edu.

DeWitt (870) 946-3506
Shawanna Wansley #1528
Jennifer McCollum #1515
Helena (870) 338-6474
Judy Wooster #1339
Virgil Berg #1188
Ashley Smith #1105
Stuttgart (870) 673-4201
Ellen McWhirter #226
Evelyn Qualls-Hamilton #1866
Enrolling for: (Check One)
_Fall _Spring _Summer _Year to Enroll

Which Phillips College campus do you plan to attend?
(Check all that apply) __DeWitt __Helena __Stuttgart

1. Social Security Number: ______ - ______ - ______

2. Full Name:
_Last Name_________________________ (MI) ____________
(First Name)_________________________ (City)

3. Mailing Address:
_Street Address_____________________
(City)___________________________
(State/Zip)_____________________
(County)___________________________
(Home Phone)______________________(Work Phone)_____________________
(Cell Phone)_____________________

4. Date of Birth /______/ ______ (MM/DD/YY)

Place of Birth ________________________ Age ______
(City, State)_________________________

5. How long have you lived in Arkansas? ______ yrs. ______ mos.

6. How long have you lived in Phillips or Arkansas County? ______ yrs. ______ mos.

*7. Race-Ethnic Category: ________ 01: Non-Resident Alien
______ 02: Black, Non-Hispanic
______ 03: American Indian/Aleut
______ 04: Asian or Pacific Islander
______ 05: Hispanic
______ 06: White, Non-Hispanic
______ 07: Race/Ethnicity Unknown

8. International Students: If you are not a citizen of the United States, what is your country of citizenship?

9. Visa Type? ________________________

*9. Sex: ______ Male ______ Female

10. Name of High School Attended: ____________________________

(City, State)_________________________
(If current high school student, list grade level ______)

11. High School Graduation Date: ______ /______/_____ (MM/DD/YY)

12. If you are not a high school graduate and have passed the G.E.D. or hold an equivalency diploma, indicate:
Date Issued ______ /______/_____ (MM/DD/YY)

State Issued GED ____________________________

13. Check highest educational level completed by:
Mother: ______ high school ______ some college
______ 2-year college degree ______ 4-year college degree
Father: ______ high school ______ some college
______ 2-year college degree ______ 4-year college degree

14. Have you previously attended PCCUA? ______ Yes ______ No

If yes, please indicate the name under which you last attended:
_Last Name__________________________(MI) ____________
(First Name)_________________________

15. List all the colleges/universities previously attended in order of attendance, including any attendance at PCCUA.

16. What will be your program of study while at PCCUA? __________________________________________________________________________________________

17. Name of and address of parent or legal guardian. (Students 21 years of age or older are not required to give parent's name and address.)

18. Your e-mail address: ______________________

19. Have you ever been convicted of a felony? ______ Yes ______ No

If yes, explain: ____________________________________________________________________________________

20. I hereby make application for admission to PCCUA and agree to abide by the regulations of the college while I am a student. I furthermore declare that the information on this application is complete and accurate.

21. Applicant's Signature: ____________________________

22. Date: ______ /______/_____ (MM/DD/YY)

*Used for Federal Reporting Only

Mail to: Phillips Community College
       Of THE UNIVERSITY OF ARKANSAS
       P.O. Box 785 Helena, AR 72342-0785

71
PLB Program
P. O. Box 785
Helena-West Helena, AR 72342-0785
(870) 338-6474 Extension 1079

Name: Last _______________ First _______________ Middle _______________ Maiden _______________

Address: Street ___________________ City ___________________ State ______ Zip Code __________

Phone: ___________________ E-mail: ___________________ Fax: ___________________ Cell __________

Date of Birth: ___________________ Gender: M ☐ F ☐ Soc. Sec # ___________________

*Single ☐ *Married ☐ *Widowed ☐ *Number of Dependents _____ *Race: Caucasian ☐ Black ☐ Asian ☐ Hispanic ☐
*Information noted with asterisks is used for statistical purposes only

High School: ___________________ Date of Graduation: ___________________

GED: State Department of Education ___________________ Date Taken ___________________

List all colleges attended including PCCUA: (Use back of this form if necessary) Failure to report all colleges attended, including PCCUA, may result in immediate dismissal from the phlebotomy program.

<table>
<thead>
<tr>
<th>Name of college</th>
<th>Location</th>
<th>Dates attended</th>
<th>Credit hours and degree earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you written the ACT or the SAT? No ☐ Yes ☐ If yes, which one? Composite Score __________

Occupation ___________________ Have you ever worked in a medical laboratory? Yes ☐ No ☐

Person to notify in case of emergency:

Name and Address ___________________ Phone ___________________

State your reason for wanting to enter the PLB program

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Will you need financial assistance? Yes ☐ No ☐ If yes, have you applied? Yes ☐ No ☐

Have you ever plead guilty to or been convicted of any crime? Yes ☐ No ☐

Failure to accurately answer questions asked on this application may result in immediate dismissal from the program.

Signature ___________________ Date ___________________

For official use only:

Date and Time Received in PLB Program Office ___________________ R S 10
June 1, 2010

Dear Prospective Phlebotomy Student:

Thank you for considering the program at PCCUA as a path for becoming a phlebotomist. The attached packet of material provides you with admission and course requirements, academic criteria, costs, and other pertinent information concerning our Phlebotomy Program.

The department has a long history of success in preparing qualified individuals for the national registry examination and the practice of safe, ethical clinical laboratory science. While enrolled in the Phlebotomy Program, students attend class and participate in supervised practice in the campus lab before working in the clinical area.

PCCUA’s Phlebotomy Program has a reputation for excellence and is approved by the National Accrediting Agency for Clinical Laboratory Sciences. PCCUA’s graduates are recruited by local agencies as well as agencies from surrounding states.

Please read the enclosed program statement before making a commitment to the program. If you decide to enroll and have not taken the ACT within the last four years, the first step is to call the Advisement Center at 870-338-6474, ext. 1134 and make an appointment to take the COMPASS test. Testing is also available in Arkansas County by calling the DeWitt campus at 870-946-3506 or the Stuttgart campus at 870-673-4201 to schedule a test date. A description of each test is included in this packet.

After reviewing the material in this packet and arranging a time to take the COMPASS test, please call to make an appointment with me to review your scores. If you have questions, please call 870-338-6474, ext. 1079 or crector@pccua.edu to reach me. I look forward to talking with you regarding your career goals.

Sincerely,

Claude Rector, MA, MLS(ASCP)

Phlebotomy Program Director
Disclaimer

In accordance with college policy as stated in the College Catalog, this publication is not to be construed as a contract between the student and the Phlebotomy Program. All programs within the Division of Allied Health reserve the right to make changes at any time in individual courses, the curriculum leading to a degree or certificate, as well as policies contained in the Phlebotomy Information Packet, College Catalog, student handbooks, and web. Students are required to be familiar with and observe all rules and regulations of the College.
Program Statement
The Phlebotomy Program within the Division of Allied Health is dedicated to providing students with the appropriate education necessary for the development of entry-level competencies in phlebotomy. Graduates of the Phlebotomy Program will be prepared to sit for entry-level national certification examinations in the discipline and will be prepared to practice as ethical and competent professionals.

Admission
Students who wish to be considered for admission to the phlebotomy program must meet the following criteria:

1. Fulfill all college admission requirements.

2. Submit official high school transcript documenting graduation from high school or official Arkansas High School Diploma/GED certificate and official transcripts from all previously attended colleges to the Registrar's office and Phlebotomy Program Director.

3. Document a minimum 2.0 cumulative grade point average in all courses taken at PCCUA.

4. Provide SAT, ACT, ASSET, or COMPASS scores taken within the last 4 years that meet the minimum skill level in reading, math, and English or complete all required developmental courses prior to making application to the phlebotomy program.

5. Submit completed Phlebotomy Program application to the Phlebotomy Program Director on the Helena-West Helena campus.

Students who speak English as a second language must also take the Compass exam to prove proficiency in English by testing into Freshman English I and requiring no developmental reading.

Students are accepted to the Phlebotomy Program each year on a first-come, first-served basis of those who meet the minimum admission criteria.

Enrollment Process
Before enrolling in the first semester Phlebotomy courses, the student must provide the following documents:

1. Completed Health Statement
2. Proof of immunization compliance
   - Current Td
   - Current MMR, if born after 1957
   - Initiation of Hepatitis B series
3. Proof of TB skin test within the last year
4. Proof of RPR screen
5. Signed Communicable Disease Statement
6. Recent picture
7. Proof of liability insurance
Pre-requisites

High school diploma or equivalent
Acceptable pre-admission test scores

Freshman Year

Fall Semester-16 hours
BY 103  Introduction to Anatomy & Physiology
OT 113  Medical Terminology I
EH 113  Freshman English
MS 1023 Elementary Algebra or higher
CT 114  Computer Information Systems

Spring Semester-12 hours
PLB 113  Phlebotomy Procedures
PLB 123  Special Techniques
PLB 116  Phlebotomy Skills

- A minimum grade of "C" is required in each phlebotomy course.
- The Phlebotomy Program is NAACLS' approved.
  'National Accrediting Agency for Clinical Laboratory Sciences
  5600 N. River Rd., Suite 720
  Rosemont, IL 60018-5119
  773-714-8880.
Technical Qualifications of a Phlebotomist

These essential functions represent the non-academic demands of a phlebotomist. All applicants are expected to meet these requirements.

**Communication Skills:** Must be able to communicate effectively in written and spoken English. Must be able to comprehend and respond to both formal and colloquial English both directly and by telephone.

**Movement Requirements:** Must be able to move readily from one location to another in such physical settings as the clinical laboratory, patient rooms, emergency center, elevators and stairways. Must be able to reach patients lying in hospital bed and patients seated. Must be able to perform delicate manipulations which require good eye-hand coordination. Must have ordinary ability to lift and move objects. Must have unimpaired sense of touch and temperature discrimination.

**Visual:** Must have good visual acuity with ability to discriminate color reactions.

**Behavioral:** Must be able to maintain patient confidentiality and exercise ethical judgment, integrity, honesty, dependability and accountability in the performance of their laboratory responsibilities and function effectively under stress and taxing workloads.
Associate of Applied Science Degrees & Certificates

The Arkansas Department of Higher Education has asked all Arkansas institutions offering an A.A.S. Degree to print the following general disclaimer:

"The Associate of Applied Science Degree is designed for employment purposes and it should not be assumed that the degree or the courses in the degree can be transferred to another institution. While some institutions do accept some courses in A.A.S. Programs, the general rule is that courses in A.A.S. Degrees are not accepted in transfer toward bachelor's degrees. Students to whom transfer is important should get assurances in writing in advance from the institution to which they wish to transfer."

Allied Health

MEDICAL LABORATORY TECHNOLOGY (MLT.AAS H)

MLT Prerequisites: High school diploma or equivalent, two years high school algebra or equivalent, acceptable pre-admission test scores. Application must be made to the MLT program. Eight applicants plus two alternates are accepted each year on a first-come, first-served basis of those meeting the prerequisites. Graduates are eligible to take the national registry examination for MLT.

The curriculum of the MLT program which leads to an Associate of Applied Science degree is an integrated program of technical courses in medical laboratory science, fundamental courses in natural science, and complementary humanities and social sciences. A minimum grade of "C" is required in each medical laboratory science course. The MLT program is NAACLS* accredited.

GROUP I: ENGLISH AND FINE ARTS

6 hours:
EH 113——Freshman English I
EH 123——Freshman English II

GROUP II: SOCIAL SCIENCE

3 hours from the following:
PSY 213——Gen Psychology
SY 213——Fund of Sociology
HY 113——Western Civilization
HY 123——Western Civilization
HY 213/223——U.S. History
ES 213——Macroeconomics
ES 223——Microeconomics
PLS 213——American Fed Gov

Total Hours Required: 70

PHLEBOTOMY TECHNICAL CERTIFICATE

(PHLE.TC H)

The Phlebotomy Program is a two (2) semester Technical Certificate program. Graduates of the program are eligible to take the national phlebotomy certification examination. Application must be made to the Phlebotomy program. Academic admission requirements are: high school graduate or equivalent, 18 years old and acceptable pre-admission test scores. Acceptance into the phlebotomy program is on a first-come, first-accepted basis of those meeting the minimum entrance requirements. The Phlebotomy program is NAACLS* approved.

FALL SEMESTER

16 hours:
BY 103——Intro Anatomy & Physiology
OT 113——Medical Terminology I
EH 113——Freshman English I
MS 1023—— Elem. Algebra or higher
CT 114——Computer Info. Systems

SPRING SEMESTER

16 hours:
PLB 113——Phlebotomy Procedures
PLB 123—— Special Techniques
PLB 116——Phlebotomy Skills

Total Hours Required: 28

NURSING (ADN) (NGI)

The Associate Degree Nursing (ADN) is approved by the Arkansas Board of Nursing and accredited by the National League for Nursing Accrediting (NLNAC). Program graduates submit an application to write the National Council Licensure Examination for Nurses (NCLEX-RN). Applicants who violate any federal local drug law or conviction of prelude licensure in Arkansas State Board of Nursing and federal criminal before processing an application for licensure. Clinical facilities also maintain background check and abuse test as a condition of clinical respective facility.

For further program information, contact the Arkansas State Board of Nursing at:
University Tower Building, 1103 S. University Ave, Little Rock, AR 72204
Phone: 501-686-2700
Fax: 501-686-2711
Web Site: http://www.ar

The National League for Nursing Accrediting Commission (NLNAC) is also information regarding the program contact NLNAC at:
3343 Peachtree Road, NE, Atlanta, GA 30302
Phone: (404) 975-50
Fax: (404) 975-50
Web Site: http://www.nl

The curriculum focuses on concepts: nursing process, nursing behaviors, needs, development, client, and care. Students are introduced to an overview course and develop a understanding of these concepts in the curriculum. The role of the provider and client is the emphasis on the professional is it the behaviors that assist clients cope with stress as well healthcare interventions that support, rest health is emphasized. The use of communication and evidence of essential components of the medical model are used to meet Maslow's hierarchy for clients of all social and chronological ages.

Admission

Students are admitted to the Helena Campus every year, in even years and Stuttgart C years. Students who wish to be admission in the fall of 2009 to Degree Nursing (ADN) Program the following criteria:

1. Fulfill all college admission
2. Submit ACT score, if take
PHLEBOTOMY PROGRAM

The Phlebotomy Program is a two (2) semester Technical Certificate program. Graduates of the program are eligible to take the national phlebotomy certificate examination. Application must be made to the Phlebotomy program. Academic admission requirements are: high school graduate or equivalent, 18 years old and acceptable pre-admission test scores. Acceptance into the Phlebotomy program is on a first-come, first-accepted basis of those meeting the minimum entrance requirements. The Phlebotomy program is NAACLS* approved.

Campus Contact:
Claude Rector, Program Director
(870) 338-6474, ext. 1079
crector@pccua.edu


PHLEBOTOMY

Job Opportunities:
• Hospital Laboratories
• Physicians’ Offices
• Clinics

The starting salary of most Phlebotomists ranges from $19,500 to $27,300 depending on job location and individual competence.

Phlebotomy Curriculum

First Semester
BY 103 .......... Intro to Anatomy & Physiology
OT 113.......... Medical Terminology I
EH 113 .......... Freshman English
MS 1023 ......... Elem. Algebra or higher
CT 114 .......... Computer Information Systems

Second Semester
PLB 113.......... Phlebotomy Procedures
PLB 123.......... Special Techniques
PLB 116.......... Phlebotomy Skills* National Accrediting

*The Phlebotomy program is offered on the Helena Campus only.

* Flexible class scheduling can accommodate student work schedules or cohort groups. Contact an advisor for options.

www.pccua.edu

Phillips College provides equal educational and employment opportunity regardless of sex, marital or parental status, race, color, handicap, religion, or age.
Standard 9. Acceptable Conduct

Rules and regulations governing acceptable personal and academic conduct must be defined and provided to all students upon entering the program.

Response to Standard 9:
Rules and regulations governing acceptable personal and academic conduct are included in several publications.

- PCCUA MLT Program Student Handbook (pp.19-25, pp.27-28, p.30, and pp.34-36)
- PCCUA College Catalog
- PCCUA Student Handbook/Planner
- PCCUA Web site (www.pccua.edu)

The Phlebotomy Program distributes a copy of the Program’s Student Handbook to all program students. This manual contains information in regards to rules and regulations governing acceptable personal and academic conduct. Each student signs a form at the back of the Phlebotomy Student Handbook that states the student has read, understands and agrees to abide by the policies of PCCUA Phlebotomy Program. This form becomes part of the students’ permanent record.
PCCUA DISCIPLINE POLICY SCOPE

PCCUA has a standard of conduct that will be enforced at all times. Unacceptable behaviors are identified in the PCCUA Student Handbook. In order to sustain an environment that promotes responsibility, cooperation, respect, and learning, any PCCUA employee is expected to correct inappropriate conduct anywhere on College property at any time.

CLASSROOM DISCIPLINE

Respect for other students’ right to learn is imperative. Further, if a student’s behavior is disruptive, an instructor has the right and obligation to make the student correct the behavior. In extreme cases an instructor may ask a student that will not adhere to the PCCUA student conduct policy to leave the class. In certain cases the instructor may have to request that the Vice Chancellor for Student Services or Campus Vice Chancellor in Stuttgart or DeWitt intervene. If the situation cannot be resolved, the student may be suspended (temporary dismissal) or even expelled (permanent dismissal) from the class or the College depending on the nature of the offense.

PCCUA CAMPUS DISCIPLINE

If the student’s behavior is outside the boundary of the classroom, it is the responsibility of PCCUA employees to correct inappropriate behavior. The College recognizes two categories of offenses: less serious offenses, and very serious offenses.

OFFENSES

Less Serious Offenses
These offenses are less serious in nature but do disrupt instruction. Usually, Informal Resolution eliminates the problem. Persistence of less serious behavior can result in a Formal Resolution.

- Talking during the lecture or activity
- Using cell phones
- Use of loud or profane language
- Disrespectful language toward the instructor
- Disrespectful language toward another student
- Constant arguing or disagreeing with the instructor or student
- Loud, inappropriate laughing or screaming
- Any intentional behavior that disrupts the ongoing instruction in the classroom

Very Serious Offenses
These are actions which demand immediate attention and result in a Formal Resolution. This process begins with Stage 4 (no warning for a violation).

Very Serious Offenses
- Stealing
- Drunk and disorderly conduct
- Using, distributing, or selling drugs or alcohol
- Possession of a hand gun
- Loud, abusive, or obscene language or gestures
- Destructive behaviors toward property or individuals
- Indecent exposure, illicit sexual relations, perversions
- Misuse of college documents or records
- Abusive behavior toward an instructor, student, or PCCUA employee including physical abuse, verbal abuse, threats or assault
- Unauthorized people on campus
- Inappropriate touching of self and others
• Stalking (persistently contacting another person without consent)
• Terroristic threatening
• Any action which endangers self or others
• Technology and Computer Violations (See Computer, Internet, E-mail and Other Electronic Communication Acceptable Use Policy)
• Fire and Safety Endangerment
• Dishonesty and Cheating (See Cheating Policy)

PROCESS FOR HANDLING DISCIPLINE OFFENSES

Instructors have several choices for dealing with disruptive students. Disruptive behavior interferes with others’ right to learn. The following steps should be followed when dealing with disruptive students in an informal way. It is always best to talk to a student before taking formal action.

All instructors should share expected behaviors on the first day of class and identify unacceptable behaviors to the students.

There are four stages of student discipline at PCCUA.

Stage 1: First Warning for a Less Serious Offense

A student at this stage has become disruptive or behaved inappropriately. The student is warned that the behavior is unacceptable and given a warning. The faculty member completes a Student Discipline Form which must be signed by both the faculty member and the student and sent to the Registrar. Notification will be made to the division dean.

Sometimes within one class session, a student’s persistent and interruptive behavior may result in the faculty member’s asking a student to leave. The faculty member completes a Student Discipline Form which must be signed by both the faculty member and the student and sent to the Registrar. Notification will be made to the division dean.

Stage 2: Second Warning for a Less Serious Offense

A student at this stage has not changed the disruptive or inappropriate behavior. The student receives a second warning. The faculty member completes a Student Discipline Form which must be signed by both the faculty member and the student and sent to the Registrar. Notification will be made to the division dean.

• The second warning should also include a talk with the student explaining why the behavior is unacceptable.

Stage 3: Third Warning for a Less Serious Offense

A student at the stage has failed to correct the behavior. This third and final warning results in the faculty member’s asking the student to leave the class. The faculty member completes the Student Discipline Form, which must be signed by both the faculty member and the student and sent to the Registrar. At this stage a student may not return to class until the Vice Chancellor for Student Services or the Campus Vice Chancellor (Stuttgart or DeWitt) has discussed the problem with the student and the faculty member. If there is faculty agreement about student’s readmission to class, the student may be readmitted to class. If there is faculty
disagreement about readmission of the student to class, the student may be dropped from the roll. The student has the right to request a formal hearing (Due Process).

**Stage 4: No Warning for a Violation of a Very Serious Offense**

A student at this stage has committed a very serious offense. A faculty member or employee in this situation informs the student that he/she needs to report to the Office of the Vice Chancellor for Student Services Office or the Campus Vice Chancellor for Stuttgart and DeWitt. Campus security may be called.

**SANCTIONS**

Certain behaviors must be resolved in a formal manner. Whenever a serious behavior occurs, that behavior must be documented by all parties involved. The **Student Handbook** identifies the status of a student. Whenever the Vice Chancellor for Student Services or the Campus Vice Chancellor in Stuttgart or DeWitt is called to settle a dispute related to inappropriate classroom conduct, the student is considered on probation for the particular course for which he or she is enrolled. The seriousness of an offense may result in probation, which may result in suspension or expulsion. See **Student Handbook**

**Disciplinary Probation**

The student's participation in college life is placed on a provisional basis for a specified period of time. The violation of the terms of disciplinary probation or further violation of college regulations may lead to more serious disciplinary action, such as suspension from a course or from the College or expulsion. Restrictions of privileges may also be conditions of probation. Students who have had any disciplinary counsel with the Vice Chancellor for Student Services or a Campus Vice Chancellor are on probation.

**Suspension**

When a student's behavior is unacceptable and violations of a serious nature have been observed to the extent that they reflect most unfavorably upon character, judgment and maturity and/or are harmful to the well being of the student body and the college, the student may be suspended from the college. Suspension is not a permanent condition and usually does not place an extraordinary burden on a faculty member from whose class the student has been suspended. Any work missed during suspension may result in an "F". A student may be suspended from a class or the campus for a semester.

**Expulsion**

Expulsion is reserved for students committing serious violations which involve physical or verbal abuse, assault, mistreatment of any person; or cause threat or damage to individuals, the student body, the College, College property, or self. In these cases, the student will be separated from the College on a permanent basis. In addition to this action, the student must make reparation for damages, if any.

<table>
<thead>
<tr>
<th>Clemency Clause</th>
</tr>
</thead>
<tbody>
<tr>
<td>A student who is expelled may be allowed to return after waiting a minimum of five years. A student seeking readmission is required to file a <strong>Disciplinary Appeal</strong>. Readmission may or may not be granted by the Student Relations Committee.</td>
</tr>
</tbody>
</table>

**Violations Which May Result in Immediate Suspension or Expulsion**

- Possession of an illegal substance
- Violence or threat of violence toward others
- Violence or threat of violence toward the College
- Violence or threat of violence toward one's self
- Possession of weapons
- Criminal behavior

**STUDENT DUE PROCESS**

An objective of Phillips Community College is to provide an opportunity for education to all of its students. In order to achieve this objective, it is important to define standards of conduct enabling students to work with faculty and staff is a positive manner. The student is responsible for compliance with
DISHONESTY

Procedure for Discipline of Cheating and Plagiarism
The responsibility for and authority in initiating discipline arising from violations of rules against dishonesty during the process of the course are vested in the instructor of that course.

Plagiarism
Offering the work of another as one's own without proper acknowledgement is plagiarism. Therefore, any student who fails to give appropriate credit for ideas or materials he/she takes from another, whether fellow student or a resource writer, is guilty of plagiarism. This includes downloading or buying papers from the Internet and cutting and pasting from the Internet without proper acknowledgement.

Cheating
a) Copying from another student's paper
b) Using any unauthorized assistance in taking quizzes, tests, or examinations
c) Possession during a test of materials that are not authorized by the person giving the test, such as class notes or specifically designed "crib notes" or any other device or technology that would aid in cheating
d) Dependence on the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out assignments
e) The acquisition, without permission, of tests or other academic material belonging to a member of Phillips Community College of the University of Arkansas
f) Aiding and abetting another person in committing any form of academic dishonesty

DUE PROCESS STEPS

Step 1
Student notifies the Vice Chancellor for Student Services that he/she would like to appeal a discipline decision.

Step 2
Within three (3) days the student is notified in writing of the exact time and date of the appeal meeting and the witnesses who will be present. The student may bring an advisor.

Step 3
The appeal is heard by the Student Relations Committee. The student may question or confront the witness(es). The College employee making the charge may also question the student.

Step 4
The Student Relations Committee makes a decision. The student is immediately notified in writing of that decision. A record of the proceedings will be filed in the Registrar’s Office. A permanent copy of the appeal will be placed in the student’s file.

Administrative Policy 405.1

PLAGIARISM POLICY
Webster (1990, p. 691) defines plagiarism as “stealing the language, ideas, or thoughts from another, representing them as one’s own original work.”

STUDENTS MUST USE MICROSOFT WORD FOR ALL WRITTEN WORK DONE OUTSIDE OF CLASS. PAPERS MUST BE SUBMITTED ON A COMPUTER DISK AND AS A HARD COPY.

Plagiarism OCCURS when the student:
Reproduces another person’s work as if it was the student’s own.
Paraphrases another person’s work without citing the original source.
Uses and paraphrases another person’s ideas without citing the original source.
Uses another person’s organization without citing the source.

TO AVOID plagiarism the student will:

- Cite the source with page number and place quotation marks around the statement with less than 40 words lifted verbatim from the source. Please refer to APA Manual for documentation of quotes greater than 40 words.
- Cite the source and paraphrase someone else’s writing. This means to restate the facts in your own words.

EXAMPLE:

SOURCE: Annually, half of the population will succumb to myocardial infarction
PARAPHRASED: Five out of ten people will die of heart attacks this year (the source, year).

*Rearranging an author’s words is NOT paraphrasing!
Cite the source when using another person’s outline or organizational process.
The student may cite commonly known information without plagiarizing. If the student has a question about what is considered commonly known information, the student should ask the instructor or document the source. The faculty believes healthcare information requires documentation, as this is not commonly known information.

Please refer to the APA Manual for appropriate documentation of sources and use of punctuation. An act of plagiarism will result in a grade of 0 on the assignment.

FOOD POLICY
Food and/or beverages may be consumed only in the student lounge. Any student observed eating and drinking in class will be immediately dismissed for the remainder of the class, and an absence will be recorded. Any student who accrues three absences for violating this policy will be dropped from the roll.

COMPUTER LAB
The computer labs on the Helena-West Helena and DeWitt campuses will be open from 8 a.m. until 4:15 p.m. for use by MLT/Phlebotomy students. Use of these labs requires a computer pass that will be distributed at the beginning of each semester and must be displayed at the computer station.

CELL PHONES
To provide an optimal learning environment, all cell phones and accessory devices must be turned off during class, clinical, and testing. Furthermore, students will not send or receive text messages or use cell phones to take pictures during class, clinical, and testing.

COMPUTER, INTERNET, EMAIL, AND OTHER ELECTRONIC COMMUNICATIONS ACCEPTABLE USE POLICY
Phillips Community College of the University of Arkansas (PCCUA) provides access to computer equipment, programs, databases, and the Internet for informational and educational purposes. All users of the college’s computer resources are expected to use these resources correctly and only for legal purposes.

It is the responsibility of supervisors, instructors computer lab supervisors, library staff, and any others who use Electronic Communications to ensure that users are aware of this policy.
Scope
This policy governs the use of all electronic communications (excluding telephones), and includes:

- Publishing and browsing on the Internet
- Electronic Mail (Email)
- Electronic bulletin boards (Blackboard)
- Electronic discussion groups (Blackboard)
- File transfer
- Streaming media
- Instant messaging
- Chat facilities

All of the above items will be referred to collectively as "electronic communications" in this document.

General Principles
Use of computing and network resources should always be legal and ethical, reflect academic honesty, and show restraint in the consumption of shared resources. It should demonstrate respect for intellectual property, ownership of data, the right to personal privacy, and to the right of individuals to freedom from intimidation and harassment.

All federal and state laws, as well as general college regulations and policies, are applicable to the use of computing resources. These include, but are not limited to, the Arkansas Freedom of Information Act, the Electronic Communications Privacy Act of 1986, the Family Education Rights and Privacy Act of 1974, and state and federal computer fraud statutes. Illegal reproduction of software and other intellectual property protected by U.S. copyright laws and by licensing agreements may result in civil and criminal sanctions.

Proper Use
Computer activities approved by a supervisor, instructor, library staff, or lab supervisor for educational purposes, such as use of:

- Internet for research
- Library database for research
- Internet for informational purposes
- Email as directed by instructors
- State-supplied software

Improper Use
This policy exists to ensure that Electronic Communications are properly used. Improper use of Electronic Communications includes, but is not limited to, the following:

- Breach of copyright
- Offensive material including pornography
- Illegal activity, including gaining or attempting to gain unauthorized access (or "hacking") to any computing, information, or communications devices or resources
- Error, Fraud, Defamation
- Viruses and spy ware
- Destruction of or damage to equipment, software, or data belonging to the college or other users
- Privacy violations
- Service interruptions
- Use of electronic communications in such a way as to impede the computing activities of others (such as initiating Email, chat, instant messaging)
- Download of software from the Internet or installation of a program(s) by a student from transportable media such as, CD, floppy disks, or jump (flash) drives.
- Unauthorized use of another user's ID and password
• Any and all other matters which the college, in its sole discretion, subject to PCCUA Policy limitations, and in consideration of the best interests of the public, determines to be an unacceptable purpose.

Non-Compliance
Non-compliance with this Policy
(1) May constitute a criminal offence, be classified as inappropriate behavior, pose a threat to the security of the college network, the privacy of staff and instructors, and may expose the users of the system or other persons to legal liability and
(2) Will be regarded as a serious matter and appropriate action will be taken when a breach of the Policy is identified.

Consequences to Breaches of this Policy
Consequences to breaches of the Acceptable Use Policy will generally be categorized using the following guidelines. Any matters not addressed below will be dealt with on an individual basis and on the relevant facts.

Potentially Harmful Activities:
• A first violation, if not unlawful, will result in a warning.
• A second violation will result in being banned from computer use for a designated period of time (deemed reasonable by supervisor, instructor, library staff, lab supervisor, or other authorized personnel).
• A third violation may result in the student losing computer lab privileges.

Illegal Activities:
Any offense that violates local, state, or federal laws may result in the immediate loss of all college computing and network privileges and may be referred to the office of Vice Chancellor for Students Services for Helena-West Helena or Campus Vice Chancellors for DeWitt and Stuttgart and/or law enforcement agencies.
PCCUA shall not be liable for any damages, including actual, special, punitive, consequential, exemplary, statutory, or other damages, attorneys fees or costs, charges, fines or any monetary compensation, to any user, for any claim, lawsuit, action or other proceeding arising from, relating to, or in connection with the use of its World Wide Web connection or other internet services.

Administrative Policy 231.06
Standard 10. Student Records

Student records must be maintained for admission, evaluation, and counseling or advising sessions. Individual grades and credits for courses must be recorded and permanently maintained by the sponsoring institution. The program must maintain the student records, conforming to any governmental regulations and the regulations of any other accrediting agencies.

Response to Standard 10:
Student records kept in the Phlebotomy Program office include the following:
- Copies of completed application forms
- Copy of official transcripts
- Physical examination records
- Copy of immunization records
- Signed Phlebotomy Student Handbook acknowledgment form
- Criminal background forms
- Correspondence with students
- Counseling records
- Clinical evaluation forms and course evaluations

PCCUA Phlebotomy Student Handbook, p17

MAINTENANCE OF ACADEMIC RECORDS
Academic files contain all graded course materials. Faculty will maintain an individual academic file for each student enrolled in a phlebotomy course. The file is housed in the appropriate faculty member’s office until the student’s final grade is submitted at the end of the semester. Once the final grade is submitted, the academic file is transferred to a file cabinet in the phlebotomy program directors office on the Helena-West Helena campus and will remain there for one additional semester before being destroyed. Grades may be kept in a grade book filled out in ink or kept in an electronic grade book. All grade books will be kept on file in the office of the Phlebotomy Program Director for at least 3 years (Board Policy 404). Electronic tests will be maintained on Blackboard CE for one additional semester before being deleted.
Standard 11. Health and Safety

There must be a procedure for determining that the applicants' or students' health will permit the individual to meet the written essential functions of the program. Students must be informed of and have access to the usual student health care services of the institution. The health and safety of students, faculty, and patients associated with educational activities must be safeguarded. Emergency medical care must be available for students while in attendance.

Response to Standard 11:
The following is PCCUA’s policies and procedures in regard to the health and safety of the students. This information is made available to the students in the Phlebotomy Program Student Handbook.
- Dress Code
- Violation of Safe Practice
- Professional Liability Insurance
- Smoking in Medical Facilities
- Severe Weather Policy
- Fire
- Medical Treatment
- Campus Emergencies, Evacuation, Anti-terrorism Plan
- Policy for Prevention of Communicable Disease
- Immunization Policy
- College Drug and Alcohol Policy for Students
DRESS CODE

CLASSROOM:
Street clothes are worn in the classroom. Dress is expected to be appropriate and safe for the classroom/clinical setting. Personal appearance must be clean and neat at all times.

CLINICAL:
Appearance instills confidence. Times are changing, nevertheless, since most of the patients in the general care hospitals are elderly, conservative dress is appropriate. Physical appearance communicates a great deal about an individual. The clothes and shoes that the student wears to the hospital lab should be used for hospital wear only. For health/safety reasons, they should not be worn except in the hospital. Remember that all lab clothing and that includes shoes may be a biohazard and should be treated as such. Lab clothing which has become contaminated with blood/body fluids should be sterilized or treated with bleach prior to removal from the lab before laundering. HBV may be stable in dried blood at RT for up to 7 days and HIV retains infectivity for 3 days in dried specimens and for more than a week in an aqueous environment. Dress and physical appearance are particularly important in today's hospital environment where patients and employees alike are deeply concerned about the spread of infectious diseases.

For health/safety reasons, "street" clothes are NOT to be worn in the laboratory.

Acceptable student dress is considered to be as follows:
1. Scrub tops & pants-navy blue
2. Clean, white, full length LIQUID RESISTANT lab coats: PCCUA patch on left sleeve and name pin
3. Only closed-toe, nonskid-sole white shoes should be worn in order to prevent possible serious injuries from falls, objects accidentally dropped on the feet or broken glassware. Plain white leather tennis shoes are allowed.
4. No jewelry is allowed except watch and wedding ring(s) and one pair of small gold or silver stud ear rings if ears are pierced. Any other piercing ornament is considered to be jewelry. Excessive jewelry presents a health/safety hazard.
5. Hair must be kept clean and styled in manner which does not present a health/safety hazard. Long hair must be pulled back & secured. Nails must be kept clean and short (not extending beyond fingertips). False nails cannot be worn as these present many health & safety hazards.
6. Chewing gum is not permitted during assigned clinical hours.
VIOLATION OF SAFE PRACTICE

An **UNSAFE** behavior is defined as an act of omission or commission that could result in injury, death, prolonged hospitalization, or recovery of the client. This includes but is not limited to:

- Failure to protect the client’s microbiological, chemical, physical, psychological, and/or thermal safety.
- Inadequate use of the MLT/phlebotomy process
- Violation of previously learned principles
- Inappropriate independence or dependence in the clinical setting

**Procedure for UNSAFE Behavior**

- The instructor will inform the student of **UNSAFE** behavior.
- The student will be dismissed from the clinical area until the issue is resolved.
- The student and instructor will meet the next working day to discuss and document the **UNSAFE** behavior.
- If the behavior is determined to be **UNSAFE**, the student will receive an “F” in the clinical MLT/phlebotomy course and must immediately withdraw from the co-requisite theory course(s).
  - If the student is eligible for readmission, an application may be submitted.
- The student has the right to appeal the decision through the college grievance process.

**HIPAA**

At the beginning of each academic year or on readmission, students are required to view a video outlining current HIPPA Guidelines. Students are expected to abide by all HIPPA rules and regulations while enrolled in any allied health program. Violation of these guidelines may result in immediate dismissal from the program.

**PROFESSIONAL LIABILITY INSURANCE**

All students are required to purchase and maintain professional liability insurance. The minimal amount acceptable is $1,000,000 per claim and $6,000,000 aggregate coverage. The insurance must be purchased from a company that is acceptable to the college and in compliance with the laws of the State of Arkansas. The company should provide endorsement that the insurance may not be modified or cancelled unless PCCUA receives 30 days prior written notice. Written proof of coverage must be submitted to the Program Director before the student will be allowed to register for or attend any clinical MLT/phlebotomy course.

**SMOKING IN MEDICAL FACILITIES**

Effective October 1, 2005. Act 134 of the Arkansas General Assembly specifically states smoking tobacco is prohibited in and on the grounds of all medical facilities in Arkansas. This law also states the Department of Health may treat a violation of this law as a deficiency to be assessed against the medical facility. Failure to abide by this law will result in immediate dismissal from the clinical agency and may result in the student being dropped from the respective clinical MLT/phlebotomy course.

**SEVERE WEATHER POLICY**

**Ice and Snow**

It may be necessary for the college to be closed during inclement weather involving ice and/or snow conditions that make travel conditions hazardous. The Chancellor or his designee will determine when weather conditions justify cancellation of classes and closing of the college.

In the event that classes are to be canceled, the Chancellor or his designee will notify local media and ask the public service announcements be made.

Separate announcements for each campus will be made for day and evening classes as follows:

**Day Classes**

Classes starting between 7:30am and 3:45pm will be considered “day” classes. The decision to cancel day classes will be announced through the local media and the college’s voice mail system prior to 6:30am. If no announcement is made, classes will be held.

91
Night Classes
Classes starting at 4pm or later will be considered “night” classes. The decision to cancel night classes will be announced through the local media and the college's voice mail system prior to 2:30pm. If no announcement is made, classes will be held. **Administrative Procedure 250.02**
Decisions to reschedule canceled classes and clinical experiences will be made by the faculty. In the event the College is open during inclement weather, PCCUA students should use their best judgment about attending class since conditions may vary in different locales. It is the student’s responsibility to notify the instructor of the impending absence from the class and/or clinical.

**Tornadoes**
The Office of Civil Defense has made a survey of the Phillips Community College campus and designated an area of safety in each building. When the Civil Defense siren sounds a warning of a tornado, classes are to be dismissed immediately, and all college personnel and students are to go to the designated shelter areas.

**PHILLIPS COUNTY**
Designated Tornado Shelter Areas
- Administration Building: Area from 120B hall to 117A hall; Classrooms 120B-117A.
- Library: Bottom floor of library; Arkansas Room; media lab.
- Math & Science (C Building): All classroom areas in the Learning Lab.
- Gym: Lobby portion (close doors to the gymnasium floor).
- Adult Education: All inside offices; classroom away from windows.
- Nursing: Lower part of Nursing Auditorium; all inside faculty offices and lab; entire hall area away from glass doors.
- Technical & Industrial: The entire hall area away from glass doors; all inside offices.
- Lily Peter Auditorium/Fine Arts Center: Entrance to auditorium and stairs; center of community room.
- Bonner Student Center: Entire hall area away from glass.

RETURN TO CLASS WHEN ALL CLEAR IS GIVEN

**FIRE**
If a student on the Helena-West Helena campus detects a fire, the incident should be reported immediately to the nearest PCCUA employee. The procedure for fire (Board Policy, 250.03) will be implemented, and the building will be evacuated. On the DeWitt campus the automated fire alarm system will be activated. Students should evacuate the building in an orderly fashion.

**Board Policy 250.01**

**MEDICAL TREATMENT**
As a nonresident school, PCCUA expects students to secure medical services through a private physician. Any student who is ill, becomes ill, or is injured and needs immediate medical attention should take appropriate action such as:
- Call parent, spouse, or friend and leave the campus.
- Call a physician.
- If incapacitated and immediate evacuation is deemed necessary, the college will refer the student to the nearest healthcare agency for emergency care. **(Note: The costs of such emergency care including ambulance charges are the full responsibility of the student).**
- In an emergency situation, an employee should call the switchboard operator on the Helena-West Helena campus.
- The location
- Nature of the accident/injury
- State of consciousness
- Need for emergency medical service
- The switchboard operator will call 911 and dispatch security to the emergency site.
• The employee should remain on site until campus security arrives and provide information as necessary for an accident report.
• Accident reports will be submitted to the Vice Chancellor for Student Services and Registrar within 24 hours.

CAMPUS EMERGENCIES, EVACUATION, ANTI-TERRORISM PLAN
In the event that an emergency situation is at the college, it is important that personnel and students be evacuated from the threat area according to an orderly prearranged process. Calmness and deliberate adherence to prearranged procedures can help avoid a panic situation. Accordingly, the following procedures will be used in the event a bomb threat is made to the college.

1. The Chancellor’s office will be notified immediately (Ext. 1233). If the Chancellor is not on campus, the Executive Vice Chancellor will immediately contact the college security supervisor. If the threat occurs after normal working hours, the evening security (Ext. 0) will be notified.
2. The determination to evacuate the building will be made by the Chancellor or his designee (during the day) and by the designated evening administrator or security (at night).
3. The determination to notify the Helena-West Helena Police Department will be made by the Chancellor or his designee.
4. An announcement to evacuate the threatened building will be made by campus security personnel or by a designated administrator.
5. All students, faculty, staff, and visitors will turn off all equipment immediately and leave the building. Only authorized college personnel with specific emergency related assignments will remain.
6. Crowd control will be the responsibility of campus security. Persons will be evacuated to a location outside, at least 200 yards from the threatened building. Only authorized personnel and vehicles will be allowed in the immediate area of the building.
7. The Chancellor or his designee with decision-making authority will be on site until the situation is resolved.

All inquiries by the media will be channeled to the College Relations Office or the Chancellor’s designee.

POLICY FOR PREVENTION OF COMMUNICABLE DISEASE
MLT/phlebotomy students should be particularly aware of the potential for exposure to infectious agents in the healthcare setting. Clients with transmittable diseases cannot be readily identified, especially in emergency situations. Therefore, MLT/phlebotomy students must treat all clients at all times as if they were a potential source of infection. All students must practice “Universal Precautions” as specified by the CDC to prevent personal exposure. By practicing “Universal Precautions”, students reduce their risk of exposure to HIV/AIDS, Hepatitis B, and other blood-borne infectious agents. All students are expected to rigorously adhere to the following guidelines.

Precautions for the Transmission of HIV and other Blood Borne Agents to MLT/Phlebotomy Students
All clients, their blood and other body fluids, will be considered infectious at all times.
Students will

- Wash their hands thoroughly with soap and water before and immediately after coming in contact with clients, their blood, urine, or other body fluids. Consider items such as needles, scalpel blades, and other sharp instruments as contaminated and handle them with extreme caution to prevent personal accidental injury.
- Dispose of all sharp items in puncture-resistant containers immediately after use.
- Never recap, purposefully bend, or otherwise manipulate by hand needles that are to be discarded.
- Use resuscitation bags, mouthpieces and other ventilation devices for resuscitation.
- Wear gloves when performing injections, venipunctures, arterial punctures, and capillary sticks.
- Wear gown, mask, and eye protection when performing procedures that are likely to generate air-borne droplets of blood or body fluids to which universal precautions apply.
- Clean up blood or body fluid spills immediately with a 1:10 dilution of chlorine bleach or a CDC approved disinfectant.

Procedure for Reporting Accidental Exposure

- Any student contaminated with blood or body fluids must immediately take precautions to reduce exposure and then report the incident to his or her clinical instructor and supervisor.
- The student’s clinical instructor will assess the situation and assist the student in following agency protocol.
- The student’s clinical instructor will document the incident and action taken in the student’s course file.
- The student’s clinical instructor will submit a copy of the incident and the action taken to the MLT/Phlebotomy Program Director and Dean of Allied Health.

POLICY & PROCEDURE GUIDELINES FOR BLOODBORNE PATHOGEN EXPOSURE

INTRODUCTION
The policy and procedure guidelines are in compliance with current OSHA guidelines and relate to all bloodborne pathogens. They apply to all students and faculty in the Division of Allied Health. This policy shall be reviewed annually and modified as necessary based on current CDC and OSHA guidelines.

ADMISSIONS

- The HIV (Human Immunodeficiency Virus), HBV (Hepatitis B Virus), or HCV (Hepatitis C Virus) status of an applicant should not enter into the application process.
- Applicants applying for healthcare programs should, however, be informed that certain diseases may necessitate their dismissal from a program if they cannot perform procedures and or tasks considered essential to their educational experience.
- Students and faculty with HIV, HBV, or HCV should be allowed equal access, as long as their medical condition permits, to all required campus laboratory activities and participation in clinical experiences.
- All confidential medical information is protected by statute and any unauthorized disclosure may create legal liability. The duty of the healthcare providers to protect this confidentiality is superseded by the necessity to protect others in very specific circumstances.
- As determined by the Infection Control Committee on a CASE-BY-CASE basis, an infected student or faculty member who is symptomatic may be excluded from providing direct client care. In addition, should an individual sero-convert and express concern regarding clinical practice, the committee will convene to review the case.
- Any student who has a positive history of HIV, HBV, or HCV should not participate as a source partner in on-campus laboratories for procedures involving needle sticks or lancet sticks.
PREVENTION OF TRANSMISSION OF BLOODBORNE PATHOGENS

- Allied health students and faculty will employ Standard Precautions as outlined by OSHA while in the student campus laboratory and clinical settings.
- Allied health students and faculty will receive annual instruction regarding transmission of bloodborne pathogens and the use of Standard Precautions.

EXPOSURE

- Allied health students and faculty may be exposed to bloodborne pathogens. In clinical and campus laboratory settings, students and faculty are expected to utilize Standard Precautions including hand washing and the use of protective clothing and gear to prevent exposure or contact with blood and other potentially infectious materials (OPIM).
- OSHA: Blood/OPIM Exposure Protocol. Exposure definition: Any needle stick or sharp injury, mucous membrane contact, eye splash, or broken-skin contact with blood or OPIM. All blood or OPIM is to be considered potentially infectious for HIV, HBV, or HCV or other bloodborne pathogens (BBP).
- An exposure incident in a clinical facility or campus laboratory setting involving a allied health student or faculty member is treated according to the policy outlined in PCCUA Administrative Procedure 250.05 and the policy as outlined below.

CAMPUS POST BLOOD/OPIM EXPOSURE PROCEDURE

Should a student or faculty member receive a Blood/OPIM Exposure in an on-campus laboratory setting, the following post-exposure procedure is recommended.

1. The student will notify the faculty member supervising the learning experience. If the exposed individual is a faculty member, she/he will notify the Dean of Allied Health.
2. First aid will be implemented immediately according to OSHA guidelines.
   a. Puncture Wounds:
      Immediately wash wound with soap and water. There is no evidence to suggest that making a puncture wound bleed decreases risk of bloodborne pathogen transmission. Use of caustic disinfectants is not recommended. Cover wound with a sterile dressing.
   b. Eye/mucous membrane splash:
      Immediately rinse/flush area with water for several minutes.
3. Within 2 hours, the exposed individual will be referred to primary care provider to receive a confidential medical evaluation. If indicated, Post Exposure Prophylaxis (PEP) can be initiated. It is recommended that the individual's primary care provider direct the PEP of the exposed individual at the individual's expense.
4. Both individual and source should be tested for HIV, HBV, and HCV when an exposure occurs. Testing will be conducted at the individual’s expense. If source consent for testing is not obtained, there must be documentation that the source individual’s consent could not be obtained. The inoculating source specimen, if available, should be frozen for 6 months. Test results will be reported to the chair of the Allied Health Infection Control Committee.
5. Results of the source individual’s testing shall be made available to the exposed individual who should also be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
6. Within 24 hours following exposure, the college accident form will be completed by the supervising faculty member and sent to the Dean of Allied Health for signature (Administrative Procedure 250.05).
7. Within 48 hours following the exposure, the Division of Allied Health Human Bloodborne Pathogens Exposure Incident Check List will be completed and sent to the chair of the Allied
Health Infection Control Committee (ICC). As listed above, responsibilities of the ICC include maintaining test results, initial counseling, consultation, follow-up, and referring individual to his/her private provider.

**CLINICAL POST BLOOD/OPIM EXPOSURE PROCEDURE**

Should an allied health student or faculty member receive a Blood/OPIM Exposure in a clinical environment, the following post-exposure procedure is recommended.

1. The student will notify the clinical faculty member supervising the learning experience. If the exposed individual is a faculty member, she/he will notify the Dean of Allied Health.

2. First aid will be immediately implemented according to OSHA guidelines.
   a. Puncture Wounds:
      Immediately wash wound with soap and water. There is no evidence to suggest that making a puncture wound bleed decreases risk of bloodborne pathogen transmission. Use of caustic disinfectants is not recommended. Cover wound with sterile dressing.
   b. Eye/mucous membrane splash:
      Immediately rinse/flush area with water for several minutes.

3. The clinical supervisor of the area where the exposure occurred will be notified and the supervisor will notify the clinical facility’s infection control or risk management or epidemiologist staff member. If is recommended that the source be tested for HIV, HBV, and HCV when exposure occurs. Testing will be conducted at the individual’s expense. If the source consent for testing is not obtained, there must be documentation that the source individual’s consent could not be obtained. The inoculating source specimen, if available, should be frozen for 6 months. Test results will be reported to the chair of the Allied Health Infection Control Committee.

4. Within 2 hours, the exposed individual will be referred to primary care provider to receive a confidential medical evaluation. It is recommended that the individual be tested for HIV, HBV, and HCV when exposure occurs. If indicated, Post Exposure Prophylaxis (PEP) can be initiated. It is recommended that the individual’s primary care provider direct the PEP of the exposed individual at the individual’s expense.

5. Results of the source individual’s testing shall be made available to the exposed individual who should also be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

6. Within 24 hours following the exposure, the college accident form will be completed by the supervising faculty member and sent to the Dean of Allied Health for signature (Administrative Procedure 250.05).

7. Within 48 hours following the exposure, the Division of Allied Health Human Bloodborne Pathogens Exposure Incident Check List will be completed and sent to the chair of the Allied Health Infection Control Committee. As listed above, responsibilities of the ICC include maintaining test results, initial counseling, consultation, follow-up, and referring individual to his/her private provider.

**COUNSELING**

- It is the responsibility of the program to refer a student and/or faculty member who is determined to be HIV, HBV, or HCV sero-positive or who manifests symptoms of these diseases for counseling.
- The counselor interaction with the student or faculty member should be reported to the Infection Control Committee only when the individual’s health status necessitates a modification in the clinical program or dismissal.
- It is the counselor’s responsibility to verify that the student or faculty member is aware of options for testing, counseling, and healthcare.
- It is the counselor’s responsibility to verify that the student or faculty member has been provided with specific information that relates to client contact.

COUNSELING AND/OR SERVICES MAY BE OBTAINED AT THE FOLLOWING AGENCIES:

Eastern Arkansas Counseling Services
801 Newman Drive
Helena-West Helena, AR 72342
870-338-3900

Eastern Arkansas Substance Treatment Center
120 D’Anna Place
Helena-West Helena, AR 72342
870-817-0610

Phillips County Health Unit
P.O. Box 2627
Helena-West Helena, AR 72390
870-572-9028

Arkansas District AIDS Consortium
310 Med Continent Plaza, Suite 40S
West Memphis, AR 72301
870-735-3291

Arkansas County Health Unit
1600 South Madison
DeWitt, AR 72042
870-946-2934

Jefferson Comprehensive Care Center
Medical Clinic 1101 South Tennessee
Pine Bluff, AR 71601
870-543-2380
Division of Allied Health
Human Bloodborne Pathogens Exposure Incident Check List

The exposed allied health student's/faculty member's supervisor is to complete as much as possible on this form and submit it with a copy of the incident report to the Infection Control Committee within 1 working day of the incident.

Date of Incident: 

Date of exposure: 

Location: 

Exposed Individual's Name and SS#: 

Supervising Instructor or Supervisor: 

Immediate Actions: Initial If Done

_____ 1. Wash affected surface immediately and apply first aid.
_____ 2. Reported to instructor/supervisor immediately.
_____ 3. Student referred to primary care provider.
_____ 4. Clinical supervisor notified clinical facility's infection control or risk management or epidemiologist. Post-exposure protocols for the clinical institution followed.
_____ 5. Student and/or instructor completed incident report forms required by all institutions.

Supervisor's Actions: Initial If Done

_____ 1. Incident report form completed by employee.
_____ 2. Source individual identified and permission for testing obtained.
_____ 3. If permission not obtained from source individual, inoculating source specimen, if available, was frozen.
_____ 4. Allied Health Infection Control Committee notified of incident.

________________________________________  Date

________________________________________  Date

Student

Instructor

Actions of the Allied Health Infection Control Committee:

If more space is necessary, use additional pages of back of this form.
IMMUNIZATION POLICY

Measles/Rubella (MMR)

Individuals born after January 1, 1957, must furnish proof of measles and rubella vaccines administered after the first birthday and after January 1, 1968.

Tetanus

Individuals must have received a tetanus booster within the last 10 years.

Hepatitis B

Hepatitis B is a serious communicable disease that can cause extensive damage to the liver and may result in death. The Centers for Disease Control and Prevention (CDC) has identified healthcare workers who come into contact with blood or body fluids as being at increased risk for Hepatitis B infection. Phlebotomist and phlebotomy students fall into this category. The CDC recommends that members of high-risk groups be vaccinated against Hepatitis B and that vaccination should be completed before coming into contact with blood. Based on this recommendation PCCUA Phlebotomy Program REQUIRES initiation of Hepatitis B vaccination series before entering the phlebotomy program.

Three doses of Hepatitis B vaccine, given at specific intervals, are required for full protection. The vaccine is 80-100% effective and can be obtained from your healthcare provider. PCCUA does not provide the vaccine.

RPR Screen

RPR (rapid plasma reagin) is a screening test for syphilis. It looks for antibodies that are present in the blood of people who have the disease. The RPR screen is required for all students in the phlebotomy program.

TUBERCULOSIS POLICY

Tuberculosis is a serious communicable disease that can result in extensive damage to the lungs and respiratory system. Since tuberculosis is prevalent in the Mississippi Delta, the Phlebotomy Program requires students to provide written evidence of annual skin testing. If a positive skin test occurs, the student must comply with the protocol of the local county health department. The test must be performed before registration for classes and can be obtained from a county health department or a private healthcare provider.

Post-Exposure Management Policy for Tuberculosis (TB)

Before acceptance into any allied health program, the student must provide written evidence of either a negative TB skin test within the past one year or a chest x-ray within the past three years in the event of a positive test. If the test is positive, the student must comply with the protocol of the local county health department.

The purpose of this policy is to delineate the procedures to be followed when an allied health student or faculty member has an exposure to tuberculosis while participating in activities at clinical affiliates. At all times, it is the student and faculty's responsibility to use OSHA Standard Precautions, safety equipment, and safety procedures.

Upon notification or discovery of an exposure to TB, the student or faculty member must report, within 2 days, to the local Public Health Unit. The local Public Health Unit policy must be followed.
1. Within 24 hours following exposure, the college accident form will be completed by the supervising faculty member or the exposed faculty member and sent to the Dean of Allied Health for signature.

2. Within 24 hours following contact with local Public Health Unit, the Division of Allied Health Tuberculosis Exposure Documentation Form will be completed and sent to the chair of the Allied Health Infection Control Committee (ICC).

3. The student must report Public Health Department for Post Exposure Prophylaxis (PEP) recommendations to the Allied Health Infection Control Committee (ICC).
Phillips Community College of the University of Arkansas
Division of Allied Health
Tuberculosis Exposure Documentation Form

The exposed student's/faculty member's supervisor is to complete as much as possible on this form and submit it with a copy of the incident report to the Infection Control Committee.

Date of Incident: _________________________________

Date of exposure: _________________________________

Location: ___________________________________________________________________

Exposed Individual's Name and SS#: _________________________________

Supervising Instructor or Supervisor: _________________________________

Agency name and address where exposure occurred:

Brief description of the exposure: Source of exposure; circumstances related to the exposure; contributing factors

Details of the exposure: extent, severity, and duration

Source Information: Disease state and extent of exposure

Allied Health Infection Control Committee's Actions concerning Public Health Department's recommendations:

COLLEGE DRUG AND ALCOHOL POLICY FOR STUDENTS
The Phlebotomy Program abides by the college's drug and alcohol policy as published in the PCCUA
Student Handbook.

In accordance with the Drug-Free Schools and Campus Regulations, Phillips Community College of the
University of Arkansas prohibits the possession, sale, distribution, and/or use of illicit drugs or of alcohol
on campus or at college-sponsored activities off campus. Violation(s) of this policy will result in appropriate discipline including warning, probation, suspension, or expulsion. Students are also subject to applicable legal sanctions, which may include fines and/or imprisonment, for use of illicit drugs or illegal use of alcohol. A criminal conviction under such laws shall not preclude the imposition of appropriate sanctions under applicable college policies and procedures that

101
are consistent with such laws. Successful completion of an appropriate rehabilitation program may be grounds for readmission to the college. The college will implement requirements of the Drug-Free Schools and Campus Regulations to inform students of the health risks associated with the use of illicit drugs and the abuse of alcohol. The Vice Chancellor for Student Services and Registrar shall provide confidential referral to agencies in the community offering rehabilitation therapy and counseling for students suffering from drug or alcohol abuse. *(PCCUA Student Handbook)*.
Standard 12. Guidance

Guidance must be available to assist students in understanding and observing program policies and practices, for advising on professional and career issues, and for providing counseling or referral for personal and financial problems that may interfere with progress in the program. Confidentiality and impartiality must be maintained in dealing with student problems.

Response to Standard 12:
The program faculty and the Program Director are the student's first point of service for help with understanding and observing the policies and procedures of the program. Students are given a copy of the program policies and procedures in the Phlebotomy Student Handbook and are required to sign a form stating their receipt and understanding of program policies.

To provide the student with contact information, the faculty name and office telephone number are included in each course syllabi. Students may seek further help with career counseling or clarification of program policies from Vice Chancellor for Student Services.

Students who may be struggling academically are encouraged to seek tutoring through student services.

Students with difficulties meeting tuition and/or other financial responsibilities are directed to the PCCUA Financial Aid Office. The Financial Aid Office provides guidance to students on availability of varying types of financial aid, eligibility requirements, and the application process. Information about financial aid and Financial Aid Office contact information is provided to students in the PCCUA College Catalog.

- Student Advisory System
- Counseling and Guidance
- Career Services
- Student Support Services
- Title III
- Arkansas Career Pathways
- Veterans
- Student Activities and Organizations
- Federal and State Financial Aid Programs
- Scholarships
Standard 13. Appeal Procedures

Appeal procedures must be distributed to students upon entering the program. They must include provisions for academic and non-academic types of grievances and a mechanism for neutral evaluation that ensures due process and fair disposition.

Response to Standard 13:
A copy of the Grievance Procedures is found in the PCCUA Phlebotomy Program Student Handbook and is given to the student when they enter the program.

PCCUA Phlebotomy Student Handbook, pp.33-34

GRIEVANCE PROCEDURES

Questions related to grading or other matters of an academic nature should be presented to the student’s instructor, if not satisfactorily resolved at the level; the questions should be referred using the clearly defined college process used by the college.

**STEP 1.** Within 10 working days of receiving the final course grade, student submits completed grade appeal form to instructor. Student initiates contact with instructor. If no resolution, proceed to Step 2.

**STEP 2.** Within 5 working days of Step 1, student submits copy of completed grade appeal form with instructor’s action taken to the division chair or dean, and the Campus Vice Chancellor (if the course appealed is in Stuttgart or DeWitt). If no resolution, proceed to Step 3.

**Step 3.** Within 5 working days of Step 2, student submits copy of completed grade appeal form with signatures of instructor, division chair/dean, and Vice Chancellor (if course appealed is in Stuttgart or DeWitt). This action is taken to the Vice Chancellor for Instruction (VCI). The VCI notifies the chair of the Faculty Senate Academic Standards Committee to conduct a hearing.

**Step 4.** Within 5 working days of Step 3, the Chair of the Faculty Senate Academic Standards Committee convenes to consider the appeal.

**Step 5.** Within 5 working days of Step 4, if the Faculty Senate Academic Standards Committee finds the request merits a hearing, the committee shall notify the student and instructor within 5 days the time and location of the hearing.

**Step 6.** Within 5 working days of Step 5, Academic Standards Committee shall convene the hearing. Findings concerning the appeal are considered final.

If the question is an academic matter other than grades, the same appeal process as above will be followed.

In all cases the grievant has the burden of proof with respect to the allegations in the complaint and in the request for a hearing. Although the primary responsibility of the Academic Standards Committee is to review appeals, the committee will report a written decision of the final solution to the complaint which will be kept in the student's file in the Office of Admissions and Records.

Because of the time needed to resolve a possible grievance, all instructors must retain appropriate tests for at least one semester following the semester just ended. According to Board Policy 404, instructors shall keep their grade books on file for at least three (3) years. In the event of the termination of an instructor from Phillips Community College, the instructor shall turn in all grade books in his/her file to the Office of Admissions and Records. Administrative Procedure 404.06

There is also due process for non-academic student issues. Those have already been noted in the Disciplinary Appeal Process in Standard 9.
II. OPERATIONAL POLICIES

Standard 14. Fair Practices

14A. Programmatic announcements must accurately reflect the program offered and include NAACLS' name, address and phone number.

Response to Standard 14A:
NAACLS information is included in the following:
- PCCUA Phlebotomy Program Web site (www.pccua.edu/alliedhealth/Phlebotomy.htm)
- PCCUA Phlebotomy Brochure
- PCCUA College Catalog
- PCCUA Phlebotomy Program Student Handbook
- PCCUA Phlebotomy Program Application Packet
PHLEBOTOMY TECHNICAL CERTIFICATE
(PHLET.CHI)

The Phlebotomy Program is a two (2) semester Technical Certificate program. Graduates of the program are eligible to take the national phlebotomy certification examination. Application must be made to the Phlebotomy program. Academic admission requirements are high school graduate or equivalent, 18 years old and acceptable pre-admission test scores. Acceptance into the phlebotomy program is on a first-come, first-accepted basis of those meeting the minimum entrance requirements. The Phlebotomy program is NAACLS® approved.

FALL SEMESTER
16 hours:
BY 103——Intro Anatomy & Physiology
OT 113——Medical Terminology I
EH 113——Freshman English I
MS 1023——Elem. Algebra or higher
CT 114——Computer Info. Systems

SPRING SEMESTER
12 Hours:
PLB 113——Phlebotomy Procedures
PLB 123——Special Techniques
PLB 116——Phlebotomy Skills

Total Hours Required: 28

The curriculum focuses on nine major concepts: nursing process, nursing roles, nursing behaviors, needs, health, stress, development, client, and communication. Students are introduced to all concepts in an overview course and develop a more indepth understanding of these concepts across the curriculum. The role of the nurse as a provider and manager of care as well as a member of the profession is stressed. Those nursing behaviors that assist clients to alleviate or cope with stress as well as therapeutic interventions that support, restore, or promote health are emphasized. The use of therapeutic communication and evidence-based practice are essential components of the nursing process that are used to meet Maslow's Human Needs Hierarchy for clients of all developmental and chronological ages.

Admission
Students are admitted to the Helena-West Helena Campus every year, DeWitt Campus on even years and Stuttgart Campus on odd years. Students who wish to be considered for admission in the fall of 2009 to the Associate Degree Nursing (ADN) Program must meet the following criteria:

1. Fulfill all college admission requirements.
2. Submit ACT score, if taken, and official transcripts from all previously attended colleges to the Registrar's Office and the Department of Nursing on the Helena-West Helena campus. These documents must be received in the nursing department office on the Helena-West Helena campus by June 1st.
3. Document a minimum 2.0 cumulative grade point average in all courses taken at PCCUA.
4. Students who transfer required nursing curriculum support courses must have a "C" or better and equivalent credit hours per course to receive PCCUA credit.
5. Complete all required developmental education courses prior to making application to the nursing program.
6. Complete BY 154, Anatomy and Physiology I, BY 164, Anatomy and Physiology II and BY 224, Microbiology, within the last 5 years, with a grade of "C" or better. Exceptions for individuals whose Anatomy & Physiology I and II and Microbiology are older than 5 years may be made by the Promotion and Graduations Committee when the individual provides proof of a bachelor's degree or higher in a related healthcare field, and proof of recent full-time employment in that respective healthcare field.
7. Complete MS 123, College Algebra with a grade of "C" or better.
8. Submit completed application to the ADN Program on the Helena-West Helena campus. The application must be received in the nursing department office on the Helena-West Helena campus by June 1st.

Students who speak English as a second language must also take the Compass Exam to prove proficiency in English by testing into Freshman English I and requiring no developmental reading.

MEETING THE MINIMUM CRITERIA FOR ADMISSION OR TAKING COURSES REQUIRED FOR THE NURSING DEGREE DOES NOT GUARANTEE ADMISSION TO THE ADN PROGRAM.

All students who meet minimum admission criteria will be accepted unless the number of qualified applicants exceeds space available. In this case, a selection process will be implemented and admission will become competitive. Students are admitted every August to the Helena-West Helena campus and every even year to DeWitt and every odd year to Stuttgart campuses.

Selection Process
1. Qualified applicants will be ranked according to the total number of quality points earned in required nursing program support courses that may be applied toward the AAS degree.
2. A maximum of 132 quality points is possible. Students who have received college credit through CLEP for a course required for

(major code and campus offered are listed after name of degree)
3. **Dual Enrollment**: High school students enroll in college classes at PCC. They are registered in classes with other college students.

4. **Combinations**: Students may enroll in a combination of two or three programs as concurrent, Secondary Center, and dual enrolled status.

All high school enrollment classes are college level courses available to high school students. Students may receive high school and college credit simultaneously.

**Programs**

Programs of study are offered in college transfer credit, occupational education and adult education. Students may qualify for the Associate Degree by fulfilling either the requirements of the general education curriculum or one of the professional or occupational programs. Certificates are awarded for the successful completion of other one-year occupation programs.

Qualified students may enroll in any of the three areas at the college. Registration is also permitted in more than one area at the same time according to the needs of the individual student.

Both day and evening classes are scheduled upon sufficient demand.

**Buildings and Grounds**

The Helena-West Helena campus is comprised of 19 buildings and features a unique architectural design which blends with the hilly contours of scenic Crowley's Ridge. The campus has approximately 80 acres, plus the Pillow-Thompson House and two buildings on Ohio Street. Total square footage is 344,644. All buildings on campus are completely air conditioned, and the most modern, fully equipped facilities have been installed for utilization in the arts, sciences, languages and occupational programs.

The DeWitt campus is located on 29 acres on Hwy. 165 in DeWitt. It consists of one building renovated and added onto in 1996 to bring the total square footage to 48,000. The former DeWitt National Guard Armory, leased by the college in 2006, has become the CERETE Training and Technology Center – Agriculture & Renewable Energy. The 9400 square foot building is located two blocks from the main campus. It houses classrooms, labs and offices.

The 48,000 square foot Stuttgart campus was completed in the spring of 1999. It is located on 61.5 acres on Highway 165, south of Stuttgart. War Memorial Training Center was added to the Stuttgart campus in 2003. The facility contains offices and classrooms. A former armory, the building is used for the Career and Technical Center classes and a variety of training programs. The Training Center Annex is a refurbished building that has been outfitted as a state-of-the-art welding lab. It houses business and industry training classes and credit courses.

**Accreditation**

Phillips Community College is accredited by the Higher Learning Commission of the North Central Association of Colleges and Schools; 30 North LaSalle Street, Suite 2400, Chicago, Illinois 60602, (800) 621-7440. The Associate Degree Nursing program is accredited by the National League for Nursing Accrediting Commission (NLNAC); 3343 Peachtree Road, NE, Suite 500, Atlanta, GA, 30326; (404) 975-5000; Fax (404) 975-5020. The Medical Laboratory Technology program is accredited by the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS); 5600 N. River Rd., Suite 720, Rosemont, IL 60018, (773) 714-8880. The Phlebotomy program is approved by NAACLS. The business programs are accredited by The Association of Collegiate Business Schools and Programs (ACBSP); 7007 College Boulevard, Suite 420, Overland Park, KS 66211, (913) 339-9356.

PCCUA is also approved by the Arkansas State Approving Agency for Veterans Training.

Phillips Community College is a member of the American Association of Community Colleges, the Arkansas Association of Two-Year Colleges, the National Association of College and University Business Officers, and the American Association of Collegiate Registrars and Admissions Officers.

**Library**

Library services at Lewis Library (Helena-West Helena), and the DeWitt and Stuttgart campuses offer the latest technology including an online catalog accessible via the internet. Library holdings consist of traditional print materials such as books and journals as well as a growing collection of electronic sources.

**NOTICE**

The provisions of this publication are not to be construed as a contract between the student and Phillips Community College. The College reserves the right to change any provision or requirement when such action becomes necessary. Students are encouraged to work closely with an Advisor to verify the appropriateness of the courses for which the students register.

Students are expected to familiarize themselves with all rules and regulations of the College, including any official announcements. Students will be held responsible for the observance of all rules and regulations.
Phillips Community College of the University of Arkansas
Curricular Pattern
for
Technical Certificate

Pre-requisites

High school diploma or equivalent
Acceptable pre-admission test scores

Freshman Year

Fall Semester-16 hours
BY 103    Introduction to Anatomy & Physiology
OT 113    Medical Terminology I
EH 113    Freshman English
MS 1023   Elementary Algebra or higher
CT 114    Computer Information Systems

Spring Semester-12 hours
PLB 113    Phlebotomy Procedures
PLB 123    Special Techniques
PLB 116    Phlebotomy Skills

- A minimum grade of “C” is required in each phlebotomy course.
- The Phlebotomy Program is NAACLS’ approved.
  *National Accредitating Agency for Clinical Laboratory Sciences
  5600 N. River Rd., Suite 720
  Rosemont, IL 60018-5119
  773-714-8880.
PHLEBOTOMY PROGRAM

The Phlebotomy Program is a two (2) semester Technical Certificate program. Graduates of the program are eligible to take the national phlebotomy certificate examination. Application must be made to the Phlebotomy program. Academic admission requirements are: high school graduate or equivalent, 18 years old and acceptable pre-admission test scores. Acceptance into the Phlebotomy program is on a first-come, first-accepted basis of those meeting the minimum entrance requirements. The Phlebotomy program is NAACLS* approved.

Campus Contact:
Claude Rector, Program Director
(870) 338-6474, ext. 1079
crector@pccua.edu


PHLEBOTOMY

Job Opportunities:
» Hospital Laboratories
» Physicians’ Offices
» Clinics

The starting salary of most Phlebotomists ranges from $19,500 to $27,300 depending on job location and individual competence.

Phlebotomy Curriculum

First Semester
BY 103 ………… Intro to Anatomy & Physiology
CT 113 ………… Medical Terminology 1
EH 113 ………… Freshman English
MS 1023 ………… Elem. Algebra or higher
CT 114 ………… Computer Information Systems

Second Semester
PLB 113 ………… Phlebotomy Procedures
PLB 123 ………… Special Techniques
PLB 116 ………… Phlebotomy Skills* National Accrediting

*The Phlebotomy program is offered on the Helena Campus only.

www.pccua.edu

* Flexible class scheduling can accommodate student work schedules or cohort groups. Contact an advisor for options.

Rev 3/21/10

Phillips College provides equal educational and employment opportunity regardless of sex, marital or parental status, race, color, handicap, religion, or age.
14B. Student recruitment and admission must be non-discriminatory in accordance with existing governmental regulations and the regulations of any other accrediting agencies applicable to the institution.

14C. Faculty recruitment and employment practices must be non-discriminatory in accordance with existing governmental regulations and the regulations of any other accrediting agencies applicable to the institution.

Response to Standard 14B and 14C:
PCCUA student and faculty recruitment and admission/employment practices are non-discriminatory in accordance with existing governmental regulations.

The following information is found in the PCCUA College Catalog and PCCUA Web site (www.pccua.edu)
## Approved General Examinations

<table>
<thead>
<tr>
<th>General Examination</th>
<th>PCCUA Course</th>
<th>Minimum Score for Credit</th>
<th>Maximum Credit Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mathematics Skills</td>
<td>MS 123 when both subscores equal or exceed</td>
<td>52</td>
<td>3</td>
</tr>
<tr>
<td>Content</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English Composition</td>
<td>EH 113</td>
<td>64</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>EH 113 &amp; 123</td>
<td>75</td>
<td>6</td>
</tr>
</tbody>
</table>

*Both the 90-minute multiple-choice test and the 90-minute test which includes a 45-minute multiple-choice section and a 45-minute essay section are acceptable.

## Approved Subject Examinations

<table>
<thead>
<tr>
<th>Subject</th>
<th>PCCUA Course</th>
<th>Minimum Score for Credit</th>
<th>Maximum Credit Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Government</td>
<td>PLS 213</td>
<td>65</td>
<td>3</td>
</tr>
<tr>
<td>American History I</td>
<td>HY 213</td>
<td>54</td>
<td>3</td>
</tr>
<tr>
<td>American History II</td>
<td>HY 223</td>
<td>56</td>
<td>3</td>
</tr>
<tr>
<td>Calculus with Elementary Functions</td>
<td>MS 215</td>
<td>65</td>
<td>5</td>
</tr>
<tr>
<td>College Algebra</td>
<td>MS 123</td>
<td>53</td>
<td>3</td>
</tr>
<tr>
<td>General Biology</td>
<td>BY 114</td>
<td>50</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>BY 114 &amp; 124</td>
<td>60</td>
<td>8</td>
</tr>
<tr>
<td>General Chemistry</td>
<td>CY 114 &amp; 124</td>
<td>65</td>
<td>8</td>
</tr>
<tr>
<td>General Psychology</td>
<td>PSY 213</td>
<td>58</td>
<td>3</td>
</tr>
<tr>
<td>Introductory Business Law</td>
<td>BAN 233</td>
<td>60</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to Management</td>
<td>BMGT 233</td>
<td>56</td>
<td>3</td>
</tr>
<tr>
<td>Introductory Macroeconomics</td>
<td>ES 213</td>
<td>54</td>
<td>3</td>
</tr>
<tr>
<td>Introductory Microeconomics</td>
<td>ES 223</td>
<td>55</td>
<td>3</td>
</tr>
<tr>
<td>Introductory Sociology</td>
<td>SY 213</td>
<td>59</td>
<td>3</td>
</tr>
<tr>
<td>Western Civilization I</td>
<td>HY 113</td>
<td>57</td>
<td>3</td>
</tr>
<tr>
<td>Western Civilization II</td>
<td>HY 123</td>
<td>57</td>
<td>3</td>
</tr>
<tr>
<td>Information Systems and</td>
<td>CT 114</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Computer Applications</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## EQUAL EDUCATIONAL OPPORTUNITY POLICY:

The college provides equal educational and employment opportunity regardless of sex, marital or parental status, race, color, religion, or age. Title IX of the Educational Amendments of 1972 prohibits discrimination on the basis of sex in any educational program or activity receiving federal financial assistance by way of grant, contract, or loan. Title VI of the Civil Rights Act of 1964 is similar in its prohibition of discrimination on the basis of race, color, sex, or origin. Equal education opportunity includes admission, recruitment, extracurricular programs and activities, facilities, access to course offerings, counseling and testing, financial assistance, placement, health, and athletics. The college is also committed to equal opportunities for the physically and mentally handicapped in compliance with federal regulations, Sec. 504, Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. If a student has special needs, the college only needs to be notified and arrangements will be made.

Students' grievance appeals on conditions considered to be unfair, unjust, inequitable or discriminatory are started with the student's departmental chairperson. Chairpersons review appeals and take corrective action at their level or refer an appeal to the chairperson of the Human Relations Committee. If the student grievance is not satisfied at that level, further appeal is available.
14D. Academic credits and costs to the student must be accurately stated, published, and made known to all applicants.

Response to Standard 14D:
The Phlebotomy Application Packet contains the tuition and fees for the program. The PCCUA College Catalog contains the tuition and fees for the college and the Phlebotomy program. The PCCUA Web site also contains the tuition and fees for the college and the Phlebotomy program. (www.pccua.edu)
**Tuition & Fees**

**Tuition**

**Part-time Students**
(less than 15 credit hours)

- Phillips/Arkansas County resident: $65
- Out-of-District resident: $64
- Non-Arkansas resident: $102
- Online Courses (per credit hour): $85
- Online Lab Fee (per credit hour): $5

**NOTE:** Credit hours are capped at 15 hrs.

**Special Services Fee**
$6 (per credit hour) ($90 max)

**Technology Fee**
$6 (per credit hour) ($90 max)

**Publication Fee**
(3 or more credit hours) $10

*PCCUA reserves the right to change tuition and fees at any time.*

**Books & Supplies** (variable) $50.00 - $1600.00

- Developmental Math Software Fee $115.00
- Early Childhood Education Practicums Fee $200.00

**Facility Usage Fee**
- Stuttgart (Bowling) $30.00
- Helena-West Helena

**Graduation Fee** FREE

**Golf Fee**
- Helena-West Helena campus $30.00
- AR County $30.00

**I.D. Card Replacement** $10.00

**Independent Study Fee** $90.00

**Lab Fee**
- Biology, Chemistry, and Physical Science courses $10.00
- Does not cover damage or breakage to non-expendable equipment.

**Materials Fee**
- Cosmetology Kit (COSM courses) $350.00
- Technical Programs $5.00

**Physical Education Fee** (PEAC courses) $2.50

**Transcript Fee**
- All transcripts FREE
- Faxed transcripts FREE

**Online Courses** $85 per credit hour; $5 Assessment fee

**Vehicle Registration** (per semester)
- 1st decal FREE
- 2nd decal $10.00
### Tuition and Fees

<table>
<thead>
<tr>
<th>Residence</th>
<th>Tuition Per Semester Hour</th>
<th>Maximum Tuition Per Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phillips &amp; Arkansas County Residents</td>
<td>$55</td>
<td>$825</td>
</tr>
<tr>
<td>Other Arkansas Residents</td>
<td>$64</td>
<td>$960</td>
</tr>
<tr>
<td>Non-Arkansas Residents</td>
<td>$102</td>
<td>$1530</td>
</tr>
<tr>
<td>On-line Courses</td>
<td>$85</td>
<td></td>
</tr>
<tr>
<td>On-line lab fee</td>
<td>$5</td>
<td></td>
</tr>
</tbody>
</table>

Books, lab coat, scrubs, and other learning resources for the phlebotomy courses will cost approximately $700-$1,000. Each semester there is a $20 phlebotomy laboratory fee, a $74 substance abuse testing fee the first semester of enrollment, $12 per credit hour with $180 maximum special services and technical fees, and $10 publication fee for 3 or more credit hours.

Students are expected to provide their own health insurance and purchase and maintain professional liability insurance. The minimal amount acceptable is $1,000,000 per claim and $6,000,000 aggregate coverage. The insurance must be purchased from a company that is acceptable to the college and in compliance with the laws of the State of Arkansas. The company should provide endorsement that the insurance may not be modified or cancelled unless PCCJA receives 30 days prior written notice. Written proof of coverage must be submitted to the Program Director before the student will be allowed to register for any phlebotomy courses.
14E. Policies and procedures for student withdrawal and refunds of tuition and fees must be published and made known to all applicants.

Response to Standard 14E:
Policies and procedures for student withdrawal and refunds of tuition and fees are published in the PCCUA College Catalog and are also found on the PCCUA Web site.

Phlebotomy students that withdraw from the program must complete an exit interview form. The exit interview will aid in program development.
Computer Regulations

Student Course Load
The college will operate two semesters and two six-week summer terms and an extended summer term annually. The minimum work load for classification as a full-time student is twelve semester hours. A normal class load consists of sixteen semester hours per semester (six to eight credit hours in the summer). A student who desires to take more than nineteen semester hours must have the approval of the Vice Chancellor for Instruction.

Changes in Course Schedules
In order to change a course program by adding and/or dropping, a student must have the approval of an advisor and a dean. Changes in schedules are not permitted after the course has met twice. A class may be dropped until the posted date in the Academic Calender.

Grading System
Each student will receive at mid-term an evaluation of progress in each course. Mid-term grades are for student information only and are not placed on the permanent record. At the end of the semester the student will receive final grades based upon the following system:

A - 4 quality points
B - 3 quality points
C - 2 quality points
D - 1 quality point
F - 0 quality point

EW - Withdrawn by faculty due to excessive absence
I - Incomplete work to be made up within sixty days following close of current semester
W - Withdrew
S - Students working up to potential in individualized (self-pacing) courses may receive a grade of "S" for satisfactory progress.
AU - Audit
SU - Non-credit courses will be given a grade of "S" for satisfactory, or a grade of "U" for unsatisfactory.

Checking Grades Online
Students may now access their account information, including grades, via PCCUA's homepage, www.pccua.edu by selecting the WebAdvisor link and using the following steps:

- Click on the WebAdvisor link located on the PCCUA homepage, www.pccua.edu
- Click on "Log Into WebAdvisor" then "Log In"
- Enter first name and last name using lowercase (latonyastarks)
- Next, enter the last six digits of your social security number in the "Password" box. The student will be required to change the password for his/her protection.

NOTE: WebAdvisor only allows for five (5) attempts to login to an individual's account. If a student cannot login, please print form at https://exchange.pccua.edu/student/acctlocked.asp, fill out, and return to Business/Student Services Office.

Forgot your password:
- Go to the main menu of WebAdvisor
- Click on "What's my password" in the bottom right screen
- Click "Reset my password"
- Fill in the information
- Select an e-mail to send a temporary password
- Check your e-mail and login

E-mail Account
A network/e-mail is created twenty-four (24) hours after the student registers for the semester.

Accessing the e-mail account:
- Open a web browser and go to http://mail.google.com/a/students.pccua.edu or click the Student Email link on the homepage at www.pccua.edu
- Sign in with your username and password. Your username is your First initial + Last Name + Last four digits of your Datafile ID (bjiones1234) and your password is your birth date.
- At the "Setup your account for Phillips Community College" page, please VERIFY your name and login name, enter the authentication characters in the middle of the page, read the Google Terms of Service agreement and accept at the bottom of the page.
- Your email address will be username@students.pccua.edu.

After you have successfully activated your email account, you will be taken to your GMAIL Inbox. If you need help using GMAIL, please use the Help link at the top right corner of your Inbox page.

Class Attendance
Students are expected to attend all classes regularly and punctually. The instructor will provide to the student at the beginning of the semester a written statement of the specific attendance policy for the course. It is the student's responsibility to know and comply with the instructor's policy and to contact the instructor to make up missed work.

The instructor will warn a student in danger of becoming excessively absent by sending a warning notice to the Advisement Center so that the student can be contacted by an advisor either by phone or in writing. If the student is absent more times than allowed by an instructor, the instructor will drop the student from the class roll with a grade of EW by notifying the Admissions/Student Services Office in writing.

Withdrawal
A student who withdraws from the college in the course of the regular semester or summer term must do so officially at the Admissions/Student Services Office. Official withdrawal must be made in person or by written statement from the student. The student's I.D. card must be submitted at the time of withdrawal.

Consultation with an advisor is suggested. Failure to do so may result in the recording of failing grades in the course(s) for which the student is registered.
Chancellor’s List
A student who achieves exemplar academic success at PCCUA is named to the Chancellor’s List. To be named to this list a student must enroll in 12 or more semester hours of college level credit and maintain a 4.0 GPA for the semester enrolled. This extraordinary list of students is released at the end of each Fall and Spring semester.

Dean’s List
A student who demonstrates outstanding academic success at PCCUA is named to the Dean’s List. To be named to this list a student must enroll in 12 or more semester hours of college level credits and maintain a GPA of at least 3.5 but below a 4.0. This distinguished list of students is released at the end of the Fall and Spring semester.

Academic Probation and Suspension
The cumulative grade point average (GPA) will be used in all probation and suspension determinations. The GPA is computed each semester for full-time students and each block of ten (10) or more semester hours for part-time students. When the cumulative GPA falls below the level specified in the table below, the student will be placed on ACADEMIC PROBATION.

<table>
<thead>
<tr>
<th>Credit Hours Completed</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-10</td>
<td>none</td>
</tr>
<tr>
<td>11-16</td>
<td>1.25</td>
</tr>
<tr>
<td>17-32</td>
<td>1.50</td>
</tr>
<tr>
<td>33-48</td>
<td>1.75</td>
</tr>
<tr>
<td>49-over</td>
<td>2.00</td>
</tr>
</tbody>
</table>

Academic Clemency
A student may be given academic clemency for up to 21 semester hours of unsuccessful academic work (D, F, or E grades). The courses for which the student is given academic clemency will remain on the transcript, but grades received in those courses will not be used to calculate the student’s cumulative grade point average (GPA). Clemency will cover all credits earned during the semesters for which it is granted. No credits earned during the semester for which clemency is granted will count toward graduation requirements. Courses passed during that semester need not be repeated, but a sufficient number of additional credits must be earned to meet graduation requirements.

In order to seek academic clemency, the student must not have been enrolled at any higher education institution for three consecutive academic years and must make application in writing to the Vice Chancellor for Instruction. A student may be granted academic clemency only once.

Cancellation of Courses and/or Programs of Study
Phillips Community College reserves the right to cancel courses and/or programs of study which do not meet its established criteria relating to:
1. Availability of competent instructors
2. Adequate facilities
3. Sufficient enrollment

Housing
No housing facilities are provided by Phillips Community College.

Changes
Phillips Community College reserves the right to change rules, regulations and/or policies at any time.

Residency Requirements
A legal resident of Phillips or Arkansas County is defined as a person who has lived within the boundary of said county for the past six consecutive months. An out-of-districl resident is defined as a person who has lived within the state of Arkansas for the past six consecutive months, but outside Phillips or Arkansas County. (Coahoma, Tunica, Quitman and Bolivar county residents of Mississippi are classified as "out-of-district" rather than "non-Arkansas"). A non-Arkansas resident is defined as a person who has not lived in the state of Arkansas for the past six months consecutively. A copy of the complete Residency Regulations for Public Colleges and Universities in the State of Arkansas is available in the Registrar’s office.

Refund Policy
When a student withdraws from PCCUA, a determination will be made regarding repayments and refunds. "Repayment" is the amount of Student Financial Aid (SFA) funds previously disbursed to a student that he or she must pay back. "Refund"
refers to the amount of institutional charges that must be returned to the SFA Programs, other sources of aid, and/or the student, for a student who received SFA funds and who has ceased attending school. The State Refund Policy will apply when a student withdraws from all classes provided that the student has followed the official withdrawal procedure. This policy was adopted by the University of Arkansas Board of Trustees as the official state refund policy for all its member institutions and entitles students to refunds as follows:

Registration, Tuition and Fees
Up to and including five class days.......................... 100%
From the sixth class day through the tenth class day................................................. 50%
The eleventh class day and after ................. No Refund

Any student who drops one or more courses and continues to be enrolled during a fall or spring semester shall be entitled to individual course refunds as follows:

Registration, Tuition and Fees
Up to and including five class days.......................... 100%
The sixth class day and after ...................... No Refund

Any student who drops a course or officially withdraws from PCCUA during a summer school session shall be entitled to an adjustment as follows:

Registration, Tuition and Fees
Prior to the start of classes........................................ 100%
Up to and including two class days...................... 100%
The third through the fifth class days...................... 50%
No adjustments after the fifth class day ..... No Refund

Students who receive disbursements of Title IV aid and later terminate their enrollment require institutional review to determine if there has been an overpayment of SFA funds, and if repayment of any financial aid by the student is required.

If repayment to any Title IV program is required, the following priority list will be used:
- Unsubsidized Federal Stafford Loan
- Subsidized Federal Stafford Loan
- Federal PLUS Loan
- Federal Pell Grant
- Federal Supplemental Educational Opportunity Grant (FSEOG)
- Other Federal Aid programs
- Other state, private or institutional sources of aid
- The student

The Federal Refund Policy will not be applicable with regard to refund calculations at PCCUA since the University of Arkansas Board of Trustees has adopted a recognized State Refund Policy for its member institutions as outlined above. Unpaid charges, which are defined as the amount that institutional costs charged to the student exceed the total amount paid to institutional costs, will reduce the amount available to be refunded in certain situations. For examples of refund calculations students may contact the accounts receivable clerk in the college's Business Office.

Standard of Behavior
College students are considered to have reached the age of responsibility and discretion. Students must realize that the responsibility for success in college rests largely upon themselves. Their conduct, both in and out of college, is expected to be honorable and dignified. The college reserves the right to dismiss any student whose behavior, on or off the campus, is considered undesirable or harmful to the college.

The Curricula
Phillips Community College is strongly committed to an educational program that will provide a foundation for intellectual, cultural and social growth beyond that imposed by narrow highly specialized training. To broaden a student's educational base, it is required that courses be taken that make up a core of General Education. These courses include English, Social Science, Fine Arts, Natural Science, Literature, Mathematics and Physical Education. Variations and options within the General Education requirements are available in most curricula.

Distance Learning
PCCUA has several kinds of distance learning options available for students enrolled at the college. Distance learning may use live-interactive or asynchronous (i.e., pre-recorded) presentation methods. Distance learning can be delivered via a variety of media, including broadcast, webcast, podcast, etc.

Distance learning is a process through which knowledge and skills are acquired through distributed information and instruction. Distance learning encompasses all technologies and other forms of learning at a distance, including instructor-led events. Normally, distance learning is characterized by the following:

- Separation of place and/or time between learners and learning resources
- Interaction between learners and learning resources conducted through one or more media
- Processes may employ a multiple set of deployment methods in the learning experience, such as written correspondence study, interactive audio and/or video, computer, and other electronic technologies. Each of these may be used alone or in combinations. Use of electronic media is not necessarily required; technology is a tool to aid the delivery and provision of learning opportunities.
- Processes may be synchronous occurring in real time or "asynchronous" involving the access of learning resources by learners at any time.
Phillips Community College of the University of Arkansas

MLT/Phlebotomy Program Exit Survey

Name: ___________________________ Date: __________________

Phone Number: ___________________________

Age: _______ Race: _______ Gender: _______ Program Type: MLT ______ PLB ______

Reason for exit:
____ Failure of MLT/PLB course
____ Failure of required co-requisite course
____ Withdrawal passing
____ Withdrawal failing
____ Excessive absences
____ Personal reasons
____ Money issues
____ MLT/PLB is not for me: ____________________ (Other career choice)
Other (explain): ______________________________________

If you were unsuccessful in the program, what do you believe is/was the primary reason? Put an “A” next to the primary reason and the letter “B” next to all other reasons that apply.
____ Financial obligations or limited finances
____ Work hours and work schedule
____ Family obligations and responsibilities
____ Poor test taking
____ Difficulty in understanding theory or clinical concepts
____ Problems with medical terminology or clinical concepts
____ Problems with medical terminology or language
____ Illness or poor health
____ Other (explain): ______________________________________

Identify and support services you used:
____ Conferences with faculty
____ Tutoring
____ Computer assisted instruction
____ Independent study groups
____ Services related to documented disability or what other services would have been helpful?
____ Other (explain) ______________________________________

Do you plan to apply for re-entry?
____ Within one year
____ Within two years
____ Never
____ Transfer If so, Where? _________________________________

119
14E. Policies and procedures for student withdrawal and refunds of tuition and fees must be published and made known to all applicants.

Response to Standard 14E:
Policies and procedures for student withdrawal and refunds of tuition and fees are published in the PCCUA College Catalog and are also found on the PCCUA Web site.

Phlebotomy students that withdrawal from the program must complete an exit interview form. The exit interview will aid in program development.
Graduation Requirements

“Student Right-to-Know”
Graduation Rates

<table>
<thead>
<tr>
<th>Degree</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA Degree</td>
<td>15%</td>
</tr>
<tr>
<td>AAS Degree</td>
<td>19%</td>
</tr>
<tr>
<td>Technical Certificates</td>
<td>15%</td>
</tr>
</tbody>
</table>

These rates have been compiled to comply with the Federal Law known as “Student Right-to-Know.”

General Graduation Requirements
Phillips Community College will award an Associate Degree or a Technical Certificate to students who satisfy all specified requirements. Students completing requirements in a college or university parallel program may be awarded the Associate of Arts Degree. Students completing a two-year program in occupational education may be awarded the Associate of Applied Science Degree. Students completing a one-year occupational program may be awarded a Technical Certificate.

An Associate Degree or Technical Certificate will be awarded to students who satisfy the following requirements:

1. Complete a minimum of sixty-four (64) semester hours of approved credit toward the desired Associates Degree; complete a minimum of thirty-two (32) semester hours of approved credit toward the desired technical certificate. Associate of Arts degree candidates will also be required to participate in the general education outcomes assessment prior to graduation.

At least thirty (30) credit hours or the last fifteen (15) hours toward an AA or an AAS degree must be earned from PCCUA. At least half of the credit hours toward a Technical Certificate must be earned from PCCUA.

2. Exit testing: All AA degree students who have accumulated 45 college-level credit hours must take the Arkansas Assessment of General Education/Collegiate Assessment of Academic Proficiency (CAAP) before registering for a subsequent semester. Failure to complete this testing requirement will interrupt graduation plans at PCCUA and prevent transfer to four-year colleges and universities in Arkansas.

3. Earn a grade point average of 2.0 or above on all college-level work completed. (Exceptions are Nursing and Medical Laboratory Technology.)

4. File an application for graduation with an advisor.

5. Fulfill financial obligations to the college.

Core Competencies
All students receiving an Associate’s Degree from PCCUA will possess the following competencies:

Communication The interactive process through which there is an exchange of verbal and/or nonverbal information.

Cultural Awareness Acknowledgement that society is diverse with groups of individuals possessing differing beliefs, values, attitudes, and customs that are shared from one generation to the next.

Social and Civic Responsibility Behavior that demonstrates adherence to legal/ethical standards established by society.

Critical Thinking Modes of reasoning including analyzing data, evaluating alternatives, setting priorities, and predicting outcomes.

Mathematical Reasoning Determination of approach, materials, and strategies necessary to solve a problem.

Technology Utilization Use tools of the trade to achieve a specific outcome.

Apply for Graduation

By November 12 for December

By March 4 for May

Contact Advisor for degree audits

ACHIEVING THE DREAM

PCCUA is an Achieving the Dream College. Achieving the Dream is a national initiative to help more community college students succeed. The initiative is particularly concerned about student groups that traditionally have faced significant barriers to success, including students of color and low-income students.
14H. A written record of formal student complaints and resolution must be maintained.

Response to Standard 14H:
If a student has a complaint, his/her first course of action is to discuss it with the specific course faculty. After this discussion, he/she may fill out a Student Complaint Report. This begins the formal complaint process. The program maintains a copy of the report in the student’s file. If the student does not think that the complaint has been adequately resolved, he/she may take the report to the Vice Chancellor for Student Affairs. The grievance process will begin. (See Standard 13).
14I. Program evaluation information, including graduation, placement and any certification pass rates must be made available to NAACLS upon request.

Response to Standard 14I:
Program evaluation information including graduation, placement, and certification pass rates is kept in the office of the Dean of Allied Health and the Phlebotomy Program Director. This information is available to NAACLS upon request. The Dean of Allied Health and the Phlebotomy Program Director meet annually to complete the program evaluation. (See Standards 15-18)
The Phlebotomy Program Director annually completes and provides to NAACLS the “NAACLS Survey” describing enrollment numbers, graduation and placement rates, and attrition.
III. PROGRAM EVALUATION

Standard 15. Systematic Review

There must be a mechanism for continually and systematically reviewing the effectiveness of the program to include survey and evaluation instruments that incorporate feedback from a combination of students, employers, faculty, graduates, exit or final examinations and approval review.

Response to Standard 15:
Program faculty monitor specific parameters for assessing the effectiveness of the program including student grades, graduation and retention rates, comprehensive final examination performance, external certification examination performance, student evaluation of clinical experience, faculty evaluations, graduate and employer surveys, and clinical instructor's evaluation of student performance.

At the conclusion of the clinical experience, students are evaluated by their clinical instructors. The score from this performance evaluation makes up 25% of the student's clinical grade. Comments from the clinical instructors may also be used to implement changes in rotation activities. All evaluations are kept in the Program Director's office.

<table>
<thead>
<tr>
<th>Type of Evaluation</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Evaluation of Faculty</td>
<td>Each semester</td>
</tr>
<tr>
<td>Student Evaluation of Lecture</td>
<td>After final examination</td>
</tr>
<tr>
<td>Student Evaluation of Clinical</td>
<td>After finishing rotation</td>
</tr>
<tr>
<td>Student End of Program Evaluation</td>
<td>Last day of clinical rotation</td>
</tr>
<tr>
<td>Graduate Survey</td>
<td>Three months after graduation</td>
</tr>
<tr>
<td>Employer Evaluation</td>
<td>Three months after graduation</td>
</tr>
</tbody>
</table>

A copy of evaluation tools used by the program will be on the following pages.
Student Evaluation of Instruction

**Instruction:** Your thoughtful response to the following items will provide helpful information to the instructor to assist in the improvement of teaching. The college and faculty appreciate your assistance in improving instruction and your cooperation in completing this evaluation form.

Please read each statement carefully and select the response which in your judgement best describes the instructor. Darken the appropriate circle on the data sheet provided to indicate your response to each of the items. Make only one response for each statement.

**Response scale for survey items 1 - 23**

- **A = Rarely**
- **B = Seldom**
- **C = Sometimes**
- **D = Usually**
- **E = Always**

1. My instructor challenges me to think.
2. My instructor encourages students to ask questions & express their viewpoints.
3. My instructor seems well prepared for each class.
4. My instructor returns test results and assignments within two weeks.
5. My instructor’s test cover material presented in class or given as assignments.
6. My instructor provides (spoken and written) information about my progress in the course.
7. My instructor is polite to me.
8. My instructor is available to meet with me during posted office hours or when I make an appointment.
9. The process for determining my grade is clearly outlined in the syllabus.
10. My instructor enjoys teaching the subject.
11. My instructor creates and maintains a classroom that helps me to learn.
12. My instructor uses some of these teaching methods: lecture, group activities, demonstrations, discussions and others.
13. My instructor presents material in a way I can understand.
14. The assignments given by my instructor help me understand the subject.
15. My instructor recommends the use of outside readings and other sources.
16. My instructor makes learning this subject interesting.
17. My instructor sticks to the subject.
18. My instructor knows and calls me by my name.
19. My instructor makes appropriate use of teaching aids (chalkboard, whiteboard, written materials, projection equipment, lab demonstrations, maps, transparencies, and others.)
20. My instructor speaks clearly.
21. My instructor spends more time when introducing new ideas.
22. My instructor begins and ends class as scheduled.
23. The class time is well planned and organized.

Part II - Response scale for items 24 - 27 are A = Yes or B = No

24. I was given the course syllabus/outline.
   A = Yes       B = No
25. My instructor explained written course information, goals of the course, the attendance policy and grading policy.
   A = Yes       B = No
26. My instructor expects me to be well prepared for each class.
   A = Yes       B = No
27. My instructor will do individual tutoring with me if I seek help.
   A = Yes       B = No
28. Does this form allow you to say the things about the course and/or instructor that you feel are important?
   If you rate it a C - please provide comments on what you would include.
   A. Excellent       B. Satisfactory       C. Unsatisfactory
29. My grade is determined by a variety of factors (activities, tests, quizzes, assignments, outside readings, group work...).
   A = Yes       B = No
30. For me this course is (A) an elective (B) required
31. What grade do you expect to receive in this course.
   A = A       B = B       C = C       D = D       E = F

Note: You may use the comment section of your answer sheet for your personal comments on Teacher Effectiveness and General Course Value.
Student Evaluation of Phlebotomy Program

PLB 113 Phlebotomy Procedures and PLB 123 Phlebotomy Skills

1. If you failed any unit exam, it was because
   a. my instructor failed to explain the subject adequately
   b. I needed additional tutoring but failed to seek it
   c. I was unable to schedule tutoring time
   d. I failed to use the student objectives and study thoroughly
   e. I did not fail any test

2. I feel I would have learned more in these subjects if
   a. I had a better instructor(s)
   b. I had used tutoring more
   c. I had used the student objectives and studied more
   d. I had more homework assignments
   e. None of the above

3. The following instructional aides helped me the most
   a. Writing on the board
   b. Use of overheads
   c. Videos
   d. Workbook
   e. Computer tutorials

PLB 116 Phlebotomy Skills

4. The time spent on instruction during hospital clinical was
   a. Too short
   b. Adequate
   c. Too long

5. The time spent performing venipunctures with direct supervision was
   a. Too short
   b. Adequate
   c. Too long

6. The time spent performing venipunctures without supervision was
   a. Too short
   b. Adequate
   c. Too long

7. Do you possess adequate skills in phlebotomy to obtain specimens from all clients? Why?

8. What do you feel are the weaknesses of the phlebotomy program?

9. What do you feel are the strengths of the phlebotomy program?
Site Evaluation Form

Instructions

Please fill in your name and the date at the top of this page, and the name of your clinical site and rotation at the top of the following page.

These evaluations will be utilized in such a way that anonymity of the student is maintained. Please be as objective as possible in filling out the evaluation form. Where appropriate, write the letter of the appropriate response in the square to the left of the question.

This form will be used to evaluate the quality of instruction at the clinical site you have just attended.

Your input is important in evaluating the quality of experiences at the particular clinical site.

Reviewed ____________________________

SP 08

128
1. The time allotted for this rotation was:
   A. Adequate
   B. Too short
   C. Too long
   COMMENTS:  

2. I was busy:
   A. all of the time
   B. most of the time
   C. some of the time
   COMMENTS:  

3. The objectives of this rotation were:
   A. very clear
   B. somewhat clear
   C. unclear
   COMMENTS:  

4. Completing my objectives was:
   A. easy, due to the wide variety and / or number of procedure performed
   B. a little difficult due to the moderate variety / number of procedures
   C. difficult due to the limited variety or number of procedures performed.
   COMMENTS:  

5. I feel my knowledge level upon entering this area is:
   A. Excellent
   B. Good
   C. Average
   D. Weak
   COMMENTS:  

6. I feel my knowledge level upon leaving this area is:
   A. Excellent
   B. Good
   C. Average
   D. Weak
   COMMENTS:  

7. The tech(s) I worked with were:
   A. Very helpful
   B. Somewhat helpful
   C. Not helpful at all
   COMMENTS:  

8. Was the tech/instructor knowledgeable about the clinical area being taught?
   A. yes
   B. somewhat
   C. no
   COMMENTS:  

9. Did the tech / instructor assist in answering questions readily and encourage more?
   A. yes
   B. somewhat
   C. no
   COMMENTS:  

   129
10. If I needed help with a procedure or question, a tech was:
   A. always there
   B. sometimes there
   C. never there
   COMMENTS: ________________________________

11. The tech(s) in charge of the rotation let me know what I would be doing
   A. daily
   B. occasionally
   C. when asked
   D. seldom
   COMMENTS: ________________________________

12. Is the instructor fair and impartial when dealing with students?
   A. yes
   B. somewhat
   C. no
   COMMENTS: ________________________________

13. Personality conflicts with clinical lab employees were.
   A. never a problem
   B. sometimes a problem
   C. always a problem
   COMMENTS: ________________________________

14. The tech(s) I was working with treated me and each other with respect.
   A. all of the time
   B. some of the time
   C. none of the time
   COMMENTS: ________________________________

15. The tech(s) I was working with created an atmosphere that encourage me to become an MLT professional.
   A. all of the time
   B. some of the time
   C. none of the time
   COMMENTS: ________________________________

16. The methodology used in this rotation was consistent with the theory presented in the course.
   A. all of the time
   B. some of the time
   C. none of the time
   COMMENTS: ________________________________

17. Procedures I was expected to perform were explained
   A. thoroughly
   B. briefly
   C. not at all
   COMMENTS: ________________________________

18. Theory of testing procedures was covered
   A. Thoroughly
   B. Briefly
   C. Not at all
   COMMENTS: ________________________________
19. Did the organization of this clinical rotation enhance learning?
   A. yes
   B. somewhat
   C. needs improvement
   COMMENTS: ________________________________

20. I feel the quality of training at this clinical site was
   A. excellent
   B. good
   C. average
   D. poor
   COMMENTS: ________________________________

21. How would you rate the overall laboratory rotation?
   A. excellent
   B. good
   C. average
   D. poor
   COMMENTS: ________________________________

To the best of your ability, provide the following information:

1. List three items which had a positive impact or enhanced the quality of learning at this clinical site.

2. List three items which had a negative impact or decreased the quality of learning at this site.

3. List any improvements which you feel is necessary at this clinical site. "None" means rotation is fine as is.

4. Please give a brief overview of your experiences at this clinical site. Continue your comments on the back side of this paper, if necessary.
Phlebotomy Program Graduate Evaluation

1. What is your present employment status? ___ Yes ___ No

2. Name and Address of current employer

3. What is your job title?

4. How well do you feel your education at PCCUA prepared you for your initial job placement?

5. Please list any area in which you did not receive sufficient training to perform your job adequately

6. Do you feel that the Phlebotomy curriculum was:
   ___ Excellent, (well-constructed) ___ Average, (well-balanced) ___ Poor, (missing a lot)

   Indicate changes you would make to improve the curriculum:

7. Please give suggestions for improving individual courses.

8. Would you recommend the same career field to major in at PCCUA? ___ Yes ___ No

   Why?

9. Have you taken the Board of Registry Exam for Phlebotomy? ___ Yes ___ No

   If yes, What date was the exam taken? __________ / ___ Pass ___ Fail

10. Your current email address: ________________________________
Phlebotomy Program Employer Evaluation

1. Name of graduate ____________________________________________

2. Name & address of employing organization ____________________________
   _____________________________________________________________

3. Name, position, and title of individual completing this form.
   _____________________________________________________________

4. What is the lab area(s) the above graduate is assigned to including shift?
   _____________________________________________________________

5. Number of months the graduate has been employed? ____________________

6. What length of time did the graduate require for orientation? ______________

7. List job skill(s) the graduate lacked when hired?
   _____________________________________________________________
   _____________________________________________________________

8. List any known graduate weaknesses which affect job performance?
   _____________________________________________________________

9. What recommendations would you suggest for improving job skills of future graduates?
   _____________________________________________________________
   _____________________________________________________________

10. Would you hire additional PCCUA graduates? ___ Yes ___ No, Why?
    _____________________________________________________________

   133
For each of the characteristics listed below, rate the general traits of the graduate by circling the appropriate number.

<table>
<thead>
<tr>
<th>General Traits</th>
<th>Below Avg</th>
<th>Average</th>
<th>Above Avg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrity: trustworthiness, honesty, loyalty</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependability: promptness &amp; attendance</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsibility: willingness to perform work</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Initiative: ability to plan one’s own work</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Judgment: ability to make sound decisions</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooperation: ability to work with others</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work Attitudes: enthusiasm which one works</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Stability: poise and self-control</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thoroughness: work is accurate &amp; complete</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Productivity: performs volume of work on time</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Performance: proficiency in technique</td>
<td>1 2 3 4 5 6 7 8 9 10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Standard 16. Outcome Measures

A review of outcomes measures (e.g. external certifying examination results, results from capstone projects) from the last three active years must be documented, analyzed and used in the program evaluation.

Response to Standard 16:
The following is the ASCP Board of Certification Examination Results that the program director and faculty will evaluate.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Graduates Taking the Exam</th>
<th>Number of Graduates Passing the Exam</th>
<th>Program Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>2</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>2008</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>2009</td>
<td>1</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>2010</td>
<td>3</td>
<td>3</td>
<td>100%</td>
</tr>
</tbody>
</table>
Board of Certification
Program Performance Report Summary

003014  PHILLIPS COMMUNITY COLLEGE
PHLEBOTOMY EXAMINATION: Annual 2010

PHILLIPS COMMUNITY COLLEGE
OF THE UNIVERSITY OF ARKANSAS
1000 CAMPUS DRIVE
P.O. BOX 785
HELENA, AR 72342

This Program Performance Summary includes the following parts:

- First time individual student scaled scores
- Program and National scaled score comparisons
- Repeater individual student scaled scores
- Distribution of examinee scaled scores (Opens in the new window)
- Distribution of program scaled scores (Opens in the new window)

The information contained in Program Performance Reports should be handled in a confidential manner which respects the rights of the individual whose scores are reported.

All examination scores are reported in scaled score. A scaled score is statistically derived (in part) from the raw score (number of correctly answered questions) and the difficulty level of the questions. Because each examinee has taken a different form of the examination, scaled scores are used so that tests may be compared on the same scale. The minimum passing score is 400. The highest attainable score is 999.

***** First time individual student scaled scores

MINIMUM PASSING SCORE MPS: MCQ = 400

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Haynes, Judy A</td>
<td>313</td>
<td>387</td>
<td>675</td>
<td>631</td>
<td>462</td>
<td>417</td>
<td>462</td>
<td>PASS</td>
</tr>
<tr>
<td>1</td>
<td>Mitchell, Telecia</td>
<td>500</td>
<td>470</td>
<td>466</td>
<td>243</td>
<td>387</td>
<td>606</td>
<td>432</td>
<td>PASS</td>
</tr>
<tr>
<td>1</td>
<td>Moore, Margaret M</td>
<td>999</td>
<td>565</td>
<td>333</td>
<td>252</td>
<td>535</td>
<td>338</td>
<td>487</td>
<td>PASS</td>
</tr>
</tbody>
</table>

***** Program and National scaled score comparisons

The following tables are summary statistics for

- FIRST TIME EXAMINEES from your program
- FIRST TIME EXAMINEES from the total population this cycle
- ALL EXAMINEES this cycle

### Mean Scaled Scores by Subtest For First Time Examinees

<table>
<thead>
<tr>
<th></th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Mean Scaled Scores:</td>
<td>604</td>
<td>474</td>
<td>491</td>
<td>375</td>
<td>461</td>
<td>454</td>
</tr>
<tr>
<td>This Cycle Mean Scaled Scores:</td>
<td>568</td>
<td>544</td>
<td>499</td>
<td>514</td>
<td>519</td>
<td>513</td>
</tr>
</tbody>
</table>

### First Time Examinees From The Total Population This Cycle

<table>
<thead>
<tr>
<th></th>
<th>Program</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>3</td>
<td>3075</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>460</td>
<td>520</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>22</td>
<td>116</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>3 (100%)</td>
<td>2627 (85.43%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>0 (0%)</td>
<td>448 (14.57%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>432</td>
<td>157</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>487</td>
<td>999</td>
</tr>
</tbody>
</table>

### All Examinees this cycle

<table>
<thead>
<tr>
<th></th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>3203</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>516</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>117</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>2701 (84.33%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>502 (15.67%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>142</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>999</td>
</tr>
</tbody>
</table>

### Repeater individual student scaled scores

#### Performance of Repeater Examinees

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
</table>

Our records indicate that no Repeating students tested for the requested cycle.
Board of Certification
Program Performance Report Summary

003014  PHILLIPS COMMUNITY COLLEGE
PHLEBOTOMY EXAMINATION: Annual 2009

PHILLIPS COMMUNITY COLLEGE
OF THE UNIVERSITY OF ARKANSAS
1000 CAMPUS DRIVE
P.O. BOX 785
HELENA, AR 72342

This Program Performance Summary includes the following parts:

- First time individual student scaled scores
- Program and National scaled score comparisons
- Repeater individual student scaled scores
- Distribution of examinee scaled scores (Opens in the new window)
- Distribution of program scaled scores (Opens in the new window)

The information contained in Program Performance Reports should be handled in a confidential manner which respects the rights of the individual whose scores are reported.

All examination scores are reported in scaled score. A scaled score is statistically derived (in part) from the raw score (number of correctly answered questions) and the difficulty level of the questions. Because each examinee has taken a different form of the examination, scaled scores are used so that tests may be compared on the same scale. The minimum passing score is 400. The highest attainable score is 999.

***** First time individual student scaled scores

MINIMUM PASSING SCORE MPS: MCQ = 400

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gatlin, Britnee</td>
<td>407</td>
<td>384</td>
<td>316</td>
<td>277</td>
<td>414</td>
<td>255</td>
<td>374</td>
<td>FAIL</td>
</tr>
</tbody>
</table>

***** Program and National scaled score comparisons

The following tables are summary statistics for

- FIRST TIME EXAMINEEES from your program
- FIRST TIME EXAMINEEES from the total population this cycle
- ALL EXAMINEEES this cycle

138

Mean Scaled Scores by Subtest For First Time Examinees

<table>
<thead>
<tr>
<th></th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Mean Scaled Scores:</td>
<td>407</td>
<td>384</td>
<td>316</td>
<td>277</td>
<td>414</td>
<td>255</td>
</tr>
<tr>
<td>This Cycle Mean Scaled Scores:</td>
<td>560</td>
<td>543</td>
<td>506</td>
<td>516</td>
<td>518</td>
<td>514</td>
</tr>
</tbody>
</table>

First Time Examinees From The Total Population This Cycle

<table>
<thead>
<tr>
<th></th>
<th>Program</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>1</td>
<td>2274</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>374</td>
<td>519</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>0</td>
<td>117</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>0 (0%)</td>
<td>1946 (85.58%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>1 (100%)</td>
<td>328 (14.42%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>374</td>
<td>100</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>374</td>
<td>957</td>
</tr>
</tbody>
</table>

All Examinees this cycle

<table>
<thead>
<tr>
<th></th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>2382</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>515</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>118</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>2009 (84.34%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>373 (15.66%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>100</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>957</td>
</tr>
</tbody>
</table>

Repeater individual student scaled scores

Performance of Repeater Examinees

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
</table>

Our records indicate that no Repeating students tested for the requested cycle.
Board of Certification
Program Performance Report Summary

003014  PHILLIPS COMMUNITY COLLEGE
PHLEBOTOMY EXAMINATION: Annual 2008

PHILLIPS COMMUNITY COLLEGE
OF THE UNIVERSITY OF ARKANSAS
1000 CAMPUS DRIVE
P.O. BOX 785
HELENA, AR 72342

This Program Performance Summary includes the following parts:

- First time individual student scaled scores
- Program and National scaled score comparisons
- Repeater individual student scaled scores
- Distribution of examinee scaled scores (Opens in the new window)
- Distribution of program scaled scores (Opens in the new window)

The information contained in Program Performance Reports should be handled in a confidential manner which respects the rights of the individual whose scores are reported.

All examination scores are reported in scaled score. A scaled score is statistically derived (in part) from the raw score (number of correctly answered questions) and the difficulty level of the questions. Because each examinee has taken a different form of the examination, scaled scores are used so that tests may be compared on the same scale. The minimum passing score is 400. The highest attainable score is 999.

***** First time individual student scaled scores

MINIMUM PASSING SCORE MPS: MCQ = 400

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
</table>

Our records indicate that no First Time students tested for the requested cycle.

***** Program and National scaled score comparisons

National scaled score comparisons are based on First Time students. Our records indicate that no First Time students tested for the requested cycle. This part of the report was not created.
***** Repeater individual student scaled scores

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
</table>

Our records indicate that no Repeating students tested for the requested cycle.

Board of Certification
Electronic Program Performance Report

School Number: 003014
Category: PBT
Selected Cycle: Annual 2008

Our records indicate that your payment has been received, however no students have tested for the requested cycle. If this information is inaccurate, please contact our office at (312)-541-4962.

If you need an assistance accessing your data, please contact our office.
Board of Registry  
Program Performance Report Summary

003014  PHILLIPS COMMUNITY COLLEGE  
PHLEBOTOMY EXAMINATION: Annual 2007

PHILLIPS COMMUNITY COLLEGE  
OF THE UNIVERSITY OF ARKANSAS  
1000 CAMPUS DRIVE  
P.O. BOX 785  
HELENA, AR 72342

This Program Performance Summary includes the following parts:

- First time individual student scaled scores
- Program and National scaled score comparisons
- Repeater individual student scaled scores

The information contained in Program Performance Reports should be handled in a confidential manner which respects the rights of the individual whose scores are reported.

***** First time individual student scaled scores

MINIMUM PASSING SCORE MPS: MCQ = 400

<table>
<thead>
<tr>
<th>Performance of First Time Examinees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Characteristic</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>1 Nolan, Holly M</td>
</tr>
<tr>
<td>1 Rico, Carri C</td>
</tr>
</tbody>
</table>

***** Program and National scaled score comparisons

The following tables are summary statistics for

- FIRST TIME EXAMINEES from your program
- FIRST TIME EXAMINEES from the total population this cycle
- ALL EXAMINEES this cycle

<table>
<thead>
<tr>
<th>Mean Scaled Scores by Subtest For First Time Examinees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Characteristic</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>Program Mean Scaled Scores:</td>
</tr>
<tr>
<td>This Cycle Mean Scaled Scores:</td>
</tr>
</tbody>
</table>

First Time Examinees From The Total Population This Cycle

142

<table>
<thead>
<tr>
<th>Program</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>2</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>510</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>18</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>2 (100%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>492</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>528</td>
</tr>
</tbody>
</table>

**All Examinees this cycle**

<table>
<thead>
<tr>
<th></th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Examinees</td>
<td>2152</td>
</tr>
<tr>
<td>Mean Scaled Score</td>
<td>515</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>119</td>
</tr>
<tr>
<td>Number Passing (Percent)</td>
<td>1800 (84%)</td>
</tr>
<tr>
<td>Number Failing (Percent)</td>
<td>352 (16%)</td>
</tr>
<tr>
<td>Minimum Scaled Score Achieved</td>
<td>138</td>
</tr>
<tr>
<td>Maximum Scaled Score Achieved</td>
<td>903</td>
</tr>
</tbody>
</table>

**** Repeater individual student scaled scores

<table>
<thead>
<tr>
<th>Attempt</th>
<th>Examinee Name</th>
<th>CS</th>
<th>LO</th>
<th>NBS</th>
<th>POC</th>
<th>SC</th>
<th>SPH</th>
<th>TOTAL</th>
<th>STATUS</th>
</tr>
</thead>
</table>

Our records indicate that no Repeating students tested for the requested cycle.
Standard 17. Graduation and Placement Rates

A review of graduation rates and placement rates must be documented, analyzed and used in the program evaluation.

Response to Standard 17:
The following is the retention and graduation rates for the phlebotomy program from 2008-2010.

<table>
<thead>
<tr>
<th>Admission Cohort</th>
<th>Retention</th>
<th>Graduation</th>
<th>Date of Final Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 2010</td>
<td>100%</td>
<td>100%</td>
<td>Spring 2011</td>
</tr>
<tr>
<td>Spring 2010</td>
<td>85%</td>
<td>85%</td>
<td>Fall 2010</td>
</tr>
<tr>
<td>Fall 2009</td>
<td>100%</td>
<td>100%</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Spring 2009</td>
<td>89%</td>
<td>89%</td>
<td>Fall 2009</td>
</tr>
<tr>
<td>Fall 2008</td>
<td>83%</td>
<td>83%</td>
<td>Spring 2009</td>
</tr>
<tr>
<td>Spring 2008</td>
<td>100%</td>
<td>100%</td>
<td>Fall 2008</td>
</tr>
</tbody>
</table>
### PHILIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS
Phlebotomy Class Tracking - Assessment
Class Entering Spring 2008

Legend:
P  Passed
F  Failed
♀  Ineligible for readmission
S  Has Not Returned
C  Core Courses
V  Varied
U  Unsuccessful in required core courses
T  Transfer
W  Withdraw
AU  Audit
Δ  Dropped before 11th day headcount

<table>
<thead>
<tr>
<th>Name</th>
<th>Orig Adm</th>
<th>Adm I</th>
<th>CC</th>
<th>Adm II</th>
<th>113</th>
<th>123</th>
<th>116</th>
<th>Grad Date</th>
<th>Seeking Employment</th>
<th>Place of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Maria Bond</td>
<td>SP 08</td>
<td>V</td>
<td>P</td>
<td>S 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>YES</td>
<td>Entering ADN Nursing Program</td>
</tr>
<tr>
<td>2. Judy Haynes</td>
<td>SP 08</td>
<td>V</td>
<td>P</td>
<td>S 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>NO</td>
<td>HRMC</td>
</tr>
<tr>
<td>3. Sheria Mason</td>
<td>SP 08</td>
<td>V</td>
<td>P</td>
<td>S 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>NO</td>
<td>Entering ADN Nursing Program</td>
</tr>
<tr>
<td>4. Jacquelyn Bryant</td>
<td>SP 06</td>
<td>V</td>
<td>P</td>
<td>S 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>YES</td>
<td>Pillow Clinic Physician's Office</td>
</tr>
<tr>
<td>5. Patrina Otey</td>
<td>SP 08</td>
<td>V</td>
<td>P</td>
<td>S 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>YES</td>
<td>HRMC</td>
</tr>
<tr>
<td>6. Stephanie Wheeler</td>
<td>SP 06</td>
<td>V</td>
<td>P</td>
<td>S 06</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-08</td>
<td>NO</td>
<td>Not Hired to date</td>
</tr>
</tbody>
</table>

New Admissions Fall 07
Spring 08
Readmissions: 0

As of May 2008

- Number Graduated: 6
- Number Currently Enrolled: 6
- Graduation Rate: 100%
- Retention Rate: 100%

Total Enrollment Fall 07
Spring 08
Total Number in New Student Cohort: 6
## PHILLIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS
### Phlebotomy Class Tracking - Assessment
#### Class Entering Fall 2008

**Legend:**
- **P:** Passed
- **F:** Failed
- **Φ:** Ineligible for readmission
- **S:** Has Not Returned
- **CC:** Core Courses
- **V:** Varied
- **U:** Unsuccessful in required core courses
- **T:** Transfer
- **W:** Withdrew
- **AU:** Audit
- **Δ:** Dropped before 11th day headcount

<table>
<thead>
<tr>
<th>Name</th>
<th>Orig Adm</th>
<th>Adm I</th>
<th>CC</th>
<th>Adm II</th>
<th>I13</th>
<th>123</th>
<th>116</th>
<th>Grad Date</th>
<th>Seeking Employment</th>
<th>Place of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Deana Larry</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-08</td>
<td>YES</td>
<td>Not Hired to Date</td>
</tr>
<tr>
<td>2. Alfreda Savery</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-08</td>
<td>YES</td>
<td>Entered PN Program</td>
</tr>
<tr>
<td>3. Britnee Gatlin</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-08</td>
<td>YES</td>
<td>Not Hired to Date</td>
</tr>
<tr>
<td>4. Keturah White</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-08</td>
<td>YES</td>
<td>Not Hired to Date</td>
</tr>
<tr>
<td>5. LaToya Williams</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Leola Johnson</td>
<td>F 08</td>
<td>V</td>
<td>P</td>
<td>F 08</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-08</td>
<td>YES</td>
<td>Not Hired to Date</td>
</tr>
</tbody>
</table>

**New Admissions Fall 08:** 6

**Readmissions:** 0

**Total Enrollment Fall 08:** 6

**Total Number in New Student Cohort:** 6

**As of December 2008**

- **Number Graduated:** 5
- **Number Currently Enrolled:** 5
- **Graduation Rate:** 83%
- **Retention Rate:** 83%
### PHILLIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS
**Phlebotomy Class Tracking - Assessment**
**Class Entering Spring 2009**

Legend:
- **P**: Passed
- **F**: Failed
- **Φ**: Ineligible for readmission
- **S**: Has Not Returned
- **CC**: Core Courses
- **V**: Varies
- **U**: Unsuccessful in required core courses
- **T**: Transfer
- **W**: Withdraw
- **AU**: Audit
- **A**: Dropped before 11th day headcount

<table>
<thead>
<tr>
<th>Name</th>
<th>Orig Adm</th>
<th>Adm I</th>
<th>CC</th>
<th>Adm II</th>
<th>I13</th>
<th>I123</th>
<th>I116</th>
<th>Grad Date</th>
<th>Seeking Employment</th>
<th>Place of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Katherine Baker</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>YES</td>
<td>HRMC</td>
</tr>
<tr>
<td>2. Elizabeth Crisp</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>NO</td>
<td>Not Seeking Reentering ADN program</td>
</tr>
<tr>
<td>3. Barbara Summerhill</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>NO</td>
<td>Not Seeking Reentering ADN program</td>
</tr>
<tr>
<td>4. Diana Robinson</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>NO</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>5. Antonio Bradley</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>NO</td>
<td>HRMC Reentering ADN program</td>
</tr>
<tr>
<td>6. Staci Laxson</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>YES</td>
<td>HRMC</td>
</tr>
<tr>
<td>7. Lauren Sellers</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>8. Tracy Walton</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>9. Takia Walker</td>
<td>SP 09</td>
<td>V</td>
<td>P</td>
<td>SP 09</td>
<td>EW</td>
<td>EW</td>
<td>EW</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

New Admissions Spring 09: 5
Readmissions: 0
Total Enrollment: Spring 09: 9
Total Number in New Student Cohort: 9

**As of May 2009**

- Number Graduated: 8
- Number Currently Enrolled: 0
- Graduation Rate: 89%
- Retention Rate: 89%
**PHILLIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS**  
**Phlebotomy Class Tracking - Assessment**  
**Class Entering Fall 2009**

**Legend:**  
P = Passed  
F = Failed  
Δ = Ineligible for readmission  
$\ddagger$ = Has Not Returned  
CC = Core Courses  
V = Varies  
U = Unsuccessful in required core courses  
T = Transfer  
W = Withdraw  
AU = Audit  
Δ = Dropped before 11th day headcount

<table>
<thead>
<tr>
<th>Name</th>
<th>Orig Adm</th>
<th>Adm I</th>
<th>CC</th>
<th>Adm II</th>
<th>I13</th>
<th>123</th>
<th>116</th>
<th>Grad Date</th>
<th>Seeking Employment</th>
<th>Place of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Dotson, S</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>HRMC</td>
</tr>
<tr>
<td>2. Freeman, H</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>Pillow Derm. Clinic</td>
</tr>
<tr>
<td>3. Jones, P</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>4. Mitchell, T</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>5. Nelson, L</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>6. Privett, R</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>Not Seeking</td>
</tr>
<tr>
<td>7. Smith, G</td>
<td>F 09</td>
<td>V</td>
<td>P</td>
<td>F 09</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>12-09</td>
<td>YES</td>
<td>HRMC</td>
</tr>
</tbody>
</table>

**New Admissions Fall 09**  
7

**Readmissions:**  
0

**Total Enrollment Fall 09**  
7

**Total Number in New Student Cohort**  
7

**As of December 2009**

- Number Graduated: 7
- Number Currently Enrolled: 0
- Graduation Rate: 100%
- Retention Rate: 100%
### PHILLIPS COMMUNITY COLLEGE OF THE UNIVERSITY OF ARKANSAS
### Phlebotomy Class Tracking - Assessment
### Class Entering Spring 2010

**Legend:**
- P: Passed
- F: Failed
- Φ: Ineligible for readmission
- $\$: Has Not Returned
- CC: Core Courses
- V: Varied
- U: Unsuccessful in required core courses
- T: Transfer
- W: Withdrawn
- AU: Audit
- Δ: Dropped before 11th day headcount

<table>
<thead>
<tr>
<th>Name</th>
<th>Orig Adm</th>
<th>Adm I</th>
<th>CC</th>
<th>Adm II</th>
<th>113</th>
<th>123</th>
<th>116</th>
<th>Grad Date</th>
<th>Seeking Employment</th>
<th>Place of Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nakeshia Booth</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Enterling MLT</td>
</tr>
<tr>
<td>Mary Cartwright</td>
<td>SP 10</td>
<td>SP 10</td>
<td>N</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Latonya Houston</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>Y</td>
<td>Unemployed</td>
</tr>
<tr>
<td>Rashonda Johnson</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Enrolled in other PCCUA courses</td>
</tr>
<tr>
<td>LTtabrian Moore</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>W</td>
<td>W</td>
<td>W</td>
<td>5-10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Margaret Moore</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Enterling MLT</td>
</tr>
<tr>
<td>Elizabeth Pillow McLean</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Reentering ADNP</td>
</tr>
<tr>
<td>Vicki Price</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Reentering ADNP</td>
</tr>
<tr>
<td>Temika Seals</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Reentering ADNP</td>
</tr>
<tr>
<td>Victoria Shields Abernathy</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Enterling MLT</td>
</tr>
<tr>
<td>Kisa Sisk</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>N</td>
<td>Reentering ADNP</td>
</tr>
<tr>
<td>Sheronda Wesley</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>Y</td>
<td>SVI North</td>
</tr>
<tr>
<td>Martez Wilson</td>
<td>SP 10</td>
<td>SP 10</td>
<td>Y</td>
<td>SP 10</td>
<td>P</td>
<td>P</td>
<td>P</td>
<td>5-10</td>
<td>Y</td>
<td>AR Red Cross</td>
</tr>
<tr>
<td></td>
<td>Spring 10</td>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-----------</td>
<td>----</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Admissions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Readmissions</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Enrollment</td>
<td>Fall 10</td>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Number in New Student Cohort</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**As of May 2010**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number Graduated</td>
<td>11</td>
</tr>
<tr>
<td>Number Currently Enrolled</td>
<td>0</td>
</tr>
<tr>
<td>Graduation Rate</td>
<td>85%</td>
</tr>
<tr>
<td>Retention Rate</td>
<td>85%</td>
</tr>
<tr>
<td>Name</td>
<td>Orig Adm</td>
</tr>
<tr>
<td>-------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Angela Chestnut</td>
<td>SP 10</td>
</tr>
<tr>
<td>Colley Mackintosh</td>
<td>SP 10</td>
</tr>
<tr>
<td>Elizabeth Moore</td>
<td>SP 10</td>
</tr>
<tr>
<td>Juanita Mora</td>
<td>SP 10</td>
</tr>
<tr>
<td>Tommie Warwick</td>
<td>SP 10</td>
</tr>
<tr>
<td>Gina Webster</td>
<td>SP 10</td>
</tr>
</tbody>
</table>

**As of December 2010**

- **New Admissions**: Fall 10 (6)
- **Readmissions**: 0
- **Number Graduated**: 100%
- **Number Currently Enrolled**: 0
- **Graduation Rate**: 100%
- **Retention Rate**: 100%
Standard 18. Program Evaluation and Modification

The results of program evaluations must be documented and reflected in ongoing curriculum development and program modification, followed by an analysis of the effectiveness of any changes implemented.

Response to Standard 18:
The College has been evaluating the program with use of a systematic plan for evaluation to assess student learning. This tool will continue to aid the program director with student evaluation. The following pages include copies of the Program Evaluation Plan results from the last few years.

The program director has made several recommendations to the College for curriculum change and to increase the number of phlebotomy classes per year. These changes come after careful review of the current curriculum.

- Fall 2008 PCCUA added an additional phlebotomy class. PCCUA will have 2 phlebotomy classes of eight students per year.
- Increased the minimal math requirement in the general education curriculum. MS 1013 Fundamental Math has been changed to MS 1023 Elementary Algebra.

The above changes were approved by the PCCUA Curriculum Review Committee.

The PCCUA Phlebotomy Program is being used to promote student advancement into the MLT-AAS program.

With both programs now being active, the plan is to have a growing phlebotomy and MLT program. Since the demand for Allied Health workers in the area is high, there is no reason to think otherwise.
Good morning Claude,

Yes and that decision is up to you and your administration. With regard to NAACLS program approval, you would just need to demonstrate you have adequate resources, i.e. didactic and clinical instructors, clinical slots, and supplies/equipment.

Please let me know if you have additional questions.

Suzanne

Suzanne Campbell PhD, MT(ASCP)
MLT Program Coordinator
Seward County Community College/Area Technical School
520 N. Washington
Liberal KS 67901
1-800-373-9951
620-417-1403 office
620-417-1449 fax
Suzanne.Campbell@sccc.edu

Dear Suzanne,

I have a question about a future PLB program change.

Right now PCCUA is having a high interest in the PLB program. Normally we take a class of eight each year into the program which is a two semester program with phlebotomy classes and clinical in the second semester. The first semester is the general education courses.

With interest high, would it be possible to take two classes a year with the phlebotomy courses being taught in the fall and spring semester?

Thank you for your help,

Claude Rector, MA, MT(ASCP)
MLT/PLB Acting Program Director
Phillips Community College of the University of Arkansas
1000 Campus Drive
O. Box 785
Helena-West Helena, AR 72342
(870) 338-6474 Ext 1079
crector@pccua.edu
# PROGRAM EVALUATION PLAN

## Definitions:
- **Mathematical Reasoning**—A systematic application of the science of numbers and their operations.
- **Critical Thinking**—Modes of reasoning including analyzing data, evaluating alternatives, setting priorities and predicting outcomes.
- **Communication**—The interactive process through which there is an exchange of verbal and/or nonverbal information.
- **Technology Utilization/Technical Skills**—Application of a scientific method to achieve a specific outcome.
- **Social & Civic Responsibility**—Behavior that demonstrates adherence to legal/ethical standards established by American Society for Clinical Laboratory Science (ASCLS).
- **Cultural Awareness**—Acknowledgment that society is diverse with groups of individuals possessing differing beliefs, values, attitudes, and customs that are shared from one generation to the next.

## Expected Levels of Achievement:
1. 70% of students enrolled in MS 1023 will earn a minimum grade of "C" in the course.
2. 80% of students who complete PLB 116 will score 70 or above on the "Priorities and Judgment" components on the Student Clinical Evaluation Form.
3. 80% of students who complete PLB 116 will score 70 or above on the "Communication" component on the Student Clinical Evaluation Form.
4. 80% of students who complete PLB 116 will perform the required number of each laboratory procedure with 100% accuracy.
5. 80% of students who complete PLB 116 will score 70 or above on the "Integrity, Attendance, Standard Precautions, & Adherence to Established Procedures" components on the Student Clinical Evaluation Form.
6. 80% of students who complete PLB 116 will score 70 or above on the "Ability to Relate to Others and Cooperation & Ability to Accept Criticism" components on the Student Clinical Evaluation Form.

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person/Committee Responsible</th>
<th>Time/Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Core Competencies: Mathematical Reasoning</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in January</td>
<td>Analysis of MS 1013 grades earned by students admitted to the phlebotomy program</td>
<td>January 2011 100% of students enrolled in MS 1023 or higher earned a minimum grade of &quot;C&quot; in the course.</td>
<td>Levels of achievement met. Revision 2010 Change ELOA to:&quot;</td>
</tr>
<tr>
<td>Critical Thinking</td>
<td></td>
<td></td>
<td>Annually in September/January</td>
<td>Analysis of scores on the &quot;Professional Judgment&quot; component on the Student Clinical Evaluation Form.</td>
<td>September 2010 92% of students enrolled in PLB 116 in Spring 2010 scored 70 or above on the &quot;Professional Judgment&quot; component on the Student Clinical Evaluation Form.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>January 2011 89% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the &quot;Professional Judgment&quot; component on the Student Clinical Evaluation Form.</td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>Annually in September/ January</td>
<td>Analysis of scores on the “Oral Communication Skills” component of the Student Clinical Evaluation Form.</td>
<td>September 2010 92% of students enrolled in PLB 116 in Spring 2010 scored 70 or above on the “Oral Communication Skills” component of the Student Clinical Evaluation Form. January 2011 100% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the “Oral Communication Skills” component of the Student Clinical Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------</td>
<td>-------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology Utilization/ Technical Skills</td>
<td>Annually in September/ January</td>
<td>Analysis of the written lab grade sheet for PLB 116 required laboratory procedures</td>
<td>September 2010 92% of students enrolled in PLB 116 in Spring 2009 performed the required number of each laboratory procedure with 100% accuracy. January 2011 100% of students enrolled in PLB 116 in Fall 2009 performed the required number of each laboratory procedure with 100% accuracy.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social and Civic Responsibility</td>
<td>Annually in September/ January</td>
<td>Analysis of scores on the &quot;Initiative, Punctuality &amp; Attendance, Standard Precautions, &amp; Observing Laboratory Safety&quot; components on the Student Clinical Evaluation Form.</td>
<td>September 2010 92% of students enrolled in PLB 116 in Spring 2009 scored 70 or above on the &quot;Initiative, Punctuality &amp; Attendance, Standard Precautions, &amp; Observing Laboratory Safety&quot; components on the Student Clinical Evaluation Form. January 2011 100% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the &quot;Initiative, Punctuality &amp; Attendance, Standard Precautions, &amp; Observing Laboratory Safety&quot; components on the Student Clinical Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural Awareness</td>
<td>Annually in September/ January</td>
<td>Analysis of scores on the &quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student Clinical Evaluation Form.</td>
<td>September 2010 92% of students enrolled in PLB 116 in Spring 2009 scored 70 or above on the &quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student Clinical Evaluation Form. January 2011 100% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the &quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student Clinical Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

or above on the "Ability to Relate to Others and Cooperation & Ability to Accept Criticism" components on the Student Clinical Evaluation Form.

Level of achievement met.
with Patients, Adaptability, Attitude components on the Student Clinical Evaluation Form.
2010-2011
Phillips Community College of the University of Arkansas
Systematic Plan for Evaluation
Program Effectiveness

**PROGRAM EVALUATION PLAN**

**Definitions:**
- Graduation Rates – The percentage of newly admitted students enrolled in Semester 1 of the PLB Program on the 11th day head count who complete the program within 2 years.
- Placement Rate – The percentage of PLB graduates seeking employment who is employed as a phlebotomist within 3 months of graduation.
- Graduate Satisfaction – The percentage of PLB graduates returning the Graduate Survey within 5 months of graduation who express overall satisfaction with preparation provided by the program.
- Employer Satisfaction – The percentage of PLB employers returning the employer survey within 5 months of graduation who express overall satisfaction with graduate performance.

**Expected Levels of Achievement:**
1. **Graduation Rates** – Forty percent (40%) of newly admitted students enrolled in Semester 1 of the PLB Program on the 11th day head count will complete the program within 2 years.
2. **Placement Rate** – Ninety percent (90%) of PLB graduates seeking employment will be employed as a phlebotomist within 3 months of graduation.
3. **Graduate Satisfaction** – Eighty-five percent (85%) of PLB graduates returning the Graduate Survey within 5 months of graduation will express overall satisfaction with preparation provided by the program.
4. **Employer Satisfaction with Graduates** – Eighty-five percent (85%) of PLB employers returning the employer survey within 5 months of graduation will express overall satisfaction with graduate performance.

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person Responsible</th>
<th>Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis</th>
<th>Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Effectiveness on Graduation Rates</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in September/January</td>
<td>Analysis of Tracking Table for each Admission cohort.</td>
<td>September 2010 85% of newly admitted students enrolled in Semester 1 (09) of the PLB Program on the 11th day head count completed the program within 2 years.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Placement Rate</td>
<td></td>
<td></td>
<td>Annually in September/January</td>
<td>Analysis of Exit Interview data</td>
<td>January 2011 89% of newly admitted students enrolled in Semester 1 (SP 10) of the PLB Program on the 11th day head count completed the program within 2 years.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Graduate Program Satisfaction</td>
<td></td>
<td></td>
<td>Annually in September/January</td>
<td>Analysis of Graduate Surveys results</td>
<td>September 2010 50% of May 2010 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
</tbody>
</table>

September 2010
85% of newly admitted students enrolled in Semester 1 (09) of the PLB Program on the 11th day head count completed the program within 2 years.

January 2011
89% of newly admitted students enrolled in Semester 1 (SP 10) of the PLB Program on the 11th day head count completed the program within 2 years.

September 2010
50% of May 2010 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.

January 2011
% of December 2010 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.

September 2010
% of PLB graduates in May 2010 who returned the Graduate Survey within 5 months of graduation expressed overall satisfaction with preparation provided by the program the Graduate Survey. Unable to assess.
<table>
<thead>
<tr>
<th>Employer Satisfaction</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Annually in</td>
<td>Analysis of</td>
<td>January 2011</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td>September</td>
<td>results of</td>
<td>% of PLB</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Employer</td>
<td>graduates in</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Satisfaction</td>
<td>December 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Survey</td>
<td>who returned</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>the Graduate</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Survey within</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 months of</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>graduation</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>expressed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>overall</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>satisfaction</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>with preparation</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>provided by the</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>program the</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Graduate Survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Unable to</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>assess.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>September 2010</td>
<td>% of PLB</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>employers</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>returning the</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>employer</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>survey within</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 months of</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>graduation May</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2010 expressed</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>overall</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>satisfaction</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>with graduate</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>performance.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>January 2011</td>
<td>% of PLB</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>employers</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>returning the</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>employer</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>survey within</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5 months of</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>graduation</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>December 2010</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>expressed</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>overall</td>
<td>met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>satisfaction</td>
<td>Level of</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>with graduate</td>
<td>achievement</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>performance.</td>
<td>met.</td>
<td></td>
</tr>
</tbody>
</table>
### PROGRAM EVALUATION PLAN

#### Definitions:
- **Mathematical Reasoning**: A systematic application of the science of numbers and their operations.
- **Critical Thinking**: Modes of reasoning including analyzing data, evaluating alternatives, setting priorities and predicting outcomes.
- **Communication**: The interactive process through which there is an exchange of verbal and nonverbal information.
- **Technology Utilization/Technical Skills**: Application of a scientific method to achieve a specific outcome.
- **Social & Civic Responsibility**: Behavior that demonstrates adherence to legal/ethical standards established by American Society for Clinical Laboratory Science (ASCLS).
- **Cultural Awareness**: Acknowledgment that society is diverse with groups of individuals possessing differing beliefs, values, attitudes, and customs that are shared from one generation to the next.

#### Expected Levels of Achievement:
1. 70% of students enrolled in MS 1023 will earn a minimum grade of “C” in the course.
2. 80% of students enrolled in PLB 116 will score 70 or above on the “Priorities and Judgment” components on the Student Clinical Evaluation Form.
3. 80% of students enrolled in PLB 116 will score 70 or above on the “Communication” component on the Student Clinical Evaluation Form.
4. 80% of student enrolled in PLB 116 will perform the required number of each laboratory procedure with 100% accuracy.
5. 80% of students enrolled in PLB 116 will score 70 or above on the “Integrity, Attendance, Standard Precautions, & Adherence to Established Procedures” components on the Student Clinical Evaluation Form.
6. 80% of students enrolled in PLB 116 will score 70 or above on the “Ability to Relate to Others and Cooperation & Ability to Accept Criticism” components on the Student Clinical Evaluation Form.

#### Table: Implementation

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person/Committee Responsible</th>
<th>Time/ Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Core Competencies: Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in January</td>
<td>Analysis of MS 1013 grades earned by students admitted to the phlebotomy program</td>
<td>January 2010 100% of students enrolled in MS 1023 or higher earned a minimum grade of “C” in the course.</td>
<td>Level of achievement met. Revision 2009-2010 Change ELOA to: • 70% of students enrolled in MS 1023 or higher will earn a minimum grade of “C” in the course.</td>
<td></td>
</tr>
<tr>
<td>Mathematical Reasoning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Critical Thinking</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Frequency</td>
<td>Description</td>
<td>September 2009</td>
<td>January 2010</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>---------------</td>
<td>------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td>---------------------------</td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>Annually in</td>
<td>Analysis of scores on the &quot;Oral Communication Skills&quot; component of the</td>
<td>89% of students enrolled in PLB 116 in Spring 2009 scored 70 or above on the &quot;Oral</td>
<td>100% of students enrolled in PLB 116 in Fall 2009 performed the required number</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>September/</td>
<td>Student Clinical Evaluation Form.</td>
<td>Communication Skills&quot; component of the Student Clinical Evaluation Form.</td>
<td>of each laboratory procedure with 100% accuracy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>January</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology Utilization/Technical Skills</td>
<td>Annually in</td>
<td>Analysis of the written lab grade sheet for PLB 116 required laboratory</td>
<td>89% of students enrolled in PLB 116 in Spring 2009 performed the required number</td>
<td>100% of students enrolled in PLB 116 in Fall 2009 performed the required number</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>September/</td>
<td>procedures</td>
<td>of each laboratory procedure with 100% accuracy.</td>
<td>of each laboratory procedure with 100% accuracy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>January</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social and Civic Responsibility</td>
<td>Annually in</td>
<td>Analysis of scores on the &quot;Initiative, Punctuality &amp; Attendance, Standard</td>
<td>89% of students enrolled in PLB 116 in Spring 2009 scored 70 or above on the</td>
<td>100% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>September/</td>
<td>Precautions, &amp; Observing Laboratory Safety&quot; components on the Student</td>
<td>&quot;Initiative, Punctuality &amp; Attendance, Standard Precautions, &amp; Observing</td>
<td>&quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural Awareness</td>
<td>Annually in</td>
<td>Analysis of scores on the &quot;Interaction with Patients, Adaptability, Attitude</td>
<td>89% of students enrolled in PLB 116 in Spring 2009 scored 70 or above on the</td>
<td>100% of students enrolled in PLB 116 in Fall 2009 scored 70 or above on the</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>September/</td>
<td>components on the Student Clinical Evaluation Form.</td>
<td>&quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student</td>
<td>&quot;Interaction with Patients, Adaptability, Attitude&quot; components on the Student</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
with Patients, Adaptability, Attitude components on the Student Clinical Evaluation Form.
### PROGRAM EVALUATION PLAN

**Definitions:**
- Graduation Rates – The percentage of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count who complete the program within 2 years.
- Placement Rate – The percentage of PLB graduates seeking employment who is employed as a phlebotomist within 3 months of graduation.
- Graduate Satisfaction – The percentage of PLB graduates returning the Graduate Survey within 3 months of graduation who express overall satisfaction with preparation provided by the program.
- Employer Satisfaction – The percentage of PLB employers returning the employer survey within 5 months of graduation who express overall satisfaction with graduate performance.

### Expected Levels of Achievement:
1. Graduation Rates – Forty percent (40%) of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count will complete the program within 2 years.
2. Placement Rate – Ninety percent (90%) of PLB graduates seeking employment will be employed as a phlebotomist within 3 months of graduation.
3. Graduate Satisfaction – Eighty-five percent (85%) of PLB graduates returning the Graduate Survey within 5 months of graduation will express overall satisfaction with preparation provided by the program.
4. Employer Satisfaction with Graduates – Eighty-five percent (85%) of PLB employers returning the employer survey within 5 months of graduation will express overall satisfaction with graduate performance.

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person Responsible</th>
<th>Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis</th>
<th>Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Effectiveness</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in September/January</td>
<td>Analysis of Tracking Table for each Admission cohort.</td>
<td>September 2009  89% of newly admitted students enrolled in Semester I (Sp 09) of the PLB Program on the 11th day head count completed the program within 2 years.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduation Rates</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>January 2010 100% of newly admitted students enrolled in Semester I (F 09) of the PLB Program on the 11th day head count completed the program within 2 years.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Placement Rate</td>
<td></td>
<td></td>
<td>Annually in September/January</td>
<td>Analysis of Exit Interview data</td>
<td>September 2009 100% of May 2009 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>January 2010 100% of December 2009 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Level of achievement met.
| Graduate Program Satisfaction | Analysis of Graduate Surveys results | September 2009
100% of PLB graduates in May 2009 who returned the Graduate Survey within 5 months of graduation expressed overall satisfaction with preparation provided by the program. The Graduate Survey.

January 2010
100% of PLB graduates in December 2009 who returned the Graduate Survey within 5 months of graduation expressed overall satisfaction with preparation provided by the program. The Graduate Survey. Unable to assess.

| Employer Satisfaction | Analysis of results of Employer Satisfaction Survey | September 2009
100% of PLB employers returning the employer survey within 5 months of graduation December 2009 expressed overall satisfaction with graduate performance.

January 2010
100% of PLB employers returning the employer survey within 5 months of graduation May 2010 expressed overall satisfaction with graduate performance. | Level of achievement met. | Level of achievement met. | Level of achievement met. | Level of achievement met.
2008-2009
Phillips Community College of the University of Arkansas
Systematic Plan for Evaluation
Phlebotomy Program
Assessment of Student Learning
Curriculum

PROGRAM EVALUATION PLAN

Definitions:
- **Mathematical Reasoning**—A systematic application of the science of numbers and their operations.
- **Critical Thinking**—Modes of reasoning including analyzing data, evaluating alternatives, setting priorities and predicting outcomes.
- **Communication**—The interactive process through which there is an exchange of verbal and or nonverbal information.
- **Technology Utilization/Technical Skills**—Application of a scientific method to achieve a specific outcome.
- **Social & Civic Responsibility**—Behavior that demonstrates adherence to legal/ethical standards established by American Society for Clinical Laboratory Science (ASCLS).
- **Cultural Awareness**—Acknowledgment that society is diverse with groups of individuals possessing differing beliefs, values, attitudes, and customs that are shared from one generation to the next.

**Expected Levels of Achievement:**
1. 70% of students enrolled in MS 1013 will earn a minimum grade of "C" in the course.
2. 80% of students enrolled in PLB 116 will score 70 or above on the "Adaptability" category on the Phlebotomy Technician Student Evaluation Form.
3. 80% of students enrolled in PLB 116 will score 70 or above on the "Oral Communication Skills" category on the Phlebotomy Technician Student Evaluation Form.
4. 80% of student enrolled in PLB 116 will score 70 or above on the "Phlebotomy Technical Skills" category on the Phlebotomy Technician Student Evaluation Form.
5. 80% of students enrolled in PLB 116 will score 70 or above on the "Punctuality, Attendance, and Attitude" categories on the on the Phlebotomy Technician Student Evaluation Form.
6. 80% of students enrolled in PLB 116 will score 70 or above on the "Professional Judgment and Interaction with Patients" categories on the on the Phlebotomy Technician Student Evaluation Form.

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person/Committee Responsible</th>
<th>Time/Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis</th>
<th>Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Core Competencies:</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in January</td>
<td>Analysis of MS 1013 grades earned by students admitted to the phlebotomy program</td>
<td>January 2009 100% of students enrolled in MS 1013 or higher in Fall 2005 earned a minimum grade of &quot;C&quot; in the course.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Mathematical Reasoning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Critical Thinking</td>
<td></td>
<td></td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Adaptability&quot; category on the Phlebotomy Technician Student Evaluation Form</td>
<td>September 2008 100% of students enrolled in PLB 116 in May 2007 scored 70 or above on the &quot;on the Phlebotomy Technician Student Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Frequency</td>
<td>Description</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------------------</td>
<td>----------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Oral Communication Skills&quot; category on the Phlebotomy Technician Student Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology Utilization/ Technical Skills</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Phlebotomy Technical Skills&quot; category on the Phlebotomy Technician Student Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social and Civic Responsibility</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Punctuality, Attendance, and Attitude&quot; categories on the on the Phlebotomy Technician Student Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Cultural Awareness            | Annually in September | Analysis of scores on the "Professional Judgment and Interaction with Patients" categories on the on the Phlebotomy Technician Student Evaluation Form. | Level of achievement met. Program Revision Spring 2008 New Clinical Evaluation Tool Developed. Change ELA to to match the new tool to the following:  
- 80% of students enrolled in PLB 116 will score 70 or above on the "Adaptability" category on the Phlebotomy Technician Student Evaluation Form.  
- 80% of students enrolled in PLB 116 will score 70 or above on the "Oral Communication Skills" category on the Phlebotomy Technician Student Evaluation Form.  
- 80% of student enrolled in PLB 116 will score 70 or above on the "Phlebotomy Technical Skills" category on the Phlebotomy Technician Student Evaluation Form.  
- 80% of students enrolled in PLB 116 will score 70 or above on the "Punctuality, Attendance, and Attitude" categories on the on the Phlebotomy Technician Student Evaluation Form.  
- 80% of students enrolled in PLB 116 will score 70 or above on the "Professional Judgment and Interaction with Patients" categories on the on the Phlebotomy Technician Student Evaluation Form.
# PROGRAM EVALUATION PLAN

**Definitions:**
- Graduation Rates – The percentage of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count who complete the program within 2 years.
- Placement Rate – The percentage of PLB graduates seeking employment who is employed as a phlebotomist within 3 months of graduation.
- Graduate Satisfaction – The percentage of PLB graduates returning the Graduate Survey within 5 months of graduation who express overall satisfaction with preparation provided by the program.
- Employer Satisfaction – The percentage of PLB employers returning the employer survey within 5 months of graduation who express overall satisfaction with graduate performance.

**Expected Levels of Achievement:**
1. Graduation Rates – Forty percent (40%) of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count will complete the program within 2 years.
2. Placement Rate – Ninety percent (90%) of PLB graduates seeking employment will be employed as a phlebotomist within 3 months of graduation.
3. Graduate Satisfaction – Eighty-five percent (85%) of PLB graduates returning the Graduate Survey within 5 months of graduation will express overall satisfaction with preparation provided by the program.
4. Employer Satisfaction with Graduates – Eighty-five percent (85%) of PLB employers returning the employer survey within 5 months of graduation will express overall satisfaction with graduate performance.

## PROCESS

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person Responsible</th>
<th>Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis</th>
<th>Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Effectiveness: Graduation Rates</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in September</td>
<td>Analysis of Tracking Table for each Admission cohort.</td>
<td>September 2008 100% of newly admitted students enrolled in Semester I (Fall 07) of the PLB Program on the 11th day head count completed the program within 2 years.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Placement Rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>January 2009 100% of May 2008 graduates seeking employment were employed as a phlebotomist within 3 months of graduation.</td>
<td>Level of achievement met. Two graduates have applied for admission to the PN program. In AR, PN scope of practice includes venipunctures, so skills learned in the PLB program may be applied when practicing as a licensed PN. One student moved out of town, and it is not known if employment was sought. Continue to monitor.</td>
<td></td>
</tr>
<tr>
<td>Graduate Program Satisfaction</td>
<td></td>
<td></td>
<td></td>
<td>Analysis of Graduate Surveys results</td>
<td>One hundred (100%) of May 2008 PLB graduates returning the Graduate Survey within 5 months of graduation expressed overall satisfaction with preparation provided by the program the Graduate Survey.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Employer Satisfaction</td>
<td></td>
<td></td>
<td>Annually in January</td>
<td>Analysis of results of Employer Satisfaction Survey</td>
<td>One hundred (100%) of PLB employers returning the employer survey within 5 months of May 2008 graduation expressed overall satisfaction with graduate performance.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
</tbody>
</table>
### PROGRAM EVALUATION PLAN

**Definitions:**
- **Mathematical Reasoning** - A systematic application of the science of numbers and their operations.
- **Critical Thinking** - Modes of reasoning including analyzing data, evaluating alternatives, setting priorities and predicting outcomes.
- **Communication** - The interactive process through which there is an exchange of verbal and or nonverbal information.
- **Technology Utilization/Technical Skills** - Application of a scientific method to achieve a specific outcome.
- **Social & Civic Responsibility** - Behavior that demonstrates adherence to legal/ethical standards established by American Society for Clinical Laboratory Science (ASCLS).
- **Cultural Awareness** - Acknowledgment that society is diverse with groups of individuals possessing differing beliefs, values, attitudes, and customs that are shared from one generation to the next.

**Expected Levels of Achievement:**
1. 70% of students enrolled in MS 1013 will earn a minimum grade of "C" in the course.
2. 80% of students enrolled in PLB 116 will score 70 or above on the "Priorities and Judgment" components on the Nonpsychomotor Performance Evaluation Form.
3. 80% of students enrolled in PLB 116 will score 70 or above on the "Communication" component on the Nonpsychomotor Performance Evaluation Form.
4. 80% of student enrolled in PLB 116 will perform the required number of each laboratory procedure with 100% accuracy.
5. 80% of students enrolled in PLB 116 will score 70 or above on the "Integrity, Attendance, Standard Precautions, & Adherence to Established Procedures" components on the Nonpsychomotor Performance Evaluation Form.
6. 80% of students enrolled in PLB 116 will score 70 or above on the "Ability to Relate to Others and Cooperation & Ability to Accept Criticism" components on the Nonpsychomotor Performance Evaluation Form.

<table>
<thead>
<tr>
<th>Component</th>
<th>Where Documentation Is Found</th>
<th>Person/Committee Responsible</th>
<th>Time/Frequency of Assessment</th>
<th>Assessment Method</th>
<th>Report of Data Collection &amp; Analysis</th>
<th>Actual Level of Achievement</th>
<th>Actions For Program Development, Maintenance, or Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Core Competencies: Mathematical Reasoning</td>
<td>Office of the PLB Program Director</td>
<td>PLB Program Director</td>
<td>Annually in January</td>
<td>Analysis of MS 1013 grades earned by students admitted to the phlebotomy program</td>
<td>January 2008 100% of students enrolled in MS 1013 or higher in Fall 2007 earned a minimum grade of &quot;C&quot; in the course.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Critical Thinking</td>
<td></td>
<td></td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Priorities and Judgment&quot; categories on the Nonpsychomotor Performance Evaluation Form.</td>
<td>September 2007 100% of students enrolled in PLB 116 in May 2007 scored 70 or above on the &quot;Priorities and Judgment&quot; components on the Nonpsychomotor Performance Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Frequency</td>
<td>Objective</td>
<td>Level of achievement</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------</td>
<td>----------------------</td>
<td>----------------------------------------------------------------------------------------------</td>
<td>----------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Communication&quot; component of the Nonpsychomotor Performance Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>100% of students enrolled in PLB 116 in May 2006 scored 70 or above on the &quot;Communication&quot; component of the Nonpsychomotor Performance Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology Utilization/Technical Skills</td>
<td>Annually in September</td>
<td>Analysis of the written lab grade sheet for PLB 116 required laboratory procedures.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>100% of student enrolled in PLB 116 in May 2007 performed the required number of each laboratory procedure with 100% accuracy.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social and Civic Responsibility</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Integrity, Attendance, Standard Precautions, &amp; Adherence to Established Procedures&quot; components on the Nonpsychomotor Performance Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>100% of students enrolled in PLB 116 in May 2007 scored 70 or above on the &quot;Integrity, Attendance, Standard Precautions, &amp; Adherence to Established Procedures&quot; components on the Nonpsychomotor Performance Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cultural Awareness</td>
<td>Annually in September</td>
<td>Analysis of scores on the &quot;Ability to Relate to Others and Cooperation &amp; Ability to Accept Criticism&quot; components on the Nonpsychomotor Performance Evaluation Form.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>100% of students enrolled in PLB 116 in May 2007 scored 70 or above on the &quot;Ability to Relate to Others and Cooperation &amp; Ability to Accept Criticism&quot; components on the Nonpsychomotor Performance Evaluation Form.</td>
<td>Level of achievement met.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2007-2008
Phillips Community College of the University of Arkansas
Systematic Plan for Evaluation
Program Effectiveness

PROGRAM EVALUATION PLAN

Definitions:
- Graduation Rates – The percentage of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count who complete the program within 2 years.
- Placement Rate – The percentage of PLB graduates seeking employment who is employed as a phlebotomist within 3 months of graduation.
- Graduate Satisfaction – The percentage of PLB graduates returning the Graduate Survey within 5 months of graduation who express overall satisfaction with preparation provided by the program.
- Employer Satisfaction – The percentage of PLB employers returning the employer survey within 5 months of graduation who express overall satisfaction with graduate performance.

Expected Levels of Achievement:
1. Graduation Rates – Forty percent (40%) of newly admitted students enrolled in Semester I of the PLB Program on the 11th day head count will complete the program within 2 years.
2. Placement Rate – Ninety percent (90%) of PLB graduates seeking employment will be employed as a phlebotomist within 3 months of graduation.
3. Graduate Satisfaction – Eighty-five percent (85%) of PLB graduates returning the Graduate Survey within 5 months of graduation will express overall satisfaction with preparation provided by the program.
4. Employer Satisfaction with Graduates – Eighty-five percent (85%) of PLB employers returning the employer survey within 5 months of graduation will express overall satisfaction with graduate performance.

<table>
<thead>
<tr>
<th>PROCESS</th>
<th>IMPLEMENTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Component</td>
<td>Where Documentation Is Found</td>
</tr>
<tr>
<td>Program Effectiveness</td>
<td>Office of the PLB Program Director</td>
</tr>
<tr>
<td>Placement Rate</td>
<td></td>
</tr>
<tr>
<td>Graduate Program Satisfaction</td>
<td></td>
</tr>
<tr>
<td>Employer Satisfaction</td>
<td></td>
</tr>
</tbody>
</table>

One hundred (100%) of PLB employers returning the employer survey within 5 months of graduation expressed overall satisfaction with graduate performance.

Level of achievement met. 

Level of achievement met.
Standard 20. Program Director

A. The program must have a qualified program director.

B. Responsibilities

The program director must be responsible for the organization, administration, periodic review, planning, development, and general effectiveness of the program. The program director must be responsible for maintaining NAACLS approval of the program.

C. Qualifications

The program director must hold a baccalaureate degree or higher and hold current certification by a nationally recognized agency for clinical laboratory science, or have formal training and current certification in phlebotomy. The program director must document continuing education hours (2.0 CEUs or 20 hours) in phlebotomy, clinical laboratory science, and/or education (including computer applications) within the previous two years. The program director must have knowledge of education and administration as well as current approval/certification procedures.

Response to Standard 20A:
Claude A. Rector, MA, MLS(ASCP)SM is the Program Director for the Phlebotomy Program.

Response to Standard 20B:
A position description describing the responsibilities of the program director has been provided.

Response to Standard 20C:
Mr. Rector's knowledge of education, administration, and current approval/certification procedures has been acquired through the following NAACLS activities:

2010 NAACLS The New and Improved Accreditation Process Workshop, Biloxi
2008 NAACLS Accreditation Workshop, Chicago
2008 NAACLS Education Methodologies Workshop, Savannah
Faculty Fact Sheet

Name: Claude A. Rector
Position: MLT/PLB Program Director

Employed by: Phillips Community College of the University of Arkansas
Title: Program Director

Proportion of Time in:
Teaching: 70%  Administration: 30%
Clinical Services: %  Research: %

Education

<table>
<thead>
<tr>
<th>Education</th>
<th>Institution</th>
<th>Field of Study</th>
<th>Degree</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate</td>
<td>University of Arkansas/Fayetteville</td>
<td>Microbiology</td>
<td>BS</td>
<td>1989</td>
</tr>
<tr>
<td>Graduate</td>
<td>University of Arkansas/Fayetteville</td>
<td>Microbiology</td>
<td>MA</td>
<td>1991</td>
</tr>
<tr>
<td>Other (Specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Credentials: MLS\textsuperscript{CM} Certified by: ASCP Year Certified: 2003 Certification #: 217984

Experience (List current position first)

<table>
<thead>
<tr>
<th>Institution/City/State</th>
<th>Position</th>
<th>Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCCUA/Helena-West Helena/AR</td>
<td>MLT/PLB Program Director</td>
<td>2008-Present</td>
</tr>
<tr>
<td>DeWitt Hospital/DeWitt/AR</td>
<td>Bench Technologist</td>
<td>1999-2008</td>
</tr>
<tr>
<td>Delta Memorial/Dumas/AR</td>
<td>Bench Technologist</td>
<td>1998-1999</td>
</tr>
<tr>
<td>UAMS/Little Rock/AR</td>
<td>Research Technologist</td>
<td>1996-1998</td>
</tr>
</tbody>
</table>

List principal functions in the education program:
Program Director
PLB Instructor: Phlebotomy Procedures, Phlebotomy Skills

List continuing accreditation activities during the past three years:

<table>
<thead>
<tr>
<th>Title</th>
<th>Sponsor</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incorporating Advocacy Skills in Clinical Laboratory Program Curricula</td>
<td>ASCLS</td>
<td>2/19/11</td>
</tr>
<tr>
<td>Applying Evidence-Based Methods to Laboratory Medicine Decision-Making</td>
<td>ASCLS</td>
<td>2/19/11</td>
</tr>
<tr>
<td>Teaching Immunology on a Budget</td>
<td>ASCLS</td>
<td>2/19/11</td>
</tr>
<tr>
<td>Successful Strategies for a New Program Director</td>
<td>ASCLS</td>
<td>2/19/11</td>
</tr>
<tr>
<td>Walk in Their Shoes</td>
<td>ASCLS</td>
<td>2/19/11</td>
</tr>
<tr>
<td>Title</td>
<td>Organization</td>
<td>Date</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>--------------</td>
<td>------------</td>
</tr>
<tr>
<td>Teaching and Evaluation of Bench Skills</td>
<td>ASCLS</td>
<td>2/18/11</td>
</tr>
<tr>
<td>Matching Test Questions to Objectives: A Recent Convert to Test Blueprinting</td>
<td>ASCLS</td>
<td>2/18/11</td>
</tr>
<tr>
<td>Incorporating Professional Values and Intellectual Inquiry Across the CLS Curriculum</td>
<td>ASCLS</td>
<td>2/18/11</td>
</tr>
<tr>
<td>Social Networking in Education</td>
<td>ASCLS</td>
<td>2/18/11</td>
</tr>
<tr>
<td>The Global Curriculum and Global Accreditation</td>
<td>ASCLS</td>
<td>2/18/11</td>
</tr>
<tr>
<td>Thriving, Not Just Surviving, in the Faces of Life Stress</td>
<td>ASCLS</td>
<td>2/27/10</td>
</tr>
<tr>
<td>The Practice and The Art of Grading</td>
<td>ASCLS</td>
<td>2/27/10</td>
</tr>
<tr>
<td>Health Care Reform and Other Federal Activities</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>What...My Students Aren't Professional Employees?</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>Secrets of Good Teachers: A Key to Success</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>Clinical Microbiology: A Public Relations Tool for Career Recruitment and Professional Visibility</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>The Wish List</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>Faculty Recruitment, Retention &amp; Development: “Who Will Teach in 2020?”</td>
<td>ASCLS</td>
<td>2/26/10</td>
</tr>
<tr>
<td>Congratulations! You’re a Program Director! Now What?</td>
<td>ASCLS</td>
<td>2/25/10</td>
</tr>
<tr>
<td>Vulnerabilities and Solutions-Strategies for Revitalization</td>
<td>ASCLS</td>
<td>2/25/10</td>
</tr>
<tr>
<td>Normal is Gone and It Won’t Be Back!</td>
<td>ASCLS</td>
<td>2/25/10</td>
</tr>
<tr>
<td>The New and Improved Accreditation Process</td>
<td>NAACLS</td>
<td>2/25/2010</td>
</tr>
<tr>
<td>Understanding Standards in Accreditation</td>
<td>NAACLS</td>
<td>11/07/2008</td>
</tr>
<tr>
<td>Needle Stick Safety</td>
<td>ABP</td>
<td>10/07/2008</td>
</tr>
<tr>
<td>How To Help the Needle Phobic Patient</td>
<td>ABP</td>
<td>10/02/2008</td>
</tr>
<tr>
<td>Latex Allergy</td>
<td>ABP</td>
<td>10/02/2008</td>
</tr>
<tr>
<td>Pediatric Phlebotomy</td>
<td>ABP</td>
<td>10/02/2008</td>
</tr>
<tr>
<td>Preanalytical Variables in Specimen Collection</td>
<td>ABP</td>
<td>10/02/2008</td>
</tr>
<tr>
<td>Phlebotomy Special Procedures</td>
<td>ABP</td>
<td>09/25/2008</td>
</tr>
<tr>
<td>Advanced Phlebotomy Technique</td>
<td>ABP</td>
<td>09/22/2008</td>
</tr>
<tr>
<td>Licensure Texas Perspective</td>
<td>Arkansas Society for Medical Technology</td>
<td>06/13/2008</td>
</tr>
<tr>
<td>Stress Management for Phlebotomists</td>
<td>ASCP</td>
<td>04/29/2008</td>
</tr>
<tr>
<td>Title</td>
<td>Organization</td>
<td>Date</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>--------------</td>
<td>------------</td>
</tr>
<tr>
<td>Positivity in the Clinical Laboratory Workplace</td>
<td>ASCP</td>
<td>04/29/2008</td>
</tr>
<tr>
<td>Phlebotomy Considerations for Age-Specific Care</td>
<td>ASCP</td>
<td>04/29/2008</td>
</tr>
<tr>
<td>Phleb Considerations for Patients with Disabilities</td>
<td>ASCP</td>
<td>04/29/2008</td>
</tr>
<tr>
<td>Phlebotomy With an International Focus</td>
<td>ASCP</td>
<td>04/23/2008</td>
</tr>
<tr>
<td>Monitoring Heparin Therapy: Phlebotomy’s Impact</td>
<td>ASCP</td>
<td>04/23/2008</td>
</tr>
<tr>
<td>Hospital Overwhelmed with Point-of-Care Testing</td>
<td>ASCP</td>
<td>04/21/2008</td>
</tr>
<tr>
<td>Donor Phlebotomy: Key Element of Blood Collection</td>
<td>ASCP</td>
<td>04/21/2008</td>
</tr>
<tr>
<td>Communication Strategies in Phlebotomy</td>
<td>ASCP</td>
<td>04/17/2008</td>
</tr>
<tr>
<td>Levels of Practice in the Clinical Laboratory Profession: Report of the Interassociation Levels of Practice Task Force</td>
<td>ASCLS</td>
<td>02/23/2008</td>
</tr>
<tr>
<td>Game Theory: Resources for Learning and Teaching Strategy</td>
<td>ASCLS</td>
<td>02/23/2008</td>
</tr>
<tr>
<td>Legislative Updates</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>Globalization and Service Learning in the Clinical Laboratory Science Classroom</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>How Can We Teach It When We Don’t Do It?</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>911 for New Program Directors</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>Hematology Teaching Strategies: What Works and What Does Not</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>Using Rubrics for Evaluating Student Performance and Laboratory Skills</td>
<td>ASCLS</td>
<td>02/22/2008</td>
</tr>
<tr>
<td>Reading is Fundamental: Ideas on How to Get Our Students to Read the Textbooks and Articles That We Want</td>
<td>ASCLS</td>
<td>02/21/2008</td>
</tr>
<tr>
<td>Building Mastery: Bringing Honor to Yourself and Your Profession Even on the Bad Days</td>
<td>ASCLS</td>
<td>02/21/2008</td>
</tr>
<tr>
<td>Education Methodologies Workshop</td>
<td>NAACLS</td>
<td>02/21/2008</td>
</tr>
</tbody>
</table>
Program Director, Phlebotomy Program

Brief Job Description

The Program Director is a full-time administrative and instructional faculty position who manages, instructs in and supervises the Phlebotomy Program in the Allied Health Division at Phillips Community College of the University of Arkansas (PCCUA). The Program Director reports directly to the Dean of Allied Health regarding all program activities. The Program Director provides leadership for the program and is accountable for the organization, administration, periodic review, planning, development and evaluation of the program. Responsibilities include but are not limited to: teaching and evaluating student progress; providing guidance for curriculum development; serving on the program’s Advisory Committee; representing the program on various college committees; developing class schedules; proposing and guiding revision of new program policies and procedures; assisting in the development of the program’s annual budget; participating in the student application and interview process, student admissions, orientation, advisement and registration; validating graduates for certification examinations; evaluating program effectiveness and insuring that program reporting is accurate and complete and due diligence is met: serving as clinical/scientific liaison to the affiliated hospitals and laboratory community for laboratory medicine and continuing education issues. The Program Director assures the Phlebotomy Program is maintaining NAACLS approval which includes timely review of self-study activities, documentation and the periodic site visits.
CLAUDE A. RECTOR
2733 Mariah Lane
Southaven, MS 38672
(662) 429-7488

Education

Master of Arts
Microbiology
University of Arkansas-Fayetteville
1991

Bachelor of Science
Microbiology
University of Arkansas-Fayetteville
1989

Graduate Work
University of Arkansas for Medical Sciences
1991-1994

Experience

Phillips Community College of the University of Arkansas
Medical Laboratory Technology & Phlebotomy Program Director
Helena-West Helena, Arkansas
January 2008- Present

DeWitt Hospital Laboratory
Medical Technologist (ASCP)
DeWitt, Arkansas
January 1999- December 2007

First United Methodist Church
Youth Director/Part-time
Dumas, Arkansas
January 2002-June 2009

Delta Memorial Hospital Laboratory
Lab Tech/X-ray Tech
Dumas, Arkansas
January 1998-October 1999

Arkansas Children’s Hospital Research Institute
Research Associate
Little Rock, Arkansas
January 1996-January 1998

University of Central Arkansas
Biology Instructor
Conway, Arkansas
September 1995-January 1996
MDSA, Inc.
Durable Medical Equipment Sales Consultant
Little Rock, Arkansas
June 1994- September 1995

University of Arkansas-Fayetteville
Graduate Teaching Assistant
Biology Laboratory Instructor
August 1990- May 1991

Research

Arkansas Children’s Hospital Research Institute
Research Associate
Department of Pediatrics
“Effects of Lead Exposure on the Sex Hormones During Puberty”
Martin Ronis, Ph.D.
January 1996- January 1998

University of Arkansas for Medical Sciences
Research Assistant
“Water Quality of an Ozark Stream Receiving Urban Point Pollution”
James J. Daly, Ph.D.
June 1993- May 1994

University of Arkansas-Fayetteville
“Effects of Tumor Necrosis Factor on the Immune System of Chickens”
Michael Kogut, Ph.D.
March 18, 2009

Claude A. Rector, MA, MT(ASCP)
Program Director
Phillips Community College of University of Arkansas
PO Box 785
Helena, AR 72342

Dear Mr. Rector,

The Review Committee for Accredited Programs has recognized the following change in Program Director:

Claude A. Rector, MA, MT(ASCP), Permanent Program Director replacing, Claude A. Rector, MA, MT(ASCP), Acting Program Director

Attached to this email are materials that instruct new program directors how to better understand and communicate with NAACLS. These documents include an access link to the new Guide to Accreditation, along with other attached items of information.

It is important that the program maintain the following accreditation documentation:

1. All accreditation status letters.
2. A copy of the most recent Self-Study Report.
3. Copies of the Self-Study Report Paper Review, the Site Visit Report, progress reports and the program's responses to these documents.
4. Copies of correspondence with NAACLS.
Our records will be updated to reflect this change. If you have any questions, please contact me.

Sincerely,

[Signature]

Edward Rotchford
Program Coordinator-Program Services

©2008 NAACLS, 773.714.8880, 773.714.8886(FAX)
December 5, 2007

Amy Hudson, MSN, RN
Dean of Allied Health
Phillips Community College
Allied Health
PO Box 785
Helena, AR 72342-0785

Dear Ms. Hudson,

The Review Committee for Accredited Programs has recognized the following change in CLT/MLT and PHLEB Program Director, effective January 1, 2008:

Claude A. Rector, MA, MT(ASCP), Acting Program Director

Acting Program Director status will expire on January 1, 2009. Acting Program Director status is approved for a maximum of one year and is considered by NAACLS when an applicant lacks one or more of the required qualifications, but will have attained these qualifications within one calendar year.

Please submit a Program Official Change Form, designating a qualified program director, to NAACLS at least 30 days prior to the expiration date.

Enclosed is a CD containing materials that instruct new program directors how to better understand and communicate with NAACLS. These documents include a Guide to Accreditation, the NAACLS organizational chart and other items of information.

It is important that the program maintain the following accreditation documentation:

1. All accreditation status letters.
2. A copy of the most recent Self-Study Report.
3. Copies of the Self-Study Report Paper Review, the Site Visit Report, progress reports and the program's responses to these documents.

4. Copies of correspondence with NAACLS.

If you have any questions regarding this change, please contact me.

Sincerely,

[Signature]

Edward Rotchford
Program Coordinator – Program Services

cc: Enza Messineo, Medical Education Products Coordinator
    Daniel Tice, Program Coordinator – Program Services
From: Steven Murray
Sent: Monday, December 10, 2007 1:46 PM
To: Deborah King
Subject: RE: Phlebotomy Position

I approve the recommendation.

--Steven Murray

"We are perfectly designed to get the results we're getting."

From: Deborah King
Sent: Monday, December 10, 2007 1:19 PM
To: Steven Murray
Subject: Phlebotomy Position

Dear Dr. Murray,

The Interview Committee would like to offer Claude Rector a 10.5 month contract as the Phlebotomy/MLLT faculty/interim director. He has a masters degree and nine years of clinical experience, a masters degree, and will place at Step 10 on the PCCUA Salary Placement Schedule earning $41,017 + $8,000 = $48,017 annually.

Claude Rector was not approved as a Program Director but as an Acting Program Director which allows us to place him in a position for one year. During that year, Mr. Rector must show documentation that he has fulfilled the following requirements:

1) Teach a phlebotomy class during the Spring of 2008
2) Attend a NAACLS conference in Savannah, Georgia in February of 2008,
3) And, fulfill 20 hours of continuing education during the year he serves as acting Director.

At the end of the year, PCC will resubmit Mr. Rector's application for approval as Program Director and the College will have to wait on a ruling.

Do you approve of hiring Mr. Rector for this position?

Sincerely,

Debby King, Ed.D.
Vice Chancellor for Instruction
Standard 21. Faculty

The program must have qualified didactic and clinical faculty. (Didactic faculty are defined as instructors teaching the didactic components of phlebotomy. Clinical faculty are defined as instructors teaching the applied components of phlebotomy).

Response to Standard 21:
A list of the core and clinical faculty for each laboratory discipline is documented below.

<table>
<thead>
<tr>
<th>Core Faculty</th>
<th>Primary Teaching Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claude A. Rector, MA, MLS(ASCP)(^{CM})</td>
<td>Phlebotomy Procedures</td>
</tr>
<tr>
<td></td>
<td>Phlebotomy Skills</td>
</tr>
<tr>
<td>Julie Pittman, BS, MLS(ASCP)(^{CM})</td>
<td>Special Techniques</td>
</tr>
<tr>
<td></td>
<td>Phlebotomy Skills</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Faculty (Education Coordinators)</th>
<th>Affiliate Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deborah Fields, BS, MT(ASCP)SI</td>
<td>Helena Regional Medical Center</td>
</tr>
<tr>
<td></td>
<td>Helena-West Helena, AR</td>
</tr>
<tr>
<td>Ginger Coats, BSMT(ASCP)</td>
<td>Northwest Mississippi Regional Medical Center</td>
</tr>
<tr>
<td></td>
<td>Clarksdale, MS</td>
</tr>
<tr>
<td>Taylor Gregory, BSMT(ASCP)</td>
<td>Baptist Health Medical Center-Stuttgart</td>
</tr>
<tr>
<td></td>
<td>Stuttgart, AR</td>
</tr>
<tr>
<td>Rhonda Reed, BSMT(ASCP)</td>
<td>DeWitt Hospital &amp; Nursing Home</td>
</tr>
<tr>
<td></td>
<td>DeWitt, AR</td>
</tr>
</tbody>
</table>

A. Didactic Faculty

1. Responsibilities
The faculty must participate in teaching courses, supervising applied laboratory learning experiences, evaluating student achievement, developing curriculum, formulating policy and procedures, and evaluating program effectiveness.

Response to Standard 21.1:
The program has two (2) full-time core faculty who are responsible for teaching and evaluating student achievement in lecture and laboratory courses. In addition, the core faculty oversees the theory portion (study questions, written examinations, objectives, etc.) of courses. The program also has a clinical Education Coordinator appointed for each clinical affiliate site. Education Coordinators are responsible for scheduling student rotations, overseeing student clinical activities, and deriving the students’ final clinical experience grades. They also serve as first contact for students with problems or counseling needs.

Additionally, each clinical site has several clinical instructors directly involved with the students' hands-on activities in the clinical laboratory setting. Clinical instructors are responsible for directly conducting and supervising clinical laboratory experiences, assessing student competency, and evaluating student technical performance during clinical. Once a student's clinical experience activities are complete, the clinical instructor submits "points earned" and evaluation scores to the Education Coordinator. The Education Coordinator then compiles the points, adds additional written examination scores, and derives a final clinical grade which is submitted to the Phlebotomy Program office.
2. Qualifications
Didactic faculty must hold an associate degree or higher, or 60 college credit hours from an accredited institution, or an equivalent combination of education and experience with a minimum of 30 college credit hours and 3 years of relevant teaching experience. They must also have current certification in phlebotomy or clinical laboratory science and document continuing education hours (2.0 CEUs or 20 hours) in phlebotomy, clinical laboratory science, and/or education (including computer applications) within the previous two years.

Response to 21.2:
Each applicant for a faculty position is required to submit a complete curriculum vitae and list of references that are reviewed by a search committee. Candidates with clinical experience in the areas to be taught are considered.

The core faculty read current medical technology journals and attends continuing education workshops, conferences, and seminars as a means of ensuring they are current with technology developments and are maintaining proficiency in their content areas.

The core faculty is evaluated each semester by students at the conclusion of each lecture and laboratory course. These anonymous evaluations are completed by the students in the absence of the faculty. The evaluations provide a score for each faculty member related to his/her knowledge of the subject matter, course content, teaching effectiveness, and a variety of other topics relating to teaching abilities. Student evaluation results are used by faculty for improving performance.

3. Professional Development

The program must assure and document ongoing professional development of the program faculty to assure that the didactic faculty members are able to fulfill their instructional responsibilities.

Response to Standard 21.3:
The Faculty Fact Sheets document the continuing education activities of the core faculty members. Faculty are encouraged and supported to attend professional conferences and workshops.

B. Clinical Faculty

1. Responsibilities

The clinical faculty must participate in instructing students during clinical experiences and evaluating student achievement.

2. Qualifications
Clinical instructors must hold current certification in phlebotomy or clinical laboratory science, or have one year of full time phlebotomy experience.

C. Consortium Education Coordinator (when required, one at each participating entity in a consortium or joint venture)

1. Responsibilities

The Consortium Education Coordinator, when required, is responsible for coordinating classroom teaching and applied education, evaluating program effectiveness, and must have appropriate communications with the Program Director.

2. Qualifications

The education coordinator, when required, must hold an appropriate nationally recognized certification required of a program director as stated in Standard 20, an academic degree appropriate to the program level, and at least one year of experience in clinical laboratory science education, including teaching courses, conducting and managing learning experiences, evaluation student achievement, and evaluating instructional effectiveness.
Campus Faculty
Claude Rector - Phlebotomy Procedures, Phlebotomy Skills

Julie Pittman - Special Techniques, Phlebotomy Skills

Clinical Faculty

Helena Regional Medical Center (HRMC)
Deborah Fields - Laboratory Manager
Natiayoun Williams - Phlebotomy Supervisor
Linda McAlexander - MT
Melissa Reece - MLT

Northwest Mississippi Regional Medical Center (NWMRMC)
Rhonda Williams - Phlebotomy Supervisor
Rodney Sabbatini - MT
Mary Alice Sabbatini - HEW
Gail Bley - MT

Baptist Health Medical Center - Stuttgart
Judy Tipton - MLT

DeWitt Hospital and Nursing Home
Rhonda Reed - Laboratory Manager
Faculty Fact Sheet

Name: Julie Pittman
Position: MLT/PLB Instructor

Employed by: Phillips Community College of the University of Arkansas
Title: Faculty

Proportion of Time in:

<table>
<thead>
<tr>
<th>Teaching</th>
<th>Administration</th>
<th>Clinical Services</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 %</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Education

<table>
<thead>
<tr>
<th>Degree</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>BS</td>
<td>1985</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution</th>
<th>Field of Study</th>
<th>Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta State University</td>
<td>Biology</td>
<td>BS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution</th>
<th>Field of Study</th>
<th>Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Mississippi Medical Center</td>
<td>Medical Technology</td>
<td>BS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Institution/City/State</th>
<th>Position</th>
<th>Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCCUA/ Helena West Helena/ AR</td>
<td>MLT/PLB Faculty</td>
<td>2009-Present</td>
</tr>
<tr>
<td>Specs Optical</td>
<td>Optician</td>
<td>2006-2009</td>
</tr>
<tr>
<td>Eye Care of Perdido</td>
<td>Optician</td>
<td>2002-2006</td>
</tr>
<tr>
<td>Camp Lejeune Dependent Schools</td>
<td>Substitute Teacher</td>
<td>2001-2002</td>
</tr>
<tr>
<td>Austin Mitchell, MD</td>
<td>Medical Technologist</td>
<td>1994-1995</td>
</tr>
<tr>
<td>Laboratory Corporation of America</td>
<td>Medical Technologist</td>
<td>1992-1993</td>
</tr>
<tr>
<td>Onslow County Health Department</td>
<td>Medical Technologist</td>
<td>1988-1990</td>
</tr>
<tr>
<td>Bolivar County Hospital</td>
<td>Medical Technologist</td>
<td>1987</td>
</tr>
<tr>
<td>University of Mississippi Medical Center</td>
<td>Laboratory Assistant</td>
<td>1986-1987</td>
</tr>
</tbody>
</table>

List principal functions in the education program:

PLB Instructor: Special Techniques

List continuing accreditation activities during the past three years:

- See attached
# ASCLS CE Organizer

## Transcript of Continuing Education Activities for

Julie Pittman  
100 Grider Place  
Helena AR 72342

ASCLS #D4E7CBF6-6979-4E2B-84D1-5D1B90  
State License #231003

Date printed: March 16, 2011

<table>
<thead>
<tr>
<th>Date</th>
<th>ASCLS Number</th>
<th>Title</th>
<th>Location</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 20, 2011</td>
<td>015-250-11</td>
<td>Full Alignment of Teaching, Learning and Assessment</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 20, 2011</td>
<td>015-246-11</td>
<td>Applying Evidence-Based Methods to Laboratory Medicine Decision-Making</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 20, 2011</td>
<td>015-242-11</td>
<td>Recruitment and Retention in the Classroom: The &quot;R&quot; Words</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 20, 2011</td>
<td>015-239-11</td>
<td>Truths, Myths, and It Depends: Thoughts on Clinical Laboratory Education Liabilities from a Fellow Educator</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 20, 2011</td>
<td>015-234-11</td>
<td>Walk in Their Shoes</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 18, 2011</td>
<td>015-233-11</td>
<td>Hot Topics</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 18, 2011</td>
<td>015-229-11</td>
<td>Quality Assurance for the Student: What They Need To Know!</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 18, 2011</td>
<td>015-226-11</td>
<td>Incorporating Professional Values and Intellectual Inquiry Across the CLS Curriculum</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 18, 2011</td>
<td>015-223-11</td>
<td>Social Networking in Education</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 18, 2011</td>
<td>015-219-11</td>
<td>The Global Curriculum and Global Accreditation</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 26, 2010</td>
<td>015-186-10</td>
<td>Health Care Reform and Other Federal Activities</td>
<td></td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 26, 2010</td>
<td>015-182-10</td>
<td>Skills for Classroom and Meeting Presentations</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 26, 2010</td>
<td>015-179-10</td>
<td>Secrets of Good Teachers: A Key to Success</td>
<td></td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 26, 2010</td>
<td>015-194.10</td>
<td>Professionalism: A Required CLS Curricular Component</td>
<td></td>
<td>1.0</td>
</tr>
</tbody>
</table>

This transcript is prepared from data self-submitted by the person listed above, who takes responsibility for its accuracy. ASCLS does not verify the listed continuing education activities were completed.

ASCLS, 6701 Democracy Blvd., Suite 300, Bethesda, MD 20817-1574
<table>
<thead>
<tr>
<th>Date</th>
<th>Code</th>
<th>Title</th>
<th>Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 26, 2010</td>
<td>015-177-10</td>
<td>Creative Strategies to Assess Student Learning</td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 26, 2010</td>
<td>015-173-10</td>
<td>Faculty Recruitment, Retention &amp; Development: &quot;Who Will Teach in 2020?&quot;</td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 25, 2010</td>
<td>015-171-10</td>
<td>Phlebotomy Online: An Exploratory Study of Live vs Web-based Delivery</td>
<td>1.5</td>
</tr>
<tr>
<td>Feb 25, 2010</td>
<td>015-168-10</td>
<td>Vulnerabilities and Solutions - Strategies for Revitalization</td>
<td>1.0</td>
</tr>
<tr>
<td>Feb 25, 2010</td>
<td>015-167-10</td>
<td>Normal is Gone and It Won't Be Back!</td>
<td>1.0</td>
</tr>
</tbody>
</table>
American Society for Clinical Pathology

pathologists  residents  laboratory professionals  students  program directors  about asc

Home  My Account  My Transcript & Certificates

My Transcript & Certificates

Total Credit Summary

<table>
<thead>
<tr>
<th>Credit Type</th>
<th>ASCP</th>
<th>Self Recorded</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>CME/CMLE</td>
<td>3.00</td>
<td>0.00</td>
<td>3.00</td>
</tr>
<tr>
<td>CMLE</td>
<td>3.00</td>
<td>0.00</td>
<td>3.00</td>
</tr>
</tbody>
</table>

ASCP designated CME credits are **AMA PRA Category 1 Credits**. Physicians should only claim credit commensurate with the extent of participation in the activity. To claim fewer than the maximum number of credits designated for an activity, change the value and click on **Go** on the right.

To see your certificate(s) completed in a specific time period, enter a date range (mm/dd/yyyy):

From:  
To:  
**Go**

To view and print your certificate, click on the **certificate link** that corresponds to your Activity Title:

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity Title</th>
<th>Certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/8/2010</td>
<td>Avoiding Phlebotomy Mistakes Due To Overconfidence. LabQ-P Phlebotomy 0803-CMLE</td>
<td>LOPB0803</td>
</tr>
<tr>
<td>12/7/2010</td>
<td>Autologous Transfusion Practices. Check Sample Trans. Med. 0808-CME/CMLE</td>
<td>CSTM0808</td>
</tr>
<tr>
<td>12/7/2010</td>
<td>Patient Safety Goals. LabQ Clinical Laboratory 0817-CMLE</td>
<td>LCQL0817</td>
</tr>
<tr>
<td>12/7/2010</td>
<td>Laboratory Diagnosis of Influenza. Check Sample Microbiology 0801-CME/CMLE</td>
<td>CSMB0801</td>
</tr>
<tr>
<td>12/7/2010</td>
<td>Sickle Cell Disease. Check Sample Hematology 0803-CME/CMLE</td>
<td>CSH0803</td>
</tr>
<tr>
<td>12/7/2010</td>
<td>Testing for Tuberculosis Exposure. LabQ Clinical Laboratory 0803-CMLE</td>
<td>LCQL0803</td>
</tr>
<tr>
<td>11/8/2010</td>
<td>QUALITY CONTROL XS-1000i</td>
<td>NON ASCP</td>
</tr>
<tr>
<td>11/4/2010</td>
<td>SAMPLE PROCESSING XS-1000i</td>
<td>NON ASCP</td>
</tr>
<tr>
<td>11/3/2010</td>
<td>GETTING STARTED AND MAINTENANCE XS-1000i</td>
<td>NON ASCP</td>
</tr>
<tr>
<td>10/7/2010</td>
<td>DIMENSION XPAND ONLINE EDUCATION MILLIPORE</td>
<td>NON ASCP</td>
</tr>
</tbody>
</table>

Total number of records: 29

[Back to My Account]  [Back to My Courses]

### Clinical Faculty

<table>
<thead>
<tr>
<th>NAME OF INSTRUCTOR</th>
<th>YES / NO</th>
<th>TYPE</th>
<th>NUMBER</th>
<th>YEARS OF PHLEBOTOMY EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Jane Doe</td>
<td>YES</td>
<td>MT ASCP</td>
<td>123456</td>
<td>5 years</td>
</tr>
<tr>
<td>Deborah Fields</td>
<td>Yes</td>
<td>MT SI ASCP</td>
<td>101996  233</td>
<td>36 years</td>
</tr>
<tr>
<td>Nathayoun Williams</td>
<td>No</td>
<td></td>
<td></td>
<td>11 years</td>
</tr>
<tr>
<td>(PBT graduate PCCUA 2000)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Linda McAlexander</td>
<td>Yes</td>
<td>MT ASCP</td>
<td>207557</td>
<td>34 years</td>
</tr>
<tr>
<td>Melissa Reece</td>
<td>Yes</td>
<td>MLT ASCP</td>
<td>66089</td>
<td>8 years</td>
</tr>
</tbody>
</table>
### Clinical Faculty

<table>
<thead>
<tr>
<th>NAME OF INSTRUCTOR</th>
<th>YES / NO</th>
<th>CERTIFICATION</th>
<th>NUMBER</th>
<th>YEARS OF PHLEBOTOMY EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Jane Doe</td>
<td>YES</td>
<td>MT ASCP</td>
<td>123456</td>
<td>5 years</td>
</tr>
<tr>
<td>Rhonda Williams</td>
<td>Yes</td>
<td>PBT ASCP</td>
<td>024127</td>
<td>17 years</td>
</tr>
<tr>
<td>Rodney Sabbatini</td>
<td>Yes</td>
<td>MT ASCP</td>
<td>133079</td>
<td>34 years</td>
</tr>
<tr>
<td>Mary Alice Sabbatini</td>
<td>Yes</td>
<td>CLA HEW ASCP</td>
<td>06660</td>
<td>41 years</td>
</tr>
<tr>
<td>Gail Bley</td>
<td>Yes</td>
<td>MT ASCP</td>
<td>104763</td>
<td>36 years</td>
</tr>
</tbody>
</table>

Institution: Northwest Mississippi Regional Medical Center
City, State, Zip Code: Clarksdale, MS 38614

191
Clinical Faculty

<table>
<thead>
<tr>
<th>NAME OF INSTRUCTOR</th>
<th>CERTIFICATION</th>
<th>YEARS OF PHLEBOTOMY EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Jane Doe</td>
<td>YES</td>
<td>5 years</td>
</tr>
<tr>
<td>Rhonda Reed</td>
<td>Yes</td>
<td>23 years</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF INSTRUCTOR</th>
<th>CERTIFICATION</th>
<th>YEARS OF PHLEBOTOMY EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Clinical Facility

Phlebotomy Fact Sheet
Page 2

Institution: Baptist Health Medical Center-Stuttgart

City, State, Zip Code: Stuttgart, AR 72160

Clinical Faculty

<table>
<thead>
<tr>
<th>NAME OF INSTRUCTOR</th>
<th>CERTIFICATION</th>
<th>YEARS OF PHLEBOTOMY EXPERIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane Doe</td>
<td>YES</td>
<td>5 years</td>
</tr>
<tr>
<td>Judy Tipton</td>
<td>Yes</td>
<td>33 years</td>
</tr>
</tbody>
</table>

Example: Jane Doe

<table>
<thead>
<tr>
<th>YES / NO</th>
<th>TYPE</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>MT ASCP</td>
<td>123456</td>
</tr>
<tr>
<td>Yes</td>
<td>MLT ASCP</td>
<td>17175</td>
</tr>
</tbody>
</table>
Standard 22. Curricular Requirements

22A. Curricular Structure

Instruction must follow a plan which documents a structured curriculum, including applied education, with clearly written program goals and competencies and course syllabi which include individual course goals and objectives. Behavioral objectives which address cognitive, psychomotor, and affective domains must be provided for didactic and applied aspects of the program. Course objectives must show progression to the level consistent with entry into the profession and be cross-referenced to the NAACLS Phlebotomist Competencies in the NAACLS 22A matrix. These competencies must be used to design didactic and applied curriculum.

Response to Standard 22A:

Phillips Community College of the University of Arkansas
Curricular Pattern
For Technical Certificate

Freshman Year

Fall Semester-16 hours
BY 103  Introduction to Anatomy & Physiology
OT 113  Medical Terminology I
EH 113  Freshman English I
MS 1023 Elementary Algebra or higher
CT 114  Computer Information Systems

Spring Semester-12 hours
PLB 113  Phlebotomy Procedures
PLB 123  Special Techniques
PLB 116  Phlebotomy Skills

Curriculum Outline

Lecture Content
Unit 1  Phlebotomy: Past and Present and the Healthcare Setting
Unit 2  Quality Assurance and Legal Issues
Unit 3  Infection Control, Safety, First Aid, and Personal Wellness
Unit 4  Human Anatomy and Physiology Review
Unit 5  The Circulatory System
Unit 6  Blood Collection Equipment, Additives, and Order of Draw
Unit 7  Venipuncture Procedures
Unit 8  Preanalytical Considerations
Unit 9  Capillary Puncture Equipment and Procedures
Unit 10 Special Collections and Point-of-Care Testing
Unit 11  Arterial Puncture Procedures
Unit 12  Nonblood Specimens and Tests
Unit 13  Computers and Specimen Handling and Processing

194
Lecture Schedule
PLB 113 and PLB 123 meet first 10 weeks of each semester.

<table>
<thead>
<tr>
<th>PLB 113</th>
<th>PLB 123</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit 4</td>
<td>Unit 1</td>
</tr>
<tr>
<td>Unit 5</td>
<td>Unit 2</td>
</tr>
<tr>
<td>Unit 6</td>
<td>Unit 3</td>
</tr>
<tr>
<td>Unit 7</td>
<td>Unit 10</td>
</tr>
<tr>
<td>Unit 8</td>
<td>Unit 11</td>
</tr>
<tr>
<td>Unit 9</td>
<td>Unit 12</td>
</tr>
<tr>
<td></td>
<td>Unit 13</td>
</tr>
</tbody>
</table>

Clinical Schedule
PLB 116 meets for the final 6 weeks of the semester, Monday-Friday 7am-3pm.

Phlebotomy
Phillips Community College of the University of Arkansas
PROGRAM GOALS

- Prepare individuals to properly perform skin and venipunctures in professional manner.
- Improve quality of patient care by increasing precision and accuracy associated with laboratory results.
- Prepare individuals to handle and manipulate the collection supplies or equipment in a suitable manner.
- Improve patient relations by providing instruction in interpersonal communication techniques.
- Improve personnel relations, both intra- and inter-departmentally.
- Reduce the traditionally high turnover rate associated with this occupation.
- Update the occupation by making phlebotomists more marketable in the health care industry.
- Prepare individuals to attain phlebotomy certification.
Unit 1
1. Define the key terms and abbreviations associated with the past and present phlebotomy and the healthcare setting.
2. Describe the evolution of phlebotomy and the role of the phlebotomist in today’s healthcare setting.
3. Describe the traits that form the professional image and identify national organizations that support professional recognition of phlebotomists.
4. Describe the basic concepts of communication as they relate to healthcare and how appearance and nonverbal messages affect the communication process.
5. Describe proper telephone protocol in a laboratory or other healthcare setting.
6. Demonstrate an awareness of the different types of healthcare settings.
7. Compare types of third-party payers, coverage, and methods of payment to the patient, provider, and institutions.
8. Describe traditional hospital organization and identify the healthcare providers in the inpatient facility.
9. List the clinical analysis areas of the laboratory and the types of laboratory procedures performed in the different areas.
10. Describe the different levels of personnel found in the clinical laboratory and how Clinical Laboratory Improvement Amendment regulations affect their job descriptions.

Unit 2
1. Define the key terms and abbreviations associated with quality assurance and legal issues.
2. Identify national organizations, agencies, and regulations that support quality assurance in healthcare.
3. Define quality and performance improvement measurements as they relate to phlebotomy.
4. List and describe the components of a quality assurance (QA) program and identify areas in phlebotomy subject to quality control (QC).
5. List areas in phlebotomy subject to QC and identify QC procedures associated with each.
6. Demonstrate knowledge of the legal aspects associated with phlebotomy procedures by defining legal terminology and describing situations that may have legal ramifications.

Unit 3
1. Define the key terms and abbreviations associated with infection control, safety, first aid, and personal wellness.
2. Identify the components of the chain of infection and give examples of each, describe infection control procedures used to break the chain, and identify four functions of infection control programs.
3. Describe proper procedures for hand hygiene, putting on and removing protective clothing, and entering the nursery or neonatal ICU.
4. Describe standard and transmission-based precautions and identify the organizations that developed them.
5. State safety rules to follow when working in the laboratory and in patient areas.
6. List examples of bloodborne pathogens and describe their means of transmission in a healthcare setting.

196
Unit 4
1. Define the key terms and abbreviations associated with human anatomy and physiology.
2. Identify and describe body positions, planes, cavities, and directional terms.
3. Define homeostasis and the primary processes of metabolism.
4. Identify and describe the structural components of cells and the four basic types of body tissue.
5. Describe the function and identify the components or major structures of each body system.
6. List disorders and diagnostic tests commonly associated with each body system.

Unit 5
1. Define the key terms and abbreviations associated with the circulatory system.
2. Identify the layers and other structures of the heart and describe their function.
3. Describe the cardiac cycle and how an ECG tracing relates to it and explain the origins of heart sounds and pulse rates.
4. Describe how to take blood pressure readings and explain what they represent.
5. Identify the two main divisions of the vascular system, describe the function of each, and trace the flow of blood throughout the system.
6. Identify the different types of blood vessels and describe the structure and function of each.
7. Name and locate major arm and leg veins and describe the suitability of each for venipuncture.
8. List the major constituents of blood, describe the function of each of the formed elements, and differentiate between serum, plasma, and whole blood.
9. Describe how ABO and Rh blood types are determined, and the importance of compatibility testing prior to transfusion.
10. Define hemostasis and describe basic coagulation and fibrinolysis processes.
11. Identify the structures and vessels and describe the function of the lymphatic system.
12. List the disorders and diagnostic tests of the circulatory system.

Unit 6
1. Define the key terms and abbreviations associated with blood collection equipment, additives, and order of draw.
2. List, describe, and explain the purpose of the equipment and supplies needed to collect blood by venipuncture.
3. Compare and contrast antiseptics and disinfectants and give examples of each.
4. Identify appropriate phlebotomy needles by length, gauge, and any associated color-coding.
5. List and describe evacuated tube system (ETS) and syringe system components, explain how each system works, and tell how to determine which components and system to use.
6. Identify the general categories of additives used in blood collection, list the various additives with each category, and describe how each additive works.
7. Describe the color coding used to identify the presence or absence of additives in blood collection tubes, and name the additive, laboratory departments, and individual tests associated with the various color-coded tubes.
8. List the “order of draw” when collecting multiple tubes and explain why it is important.
Unit 7
1. Define the key terms and abbreviations associated with venipuncture procedures.
2. Describe the test request process, identify the types of requisitions used, and list the required requisition information.
3. List and define test status designations, identify status priorities, and describe the procedure to follow for each status designation.
4. Describe proper bedside manner and how to handle special situations associated with patient contact.
5. Explain the importance of proper patient identification and describe what information is verified, how to handle discrepancies, and what to do if a patient’s ID band is missing.
6. Describe how to prepare patients for testing, how to answer inquiries concerning tests, and what to do if a patient objects to the test.
7. Describe how to verify fasting and other diet requirements and what to do when diet requirements have not been met.
8. Describe each step in the venipuncture procedure, list necessary information found on specimen tube labels, and list the acceptable reasons for inability to collect a specimen.
9. Describe collection procedures when using a butterfly or syringe and the proper way to safely dispense blood into tubes following syringe collection.
10. Describe unique requirements associated with drawing from special populations including pediatric, geriatric, and long-term-care patients.

Unit 8
1. Define the key terms and abbreviations associated with preanalytical considerations.
2. List and describe the physiologic variables that influence laboratory test results and identify the tests most affected by each one.
3. List problem areas to avoid in site selection, identify causes for concern, and describe procedures to follow when encountering each.
4. Identify and describe various vascular access sites and devices and explain what to do when they are encountered.
5. Identify, describe, and explain how to handle patient complications associated with blood collection.
6. Identify, describe, and explain how to avoid or handle procedural error risks, specimen quality concerns, and reasons for failure to draw blood.

Unit 9
1. Define the key terms and abbreviations associated with capillary puncture equipment and procedures.
2. List and describe the various types of equipment needed for capillary specimen collection.
3. Describe the composition of capillary specimens, identify which tests have different reference values when collected by capillary puncture methods, and name tests that cannot be performed on capillary specimens.
4. Identify indications for performing capillary puncture on adults, children, and infants.
5. List the order of draw for collecting capillary specimens.
6. Describe proper procedure for selecting the puncture site and collecting capillary specimens form adults, infants, and children.
7. Describe how both routine and thick blood smears are made and reasons for making them at the collection site.
8. Explain the clinical significance of capillary blood gas, neonatal bilirubin, and newborn screening tests and describe how specimens for these tests are collected.

Unit 10
1. Define the key terms and abbreviations associated with special collections and point-of-care testing.
2. Explain the principle behind each special collection procedure, identify the steps involved, and list any special supplies or equipment required.
3. Describe patient identification and specimen labeling procedures required for blood bank tests, and identify the types of specimens typically required.
4. Describe sterile technique in blood culture collection, explain why it is important, and list the reasons why a physician might order blood cultures.
5. List examples of coagulation specimens and describe how to properly collect and handle them.
6. Describe chain of custody procedures and identify the tests that may require them.
7. Explain the importance of timing, identify the role of drug half-life providing names of drugs as examples; and describe peak, trough, and therapeutic levels in therapeutic drug monitoring.
8. Define point-of-care testing (POCT), explain the principle behind the POCT examples listed in this chapter, and identify any special equipment required.

Unit 11
1. Define the key terms and abbreviations associated with arterial puncture procedures.
2. State the primary reason for performing arterial punctures and identify the personnel who may be required to perform them.
3. Explain the purpose of collecting arterial blood gas specimens and identify and describe commonly measured ABG parameters.
4. Identify the sites that can be used for arterial puncture, the criteria used for selection of the site, and advantages and disadvantages of each site.
5. List equipment and supplies needed for arterial puncture.
6. Identify typical required and supplemental requisition information and describe patient assessment and preparation procedures, including the administering of local anesthetic, prior to performing arterial blood gases.
7. Explain the purpose of the modified Allen test, describe how it is performed, define what constitutes a positive or negative result, and give the procedure to follow for either result.
8. Describe the procedure for collecting radial arterial blood gases and the role of the phlebotomist in other site collections.
9. List hazards and complications of arterial puncture, identify sampling errors that may affect the integrity of an arterial sample, and describe the criteria for specimen rejection.
Unit 12
1. Define the key terms and abbreviations associated with nonblood specimens and tests.
2. Describe nonblood specimen labeling and handling.
3. Name and describe the various urine tests, specimen types, and collection and handling methods.
4. Identify and describe the types of nonblood specimens other than urine, and explain why these specimens are tested.
5. Describe collection and handling procedures for nonblood specimens other than urine.
6. Identify tests performed on various nonblood specimens other than urine.

Unit 13
1. Define the key terms and abbreviations associated with computers and specimen handling and processing.
2. Describe components and elements of a computer, identify general computer skills, and define associated computer terminology.
3. Trace the flow of specimens through the laboratory with an information management system.
4. Define how bar codes are used in healthcare and list information found on a bar code computer label.
5. Describe routine and special specimen handling procedures for laboratory specimens.
6. List time constraints and exceptions for delivery and processing of specimens.
7. Identify OSHA required protective equipment worn when processing specimens.
8. Describe the steps involved in processing the different types of specimens and list the criteria for specimen rejection.
PLB 113
PHLEBOTOMY PROCEDURES
SYLLABUS

TITLE: PLB 113 PHLEBOTOMY PROCEDURES

FACULTY: Claude Rector, MA, MLS(ASCP)CM
crector@pccua.edu 870-338-6474 ext1079 /cell 870-818-2432
Phlebotomy Program Director
Office TI 119
Office Hours MW 10:30am-11:30am, T 9am-10:30am

Julie Pittman, BS, MLS(ASCP)CM
jpittman@pccua.edu 870-338-6474 ext1109/cell 870-714-0358
Phlebotomy Instructor
Office TI 118
Office Hours TTH 8:30am-9:30am

CREDITS: 40 hours lecture, 15 hours lab, 3 credits

PRE-REQUISITES: Acceptance to the program

CO-REQUISITES: PLB 116 & PLB 123

COURSE DESCRIPTION:

This course is an introduction to the basic anatomy and physiology of body systems involved in phlebotomy. Introduction to phlebotomy sites, collection equipment and techniques involved in performance of venipuncture.

OVERVIEW:

This course is designed to provide information about the art of drawing blood from patients in a laboratory setting. This course will prepare students to properly perform venipunctures in a professional manner. The student will learn the anatomy and physiology involved in phlebotomy. The student will also learn about different equipment and techniques that are required in performing venipuncture.
1. Prepare individuals to properly perform skin and venipunctures in a professional manner.

2. Improve quality of patient care by increasing precision and accuracy associated with laboratory results.

3. Prepare individuals to handle and manipulate the collection supplies or equipment in a suitable manner.

4. Improve patient relations by providing instruction in interpersonal communication techniques.

5. Improve personnel relations, both intra- and inter-departmentally.

6. Reduce the traditionally high turnover rate associated with this occupation.

7. Upgrade the occupation by making phlebotomists more marketable in the health care industry.

8. Prepare individuals to attain phlebotomy certification.

---

1. The student will be able to obtain blood from an adult with direct supervision or with assistance of the campus instructor using both the adult and pediatric evacuated system. This objective will be met when the student, after having practiced on “dummy” arms to develop technique and use of the equipment, performs successful venipunctures using both systems.

2. The student will be able to obtain blood from an adult with direct supervision or with assistance of the campus instructor using the winged infusion set “butterfly”. This objective will be met when the student, after having practiced on “dummy” arms to develop technique and use of equipment, performs successful venipunctures using the winged infusion set.

3. The student will be able to perform a successful capillary puncture on an adult. This objective will be met when the student has performed a successful capillary puncture on an adult under the supervision of the campus instructor.

4. The student will be able to successfully prepare push-wedge blood smears according to procedure and guidelines in the manual. This objective will be met when the student has prepared 10 acceptable push-wedge blood slides.

5. The student will be able to operate the centrifuge safely and correctly. This objective will be met when the student has spun 2 separate batches of collection tubes safely and correctly.

6. The student will be able to transfer serum or plasma from a centrifuged sample tube to a secondary tube successfully and under the guidelines of Standard Precautions using transfer pipets. This objective will be met when the student has successfully and correctly transferred serum or plasma from 7 tubes.
REQUIRED TEXT:


LECTURE CONTENT:

Unit II  OVERVIEW OF THE HUMAN BODY
   Chapter 5  HUMAN ANATOMY AND PHYSIOLOGY REVIEW, Exam 1
   Chapter 6  THE CIRCULATORY SYSTEM, Exam 2

Unit III  BLOOD COLLECTION PROCEDURES
   Chapter 7  BLOOD COLLECTION EQUIPMENT, ADDITIVES, AND ORDER OF DRAW, Exam 3
   Chapter 8  VENIPUNCTURE PROCEDURES, Exam 4
   Chapter 9  PREANALYTICAL CONSIDERATIONS
   Chapter 10  CAPILLARY PUNCTURE EQUIPMENT AND PROCEDURES, Exam 5

RESOURCES

Phillips Community College of the University of Arkansas MLT/Phlebotomy Computer Labs

Phillips Community College of the University of Arkansas Learning Resources Media Center, Lewis Library

Phillips Community College of the University of Arkansas Learning Resources Media Center, DeWitt Library

Phillips Community College of the University of Arkansas Learning Resources Media Center, Stuttgart

PCCUA CORE COMPETENCIES

Six PCCUA core competencies are incorporated within the context of this course. The competencies address skills the College and the Phlebotomy Program have committed to developing in all students.

1) Communication
2) Cultural Awareness
3) Social and Civic Responsibility
4) Critical Thinking
5) Mathematical Reasoning
6) Technology Utilization

Assessment of student competency is evaluated through the use of unit exams in this course.
PHLEBOTOMY PROCEDURES
GRADING POLICIES

Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>90-100</td>
<td>A</td>
</tr>
<tr>
<td>80-89</td>
<td>B</td>
</tr>
<tr>
<td>70-79</td>
<td>C</td>
</tr>
<tr>
<td>60-69</td>
<td>D</td>
</tr>
<tr>
<td>BELOW 60</td>
<td>F</td>
</tr>
</tbody>
</table>

Progression

The lowest passing grade in the Phlebotomy Program is "C" (70). In order to progress, the student must earn a minimum grade of "C" (70). A numerical grade of 69 is failing.

Grades are determined in the following manner. Raw score points will be accumulated from written exams in the campus courses. A final percent score will be determined by dividing this total by the total number of points possible. This will count as 70% of your final grade. Raw score points will be accumulated from homework, tutorials, & lab exercises. A final score will be determined by dividing this total by the total number of points possible. This will count as 30% of your final grade.

Late Testing Policy

Responsible behavior requires the student to notify the instructor in advance of any exam not taken at the scheduled time. When a unit exam is missed, it is the student’s responsibility on the day the student returns to class to be prepared to take the missed the exam. Make-up exam times will be scheduled by the faculty.

Five (5) points will be deducted from the score of any daily, unit or final exam taken late. A zero (0) will be awarded when the student fails to make-up a missed exam within 5 working days after returning to class.

Final exams are given late only in special circumstances such as hospitalization. When a final exam is not taken as scheduled, the student must notify the instructor before the exam is given and arrange with the instructor to take the exam before grades are due at the end of the semester. If the student fails to contact the instructor to reschedule a time to take the final exam or fails to take the rescheduled final exam before grades are due at the end of the semester, a grade of zero (0) will be recorded. In the event circumstances prevent a student from taking the final exam before grades are due at the end of the semester, and "I" grade will be awarded according to college policy.
PLB 113

Test Review

All graded material submitted on paper format will be kept on file in the instructor’s office. Student will have access to their graded material upon appointment for a period of five (5) working days. Electronic tests will be maintained on Blackboard for one additional semester before being deleted. Electronic tests must be reviewed within five (5) working days from the time the test is available for review. After this time, the test cannot be reviewed.

The student does not have the option to retake a daily, unit, or final test for a better grade.

Attendance Policy

Students are expected to come to class on time with assignments completed. Absences in excess of three (3) constitute excessive absence and may result in the student being dropped from the roll.

Three tardies constitute one absence.

Please refer to the Phlebotomy Student Handbook for the complete attendance policy and definitions of “absence” and “tardy”.

Disclaimer

In accordance with college policy as stated in the College Catalog, this publication is not construed as a contract between the student and the Phlebotomy Program. All programs within the Division of Allied Health reserve the right to make changes at any time in individual courses, the curriculum leading to a degree or certificate, as well as policies contained in the Phlebotomy Information Packet, College Catalog, student handbooks, and web. Students are required to be familiar with and observe all rules and regulations of the college.

Cell Phones

To provide an optimal learning environment, all cell phones should be turned off or muted during class, clinical, and testing. Furthermore, students should not send or receive text messages or use cell phones to take pictures during class, clinical, and testing.

Changes in Student Demographics

Student academic files must contain current data. If information such as names, addresses, and phone number changes, it is the student’s responsibility to immediately submit the new information to the secretary in the Division of Allied Health.

College Drug and Alcohol Policy

All students are expected to abide by the college drug and alcohol policy as well as the Division of Allied Health’s Substance Abuse Testing Policy. Refer to the College and Phlebotomy Student Handbooks to review these policies.
Computer Lab

The computer labs on the Helena and DeWitt campuses will be open from 8 am until 4:15 pm for use by phlebotomy students. Use of these labs requires a computer pass that will be distributed at the beginning of each semester and must be displayed at the computer station.

Related Campus Services

Refer to the Phlebotomy Student Handbook or College Catalog for a list of student services.

Academic Dishonesty in Allied Health Programs

Cheating is the intentional use of or attempt to use unauthorized information or study materials. This includes, but is not limited to,

- Copying from another student's paper
- Using any unauthorized assistance in taking a quiz, exam or final exam, possession during a test of any unauthorized materials which include, but are not limited to, crib notes or technology that would aid in cheating
- Dependence on sources beyond those authorized by the faculty for writing papers, preparing presentation, reports, solving problems, or fulfilling assignments,
- Acquiring without permission tests or other academic material belonging to any PCCUA employee
- Aiding and or abetting another individual in committing any form of academic dishonesty

Students in the Division of Allied Health are expected to do their own work. Therefore, any cheating inside or outside of the classroom is not tolerated. Students who cheat will receive a grade of zero on the assignment or exam and may also receive an "F" in the course and/or be dismissed from the program in which the student is enrolled.

ADA Policy

Lynn Boone, the Vice Chancellor for Student Services serves as the ADA Compliance Officer. If you reside in Arkansas County you may contact the professional advisor on each campus. The process of student referral under the Americans with Disabilities Act can be found on the college web site at http://www.pccua.edu by clicking the Student Menu link.

FERPA Policy

Phillips Community College of the University of Arkansas complies with the Family Educational Rights and Privacy Act (FERPA) of 1974. A student has the right to inspect and review all of his/her records that meet the definition of educational records. No third party has the right to review student records. Directory information can be provided unless the student requests that it be withheld.

ACTS

The Arkansas Course Transfer System contains information about the transferability of courses within Arkansas public colleges and universities. Students are guaranteed the transfer of applicable credits and the equitable treatment in the application of credits for the admissions and degree requirements. Course transferability is not guaranteed for courses listed in the ACTS as "No Comparable Course." Additionally, courses with a "D" frequently do not transfer and institutional policies may vary. ACTS may be accessed on the Internet by going to the ADHE website and selecting Course Transfer. (http://acts.adhe.edu)
STUDENT HEALTH INSURANCE

Phillips Community College of the University of Arkansas does not provide insurance for its students. The college does encourage each student to secure her/hers own insurance, and for that reason, the college has contacted United Healthcare Student Resources. Forms for this insurance are available in the Registrar’s office.

LATEX SENSITIVITY POLICY

1. The student is responsible for informing faculty of a known allergy to latex, or when symptoms of a latex sensitivity are suspected. Symptoms include, but are not limited, to, runny nose, itching eyes, asthma, eczema, contact dermatitis, and rarely shock.
2. In the event of a known latex allergy, continued enrollment in any allied health program is dependent upon recommendations of an appropriate healthcare provider, and the student’s ability to meet curricular requirements.
3. If there is a known allergy to latex, the student must avoid contact with latex gloves and other products containing latex, avoid inhaling the powder from latex gloves worn by other students or individuals in the clinical setting or laboratory, and carefully follow the student’s healthcare provider’s instructions for dealing with allergic reactions.
4. In campus lab experiences, faculty will make appropriate accommodations for a student with a known latex allergy.
5. Students should use non-latex gloves when available, avoid oil-based hand cream or lotion under gloves, and wash hands with a mild soap and dry thoroughly after removing latex gloves to decrease the possibility of developing a latex sensitivity.
6. When a student suspects he/she is experiencing symptoms of latex sensitivity, the symptoms must be reported immediately to faculty. Further direct contact with all latex containing products must be avoided. The student must consult with an experienced healthcare provider in treating latex allergy. Documentation of prescribed steps to taken to treat the allergic reaction and measures to prevent recurrence must be submitted to the respective program director/ coordinator. Steps 2 and 3 will also apply in this situation.

Shingles

Even though the varicella zoster virus typically is not spread to individuals with healthy immune systems or individuals who have had chicken pox, shingles can be detrimental to the health of individuals with immune system deficiencies. Accordingly, students with an outbreak of shingles are obligated to report this condition to faculty before reporting to the clinical setting. Students will not be allowed to attend clinical until all shingle blisters are scabbed over. Students with open shingle blisters must avoid physical contact with the following individuals:

- Anyone who has never had chickenpox
- Anyone with a weak immune system
- All newborns
- All pregnant women

The absentee policy as published in each respective course syllabus will apply.

Physical Health and Individual Responsibility

A student with an acute illness that can be transmitted to other individuals in the healthcare setting will not participate in class or clinical. Examples of an acute illness include, but are not limited to, increased temperature, influenza, gastroenteritis, open wounds, draining wounds, and shingles. The absentee policy as published in each respective course syllabus will apply.
PLB 113
PHLEBOTOMY PROCEDURES
STUDENT EXPECTATIONS

Student must:

- be excited and have a commitment to lifelong learning
- exhibit a spirit of inquiry
- be committed to innovation, continuous quality/performance improvement and excellence
- be committed to a career in phlebotomy (first 4 bullets adapted from NLN Scope and Practice for Academic Nurse Educators, 2005)
- be self-motivated and self-directed
- assume responsibility for learning. At least two (2) hours outside preparation is recommended for each one (1) credit hour. Evidence of preparation is required
- be a responsible group member by participated in peer evaluation, sharing information, participation in learning activities, decision-making with others, and learning to give information in a clear, concise form

PLB 113
PHLEBOTOMY PROCEDURES
FACULTY EXPECTATIONS

Faculty will:

- create an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes
- be responsible for assisting students to develop the phlebotomist role and integrate the values and behaviors of the profession
- use a variety of assessment and evaluation strategies to determine student learning in classroom, laboratory, and clinical settings
- be responsible for formulated program and educational outcomes and designing a curriculum that reflects contemporary healthcare trends as well as prepare graduates to function effectively in the healthcare environment
- function as change agents and leaders to create a preferred future for phlebotomy education and practice
- engage in scholarship as an integral part of teaching
- use political, institutional, social, and economic forces to attain learning resources and activities (adapted from NLN Scope and Practice for Academic Nurse Educators, 2005)
Chapter 6

THE CIRCULATORY SYSTEM

OBJECTIVES

• Define the key terms and abbreviations listed at the beginning of the chapter
• Identify the layers and other structures of the heart and describe their function
• Describe the cardiac cycle and how an ECG tracing relates to it; explain the origins of heart sounds and pulse rates
• Describe how to take blood pressure readings and what they represent
• Identify the two main divisions of the vascular system, describe the function of each, and trace the flow of blood throughout the system
• Identify the different types of blood vessels and describe the structure and function of each
OBJECTIVES (cont’d)

- Name and locate major arm and leg veins and describe the suitability of each for venipuncture
- List the major constituents of blood, describe the function of each of the formed elements, and differentiate between serum, plasma, and whole blood
- Describe how ABO and Rh blood types are determined and the importance of compatibility testing before transfusion
- Define hemostasis and describe basic coagulation and fibrinolysis

OBJECTIVES (cont’d)

- Identify the structures and vessels and describe the function of the lymphatic system
- List the disorders and diagnostic tests of the circulatory system
The Heart

- A major structure of the circulatory system, it circulates blood throughout the body
Heart Structure

- Layers of the heart
  - Epicardium
    - Thin outer layer
  - Myocardium
    - Middle muscle layer
  - Endocardium
    - Inner layer lining the circulatory system
- Heart chambers
  - Atria—upper chambers
  - Ventricles—lower chambers

Heart Chambers

- Right atrium
  - Receives deoxygenated blood from the body via both the superior & inferior vena cava
- Right ventricle
  - Receives blood from the right atrium and pumps to the lungs
- Left atrium
  - Receives oxygenated blood from the lungs
- Left ventricle
  - Receives blood from the left atrium and pumps to the aorta
Heart Structure (cont’d)

- Valves
  - Atrioventricular valves entrance to the ventricles
    - Tricuspid
    - Bicuspit or mitral
  - Semilunar valves exit the ventricles
    - Pulmonary semilunar valve
    - Aortic semilunar valve
- Coronary arteries
  - Branch off the aorta to feed the heart
  - Right and left coronary arteries

Heart Function

- Cardiac cycle –
  - Contracting phase called systole (120 mm Hg)
  - Relaxing phase called diastole (80 mm Hg)
- Electrical conduction system
  - SA node or pacemaker—initiating impulse
  - AV node—picks up impulse
  - AV bundle—relays impulse
  - Purkinje fibers—relay impulses throughout the ventricular muscle
Electrocardiogram

- ECG or EKG
  - Actual record of the electrical currents corresponding to each event in heart muscle contraction
  - Recording called ECG tracing
  - Useful in diagnosing heart muscle damage
Heart Function

- Origin of the heart beat
  - "lubb"—AV valves closing
  - "dupp"—semilunar valves closing
  - Murmurs—faulty valve action
- Heart rate and cardiac output
  - Number of heartbeats/minute
  - Normal = 72/minute
  - Volume/1 minute = 5 liters cardiac output
Heart Function (cont’d)

- Pulse
  - Easily felt by compressing radial artery
  - Rate same as heart rate normally
- Blood pressure
  - Measure of force exerted by blood on walls of vessels
  - Measured in a large artery by use of a sphygmomanometer

Heart Disorders

- Angina pectoris
- Aortic stenosis
- Bacterial endocarditis
- Congestive heart failure
- Myocardial infarction (MI)
- Pericarditis
Heart Diagnostic Tests

- ABGs
- Enzymes
  - AST, CK, CK-MB isoenzymes, LD isoenzymes
- Digoxin
- ECG
- Microbial cultures
- Myoglobin
- Potassium
- Triglycerides
- Troponin T

The Vascular System

- A closed system by which blood is circulated to all parts of the body
The Vascular System (cont'd)

- Two divisions of circulation
  - Pulmonary
    - Carries blood from the heart to the lungs
    - Reoxygenates the blood
  - Systemic
    - Carries oxygenated blood along with nutrients to all cells of the body
    - Removes waste products from all cells
- Structures
  - Heart
  - Blood vessels

Blood Vessels

- Arteries
  - Carry blood away from heart
  - Under pressure from ventricular contractions
  - Pulse distinguishes arteries from veins
Blood Vessels (cont'd)

- Veins
  - Return blood to heart
  - Carry deoxygenated blood (bluish red)
  - Walls are thinner and can collapse
Blood Vessels (cont’d)

- Capillaries
  - Microscopic, one-cell thick
  - Connect veins & arteries
  - Blood is mixture of venous and arterial blood
  - Thin wall allows the exchange of oxygen and nutrients for carbon dioxide and waste

Capillaries

- Oxygen and carbon dioxide exchange at the capillaries
Structures of the Vascular System

- Blood vessels
  - Arteries
  - Veins
  - Capillaries
- Blood vessel structure
  - Layers
- Lumen
  - Valves

The Flow of Blood

*Representation of the vascular flow*
Blood Vessel Structure

Antecubital Veins
Vascular Anatomy of the Arm

- Major veins in the antecubital fossa
  - Medial cubital vein
    - First choice, well anchored
  - Cephalic vein
    - Second choice, fairly well anchored
  - Basilic vein
    - Third choice, more painful, above brachial and next to median cubital nerve

Anatomy of the Leg
Arteries Subject to Puncture
  • Arterial puncture
    – More painful & hazardous
    – Requires special training to perform
  • Radial
    – Wrist area
  • Brachial
    – Antecubital fossa
    – Cutaneous nerve lies along same path
  • Femoral
    – Groin area

Vascular System Disorders
  • Aneurysm
  • Arteriosclerosis
  • Atherosclerosis
  • Embolism
  • Hemorrhoids
  • Phlebitis
  • Thrombophlebitis
  • Varicose veins
Diagnostic Tests

- Disseminated intravascular coagulation screen
- Lipoprotein
- Prothrombin time
- Partial thromboplastin time
- Triglycerides

The Blood

- Referred to as "the river of life," it flows throughout the circulatory system delivering nutrients and oxygen and transports waste products from cells
Blood Composition

• Plasma
  - 90% water & 10% dissolved substances
  - Albumin, antibodies, fibrinogen
  - Nutrients include carbohydrates and fats
  - Minerals include sodium, potassium, calcium
  - Gases include oxygen, carbon dioxide
  - Other substances such as vitamins, hormones, urea

Blood Composition (cont’d)

• Erythrocytes
  - Life span = 120 days
  - Anuclear, biconcave disks
  - Intravascular function
Blood Composition (cont’d)

- Leukocytes
  - Formed in bone marrow and lymphatic tissue
  - Extravascular function
  - Only hours in bloodstream, much longer in tissues

Blood Composition (cont’d)

- Granulocytes
  - Neutrophils
  - Eosinophils
  - Basophils

Granulocytes

A Neutrophil

B Eosinophil

C Basophil

Copyright © 2008 Wolters Kluwer Health | Lippincott Williams & Wilkins
Blood Composition (cont’d)

- Agranulocytes
  - Monocytes
  - Lymphocytes

Agranulocytes

--- Platelet

--- Erythrocyte

--- Nucleus

--- Nucleus

A  Lymphocyte   B  Monocyte

Blood Composition (cont’d)

- Thrombocytes
  - Also called platelets
  - Essential to coagulation
  - Life span = 10 days

--- Erythrocytes

--- Platelets

Platelets
Blood Type

- Inherited and determined by antigen on RBC
- Antibody formed by reaction to the opposite blood-type antigen
- Transfusion reaction due to transfusion error
  - Agglutination
  - Lysis

ABO Blood Group System

Table 6.1

<table>
<thead>
<tr>
<th>Blood Type</th>
<th>RBC Antigen</th>
<th>Plasma Antibodies (Agglutinins)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>A</td>
<td>Anti-B</td>
</tr>
<tr>
<td>B</td>
<td>B</td>
<td>Anti-A</td>
</tr>
<tr>
<td>AB</td>
<td>A and B</td>
<td>Neither anti-A nor anti-B</td>
</tr>
<tr>
<td>O</td>
<td>Neither</td>
<td>Anti-A and anti-B</td>
</tr>
</tbody>
</table>

229
Rh Blood Group System

- Based on
  - presence (Rh+) of D antigen
  - absence (Rh-) of D antigen
- Sensitized mother—leakage of the fetal Rh+ cells into Rh- mother’s circulation during childbirth
- HDN—RBC destruction of subsequent Rh+ fetus
- Rh immune globulin—given to desensitized mother during pregnancy or immediately after birth

Compatibility Testing/Crossmatch

- Test involves
  - Patient’s serum & cells
  - Donor’s serum & cells
  - Looking for compatible unit
- Adverse reaction
  - Even if ABO compatible
  - Even if Rh compatible
  - Other factors, i.e., rare antigens
Types of Blood Specimens

- Serum
  - Fluid after blood clots
- Plasma
  - Fluid from whole blood specimen
- Whole blood
  - Blood in the same form as found in body

Blood Disorders

- Anemia
- Leukemia
- Leukocytosis
- Leukopenia
- Polycythemia
- Thrombocytosis
- Thrombocytopenia
Hemostasis

- Primary hemostasis
- Secondary hemostasis
- The role of the liver in hemostasis
- Hemostatic disorders
- Diagnostic tests

Hemostasis (cont’d)
The Lymphatic System

- Functions
  - Returns tissue fluid to bloodstream
  - Protects body
  - Processes lymphocytes
  - Delivers fats to bloodstream

- Structures
  - Lymph fluid
  - Lymphatic vessels, ducts, & nodes

The Lymphatic System (cont’d)

- Lymph flow
  - Capillaries
  - Vessels & nodes
  - Right lymphatic duct
  - Thoracic duct
  - Large veins
The Lymphatic System (cont’d)

- Lymphatic system disorders
  - Hodgkin’s disease
  - Lymphosarcoma
  - Lymphoma

- Diagnostic tests
  - Mononucleosis test
  - Bone marrow biopsy
PLB 123
SPECIAL TECHNIQUES
SYLLABUS

TITLE: PLB 123 Special Techniques

FACULTY: Claude Rector, MA, MLS(ASCP)SM
cretor@pccua.edu 870-338-6474 ext 1079/cell 870-818-2432
Phlebotomy Program Director
Office T&I 119
Office Hours Monday & Wednesday 10:30-11:30am

Julie Pittman, BS, MLS(ASCP)SM
jpittman@pccua.edu 870-338-6474 ext 1109/cell 870-714-0358
Phlebotomy Instructor
Office T&I 118
Office Hours Tuesday & Thursday 8:30-10:30am

CREDITS: 48 hours lecture, 3 credits

PRE-REQUISITES: Acceptance into the program

CO-REQUISITES: PLB 116 & PLB 113

COURSE DESCRIPTION:

This course is an introduction to the health care setting, medical terminology, collection equipment and techniques involved in skin punctures, special collection procedures, quality control & assurance procedures, interpersonal skills and health care safety & liability requirements.

COURSE OUTLINE:

Chapter 1: Past and Present and the Healthcare Setting
Week 1: Lecture
Week 2: Finish lecture/chapter worksheets due/chapter test

Chapter 2: Quality Assurance and Legal Issues
Week 3: Lecture
Week 4: Finish lecture/chapter worksheets due/chapter test

Chapter 3: Infection Control, Safety, First Aid, and Personal Wellness
Week 5: Lecture
Week 6: Finish lecture/chapter worksheets due/chapter test

Chapter 11: Special Collections and Point-of-Care Testing
Week 7: Lecture/chapter worksheets due/chapter test

Chapter 12: Arterial Puncture Procedures
Chapter 13: Nonblood Specimens and Tests
Chapter 14: Computers and Specimen Handling and Processing
Week 8: Lecture
Week 9: Chapter worksheets due/chapter test
PLB 123
SPECIAL TECHNIQUES

EDUCATIONAL LEARNING OUTCOMES

1. Prepare individuals to properly perform skin and venipunctures in a professional manner.
2. Improve quality of patient care by increasing precision and accuracy associated with laboratory results.
3. Prepare individuals to handle and manipulate the collection supplies or equipment in a suitable manner.
4. Improve patient relations by providing instruction in interpersonal communication techniques.
5. Reduce the traditionally high turnover rate associated with this occupation.
6. Improve personnel relations, both intra- and inter-departmentally.
7. Upgrade the occupation by making phlebotomists more marketable in the health care industry.
8. Prepare individuals to attain phlebotomy certification.

REQUIRED TEXTS:


RESOURCES

Phillips Community College of the University of Arkansas Nursing Computer Labs

Phillips Community College of the University of Arkansas Learning Resources Media Center, Lewis Library

Phillips Community College of the University of Arkansas Learning Resources Media Center, DeWitt Library

Phillips Community College of the University of Arkansas Learning Resources Media Center, Stuttgart

PCCUA CORE COMPETENCIES

Six PCCUA core competencies are incorporated within the context of this course. The competencies address skills the College and the Phlebotomy Program have committed to developing in all students.

1) Communication
2) Cultural Awareness
3) Social and Civic Responsibility
4) Critical Thinking
5) Mathematical Reasoning
6) Technology Utilization

Assessment of student competency is evaluated through the use of unit exams in this course.

236
PLB 123
SPECIAL TECHNIQUES

Sequence in Program:

GRADING POLICIES

Grading Scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100</td>
</tr>
<tr>
<td>B</td>
<td>80-89</td>
</tr>
<tr>
<td>C</td>
<td>70-79</td>
</tr>
<tr>
<td>D</td>
<td>60-69</td>
</tr>
<tr>
<td>F</td>
<td>BELOW 60</td>
</tr>
</tbody>
</table>

Progression

A minimum final grade of "C" is required in each PLB course. In order to progress, the student must earn a minimum grade of "C" (70). A numerical grade of 69 is failing.

Grades are determined in the following manner. Raw score points will be accumulated from written exams in the campus courses. A final percent score will be determined by dividing this total by the total number of points possible. The point value of individual exams will vary. These test scores will count as 70% of your final grade. Raw score points will be accumulated from homework & weekly lab grades. This will count as 30% of your final grade. A final score will be determined by dividing this total by the total number of points possible.

Late Testing Policy

Responsible behavior requires the student to notify the instructor in advance of any exam not taken at the scheduled time. When a unit exam is missed, it is the student’s responsibility on the day the student returns to class to be prepared to take the missed the exam. Make-up exam times will be scheduled by the faculty.

Five (5) points will be deducted from the score of any daily, unit or final exam taken late. A zero (0) will be awarded when the student fails to make-up a missed exam within 5 working days after returning to class.

Final exams are given late only in special circumstances such as hospitalization. When a final exam is not taken as scheduled, the student must notify the instructor before the exam is given and arrange with the instructor to take the exam before grades are due at the end of the semester. If the student fails to contact the instructor to reschedule a time to take the final exam or fails to take the rescheduled final exam before grades are due at the end of the semester, a grade of zero (0) will be recorded. In the event circumstances prevent a student from taking the final exam before grades are due at the end of the semester, and "I" grade will be awarded according to college policy.
PLB 123
SPECIAL TECHNIQUES

Test Review

All graded material submitted on paper format will be kept on file in the instructor’s office. Student will have access to their graded material upon appointment for a period of five (5) working days. Electronic tests will be maintained on Blackboard for one additional semester before being deleted. Electronic tests must be reviewed within five (5) working days from the time the test is available for review. After this time, the test cannot be reviewed.

The student does not have the option to retake a daily, unit, or final test for a better grade.

Attendance Policy

Students are expected to come to class on time with assignments completed. Absences in excess of three (3) constituted excessive absence and may result in the student being dropped from the roll.

Three tardies constitute one absence.

Please refer to the PLB Student Handbook for the complete attendance policy and definitions of "absence" and "tardy".

Disclaimer

In accordance with college policy as stated in the College Catalog, this publication is not construed as a contract between the student and the PLB Program. All programs within the Division of Allied Health reserve the right to make changes at any time in individual courses, the curriculum leading to a degree or certificate, as well as policies contained in the MLT & Phlebotomy Information Packet, College Catalog, student handbooks, and web. Students are required to be familiar with and observe all rules and regulations of the college.

Cell Phones

To provide an optimal learning environment, all cell phones should be turned off or muted during class, clinical, and testing. Furthermore, students should not send or receive text messages or use cell phones to take pictures during class, clinical, and testing.

Changes in Student Demographics

Student academic files must contain current data. If information such as names, addresses, and phone number changes, it is the student’s responsibility to immediately submit the new information to the MLT/PLB Program Director.

College Drug and Alcohol Policy

All students are expected to abide by the college drug and alcohol policy as well as the Division of Allied Health’s Substance Abuse Testing Policy. Refer to the College and PLB Student Handbooks to review these policies.
Computer Lab

The computer labs on the Helena and DeWitt campuses will be open from 8 am until 4:15 pm for use by phlebotomy students. Use of these labs requires a computer pass that will be distributed at the beginning of each semester and must be displayed at the computer station.

Related Campus Services

Refer to the PLB Student Handbook or College Catalog for a list of student services.

Academic Honesty Policy

Refer to the PLB Student Handbook or College Catalog for policy.

ADA Policy

Lynn Boone, the Vice Chancellor for Student Services serves as the ADA Compliance Officer. If you reside in Arkansas County you may contact the professional advisor on each campus. The process of student referral under the Americans with Disabilities Act can be found on the college web site at http://www.pccua.edu by clicking the Student Menu link.

FERPA Policy

Phillips Community College of the University of Arkansas complies with the Family Educational Rights and Privacy Act (FERPA) of 1974. A student has the right to inspect and review all of his/her records that meet the definition of educational records. No third party has the right to review student records. Directory information can be provided unless the student requests that it be withheld.

ACTS

The Arkansas Course Transfer System contains information about the transferability of courses within Arkansas public colleges and universities. Students are guaranteed the transfer of applicable credits and the equitable treatment in the application of credits for the admissions and degree requirements. Course transferability is not guaranteed for courses listed in the ACTS as "No Comparable Course." Additionally, courses with a "D" frequently do not transfer and institutional polices may vary. ACTS may be accessed on the Internet by going to the ADHE website and selecting Course Transfer. (http://acts.adhe.edu)

STUDENT HEALTH INSURANCE

Phillips Community College of the University of Arkansas does not provide insurance for its students. The college does encourage each student to secure her/her own insurance, and for that reason, the college has contacted United Healthcare Student Resources. Forms for this insurance are available in the Registrar's office.
PLB 123
SPECIAL TECHNIQUES

Academic Dishonesty in Allied Health Programs

Cheating is the intentional use of or attempt to use unauthorized information or study materials. This includes, but is not limited to,
- Copying from another student’s paper
- Using any unauthorized assistance in taking a quiz, exam or final exam, possession during a test of any unauthorized materials which include, but are not limited to, crib notes or technology that would aid in cheating
- Dependence on sources beyond those authorized by the faculty for writing papers, preparing presentation, reports, solving problems, or fulfilling assignments,
- Acquiring without permission tests or other academic material belonging to any PCCUA employee
- Aiding and or abetting another individual in committing any form of academic dishonesty

Students in the Division of Allied Health are expected to do their own work. Therefore, any cheating inside or outside of the classroom is not tolerated. Students who cheat will receive a grade of zero on the assignment or exam and may also receive an “F” in the course and/or be dismissed from the program in which the student is enrolled.

Latex Sensitivity Policy

1. The student is responsible for informing faculty of a known allergy to latex, or if symptoms of a latex sensitivity are suspected. These symptoms include, but are not limited, to, runny nose, itching eyes, asthma, eczema, contact dermatitis, and rarely shock.

2. In the event of a known latex allergy, continued enrollment in any allied health program is dependent upon recommendations of an appropriate healthcare provider, and the student's ability to meet curricular requirements.

3. If there is a known allergy to latex, the student must avoid contact with latex gloves and other products containing latex, avoid inhaling the powder from latex gloves worn by other students or individuals in the clinical setting or laboratory, and carefully follow the student's healthcare provider's instructions for dealing with allergic reactions.

4. In campus lab experiences, faculty will make appropriate accommodations for a student with an known latex allergy.

5. Students should use non-latex gloves when available, avoid oil-based hand cream or lotion under gloves, and wash hands with a mild soap and dry thoroughly after removing latex gloves to decrease development of a latex sensitivity.

6. If a student suspects he/she is experiencing symptoms of latex sensitivity, the symptoms must be reported immediately to faculty. In addition, direct contact with all latex containing products will be avoided, and an experienced healthcare provider in treating latex allergy should be consulted.
Shingles

Even though the varicella zoster virus typically is not spread to individuals with healthy immune systems or individuals who have had chicken pox, shingles can be detrimental to the health of individuals with immune system deficiencies. Accordingly, students with an outbreak of shingles are obligated to report this condition to faculty before reporting to the clinical setting. Students will not be allowed to attend clinical until all shingle blisters are scabbled over. Students with open shingle blisters must avoid physical contact with the following individuals:

- Anyone who has never had chickenpox
- Anyone with a weak immune system
- All newborns
- All pregnant women

The absentee policy as published in each respective course syllabus will apply.

Physical Health and Individual Responsibility

A student with an acute illness that can be transmitted to other individuals in the healthcare setting will not participate in class or clinical. Examples of an acute illness include, but are not limited to, increased temperature, influenza, gastroenteritis, open wounds, draining wounds, and shingles. The absentee policy as published in each respective course syllabus will apply.
PLB 123  
SPECIAL TECHNIQUES  

STUDENT EXPECTATIONS  

Student must:  

- be excited and have a commitment to lifelong learning  
- exhibit a spirit of inquiry  
- be committed to innovation, continuous quality/performance improvement and excellence  
- be committed to a career in phlebotomy  
- be self-motivated and self-directed  
- assume responsibility for learning. At least two (2) hours outside preparation is recommended for each one (1) credit hour. Evidence of preparation is required  
- be a responsible group member by participated in peer evaluation, sharing information, participation in learning activities, decision-making with others, and learning to give information in a clear, concise form  

FACULTY EXPECTATIONS  

Faculty will:  

- create an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes  
- be responsible for assisting students to develop the phlebotomist role and integrate the values and behaviors of the profession  
- use a variety of assessment and evaluation strategies to determine student learning in classroom, laboratory, and clinical settings  
- be responsible for formulated program and educational outcomes and designing a curriculum that reflects contemporary healthcare trends as well as prepare graduates to function effectively in the healthcare environment  
- function as change agents and leaders to create a preferred future for phlebotomy education and practice  
- engage in scholarship as an integral part of teaching  
- use political, institutional, social, and economic forces to attain learning resources and activities
Chapter 2

QUALITY ASSURANCE
AND LEGAL ISSUES

OBJECTIVES

- Define the key terms and abbreviations listed at the beginning of this chapter
- Identify national organizations, agencies, and regulations that support quality assurance in healthcare
- Define quality and performance improvement measurements as they relate to phlebotomy
- List and describe the components of a quality assurance (QA) program and identify areas in phlebotomy subject to QC
- List areas in phlebotomy subject to QC and identify quality control procedures associated with each
- Demonstrate knowledge of the legal aspects associated with phlebotomy procedures by defining legal terminology and describing situations that have legal ramifications
Quality Assurance in Healthcare

- Healthcare institutions search for ways to guarantee quality patient care by identifying and minimizing situations that pose risks to patients and employees.

- Guidelines are developed for all processes used, all personnel involved, and when formally adopted, they become the institution's quality improvement (QI) program.

- One of the ways to improve quality is through compliance with/use of national standards and regulations.

National Standards and Regulatory Agencies

- QI is enforced through standards and regulations from the following agencies:
  - Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
  - College of American Pathologists (CAP)
  - Clinical Laboratory Improvement Amendments (CLIA)
  - Clinical and Laboratory Standards Institute (CLSI)
  - National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)
Quality Improvement

- Initiated by JCAHO
  - To standardize measurements of performance nationally

- Expectations
  - To demonstrate the ability to collect dependable data
  - To conduct reliable analyses of the data
  - To initiate appropriate system and process improvements

Quality Improvement (cont’d)

- Hospital core measurements
  - Identified ways to measure performance that support the objectives of the organization’s CQI

- Examples
  - Heart attack
  - Community-acquired pneumonia
  - Pregnancy and related conditions
  - Heart failure
Quality Improvement (cont’d)

- Measures quality & timeliness of phlebotomy
  - Community-acquired pneumonia
    - Blood culture collection before giving antibiotics
    - How collection, processing, and reporting affect the outcome
  - Heart attack
    - Time intervals between collection of specimens
    - Treatment based on the results of the test

Patient Safety and Sentinel Events

- A sentinel event is one that signals the need for immediate investigation and response

- Includes any unfavorable event that is unexpected and results in death or serious physical or psychologic injury, or any deviation from practice that increases the chance that an undesirable outcome might recur

- If a sentinel event occurs, the healthcare organization is required to
  - Perform a thorough and credible analysis of the root cause
  - Put improvements to reduce risk into practice
  - Monitor improvements to determine if they are effective
Quality Assurance in Phlebotomy

- QA Defined
  - A program that guarantees quality patient care by tracking outcomes
- QA Indicators
  - Measurable, well-defined, specific, objective, and clearly related to important aspects of care
- Threshold and Data
  - A level of acceptable practice beyond which quality patient care cannot be ensured
- Process and Outcomes
  - To improve an outcome, the process needs to be reviewed

Areas in Phlebotomy Subject to QC

- QC is a component of a QI program and a form of procedure control
- Patient preparation procedures
- Specimen collections procedures
  - Identification
  - Equipment
  - Technique
  - Collection priorities
  - Delta checks
  - Documentation
  - Collection manuals
  - Procedure, safety, and infection control manuals
  - QA forms, equipment check forms, internal reports
- Risk management
Legal Issues

- As healthcare providers go about their daily activities, there are many practices that if performed without reasonable care and skill could result in a lawsuit.

- It has been proven in past lawsuits that persons performing phlebotomy can and will be held legally accountable for their actions.

- Although most legal actions against healthcare workers are civil actions in which the alleged injured party sues for monetary damages, willful actions by healthcare workers with the intent to produce harm or death can result in criminal charges.

Legal Issues (cont’d)

- Divisions of law
  - Criminal law
    - Involves crimes against the state
  - Civil actions
    - Involves crimes against a person
Civil Actions

- Actions between two private parties, ex. individuals, corporations, or organizations
- Tort action
  - Civil wrong committed against a person or property
  - Damages may be awarded in court of law
  - May be willful or accidental

Tort Actions

- Assault
- Battery
- Fraud
- Invasion of privacy
- Breach of confidentiality
- Malpractice
- Negligence
- Res ipsa loquitur
- Respondeat superior
- Vicarious liability
Criminal Law

- Designed to protect all members of society from injurious acts by others

- Criminal acts
  - **Felonies**—crimes punishable by death or imprisonment
  - **Misdemeanors**—considered lesser offenses, carrying a fine or less than 1 year in jail

Tort Actions

- Breach of confidentiality
  - Failure to keep medical information confidential

- Negligence
  - Doing something that a reasonable person would not do or not doing something that a reasonable person would do
Tort Actions (cont’d)

- Malpractice
  - A type of negligence committed by a professional
  - A term associated with any professional misconduct
  - A claim implies that a greater standard of care was owed to injured person

Legal Terms

- Standard of care
  - Established standards by profession and expectations of society

- Respondeat superior
  - “Let the master respond,” which means employers are liable for the actions of employees

- Statute of limitations
  - All malpractice actions have a limited length of time for filing a lawsuit
Legal Terms (cont’d)

• Vicarious liability
  - Healthcare facility that hired the person is liable for any negligent act committed by that person

• Malpractice insurance
  - Personal insurance to protect against civil actions

• Avoiding lawsuits

Patient Consent

• Informed consent
• Expressed consent
• Implied consent
• HIV consent
• Consent of minors
• Refusal of consent
Risk Management

- Definition of risk
  - The chance of loss or injury
- Definition of risk management
  - An internal process focused on identifying and minimizing situations that pose risk to patients and employees

The Litigation Process

- Phase 1—Incident occurs
- Phase 2—Consultation with attorney
  - Plaintiff
  - Defendant
  - Discovery
  - Deposition
- Phase 3—The trial
- Phase 4— Appeal
Risk Management (cont'd)

- Steps in managing risk
  - Identification of the risk
  - Treatment of the risk
  - Education of employees and patients
  - Evaluation of what should be done in the future

Patient Safety and Sentinel Events

- Definition of sentinel event
  - One that signals the need for immediate investigation and response

- Required procedure to follow
  - Analysis of root cause
  - Improvements to reduce risk
  - Monitoring improvements to see if effective

254
Legal Cases

- A negligence case settled through binding arbitration
- Jones vs. Rapids General Hospital
- Congelton vs. Baton Rouge General Hospital
- Montgomery vs. Opelousas General Hospital
- Martin vs. Wentworth Douglass Hospital
PLB 116
PHLEBOTOMY SKILLS
SYLLABUS

TITLE: PLB 116 Phlebotomy Skills

FACULTY: Claude Rector, MA, MLS(ASCP)SM
cretor@pccua.edu 870-338-6474 ext1079 /cell 870-818-2432

Julie Pittman, BS, MLS(ASCP)SM
jpittman@pccua.edu 870-338-6474 ext1109/ cell 870-714-0358

Helena Regional Medical Center
Debbie Fields 870-816-3840

Northwest Regional Medical Center
Ginger Coats 662-624-3421

CREDIT: 240 hours lab, 6 credits

PRE-REQUISITES: Acceptance to the program

CO-REQUISITES: PLB 113 & PLB 123

COURSE DESCRIPTION:
Performing & managing specimen collections in the health care setting

OVERVIEW:
The phlebotomy skills course will allow the student to learn the skills necessary for their career as a phlebotomist. The clinical rotations will allow the student to get the hands-on experience needed for their career. Clinical experiences facilitate the application of theoretical concepts.

REQUIRED TEXTS

PLB 116
PHLEBOTOMY SKILLS
EDUCATIONAL LEARNING OUTCOMES

1. Demonstrate ease in performance of venipunctures and skin punctures using good technique
   and consistently performing these tasks properly, applying Universal Precautions, safe care of
   patients, and adhering to isolation procedures & techniques by:
   a. Using an evacuated system following the procedure outlined in the textbook
   b. Using a winged infusion set following the procedure outlined in the textbook
   c. Performance of capillary stick on newborn & adults following the procedure outlined in the
      textbook

2. Demonstrate an increasing sense of patient and colleague oriented responsibility as an integral
   part of professional practice and show an awareness of and appreciation for this responsibility.
   a. By arriving on time and beginning work promptly and notifying the phlebotomy supervisor
      well in advance of expected absences
   b. By being neat, clean, safe and professional in ones dress and work habits
   c. By treating laboratory results as confidential
   d. By accepting constructive criticism

3. Strengthen ones innate appropriate attitudes: increase ones sensitivity and resourcefulness
   a. By showing interest in learning, learning new tasks and doing learned tasks willingly but
      recognizing limitations
   b. By exhibiting a good understanding of the theory and application of the subject

4. Demonstrate both verbal and nonverbal expressions of cooperation and respect with patient,
   peer, supervisor and instructor

5. Demonstrate positive potential as phlebotomist by performance of routine venipunctures and skin
   punctures with minimal supervision
   a. By organizing tasks for priority and efficiency
   b. By completing tasks and completing them accurately and efficiently
   c. By performing with decreased supervision
   d. By developing self-confidence to enable one to work independently, under pressure and with
      interruptions

257
VIDEOS:

Blood Collection by Skin Puncture in Infants

Blood Collections: The Pediatric Patient

Blood Collection: The Routine Venipuncture

Blood Collection: Special Collections

Blood Collections: The Difficult Draw

Blood Collection: Microcollection Techniques II

Blood Collection: Modern Blood Collection Techniques

RESOURCES

Phillips Community College of the University of Arkansas MLT/Phlebotomy Computer Lab

Phillips Community College of the University of Arkansas Nursing Skills Labs

Phillips Community College of the University of Arkansas Learning Resources Media Center, Lewis Library

Phillips Community College of the University of Arkansas Learning Resources Media Center, DeWitt Library

Helena Regional Medical Center

Northwest Regional Medical Center

PCCUA CORE COMPETENCIES

Six PCCUA core competencies are incorporated within the context of this course. The competencies address skills the College and the Phlebotomy Program have committed to developing in all students.

1) Communication
2) Cultural Awareness
3) Social and Civic Responsibility (Role)
4) Critical Thinking
5) Mathematical Reasoning
6) Technology Utilization (Core Knowledge and Therapeutic Interventions)

Assessment of student competency is evaluated by a variety of methods throughout this course.
PLB 116
PHLEBOTOMY SKILLS
GRADING POLICIES

Grading

Week 1-3 Venipunctures on adults using the evacuated system
   Venipunctures on adults using the butterfly technique
   Isolation techniques

By the end of week 3, one must have 25 correct, successful adult evacuated system venipunctures recorded & 2 correct, successful adult butterfly venipunctures recorded.

Week 4-6 Venipunctures on adults using all systems
   Special Collection Procedures- Glucose tolerance testing
   Skin punctures on adults
   Venipunctures on children using available techniques
   Skin punctures on children and newborns

By the end of week 6:
   a. one must have 3 correctly performed and recorded isolation techniques
   b. one must have 5 successful, correct, adult skin punctures recorded
   c. one must have 3 correctly performed and recorded glucose tolerance tests
   d. one must have 5 correct, successful pediatric venipunctures recorded
   e. one must have 10 correct, successful pediatric skin punctures recorded
   f. one must have 3 correct, successful blood cultures recorded

Assigned Course Work

Assigned course work will not be accepted if submitted after 5 working days from the date due. Five (5) points will be deducted from the earned score of all course work submitted within 5 working days of the original scheduled time. A zero (0) will be recorded when the student fails to submit assigned course work within 5 working days of the original date due.

Attendance Policy

Students are expected to come to class on time with assignments completed. Absences in excess of two (2) constituted excessive absence and may result in the student being dropped from the roll. If, for any reason, the student is unable to attend a CLINICAL ROTATION, he/she must notify the instructor in advance of the absence. Three tardies constitute one absence.

Please refer to the Phlebotomy Handbook for the complete attendance policy and definitions of "absence" and "tardy".
PLB 116
PHLEBOTOMY SKILLS
CLINICAL GUIDELINES

Dress Code

Full uniform as outlined in the 2009-2010 Phlebotomy Student Handbook.

Behavior

1. Students are required to attend each scheduled clinical experience, appropriately attired and on time.

2. Students must demonstrate preparation for each clinical experience.

3. Written assignments for each clinical experience must be completed and turned in to the instructor at the appropriate place and time as designated by each clinical instructor.

4. Concluding each clinical experience students must evaluate: (a) how the clinical objectives were met and (b) the student’s feelings about the clinical experience.

5. In case of an absence from the clinical experience, the student must notify the instructor at least one hour prior to appointed time. Failure to notify the instructor is unsatisfactory conduct and may be considered a violation of safe practice.

6. Conduct during the clinical experience must adhere to the role of the phlebotomist as a member of the profession.

Clinical Labs

1. Performance of all "Phlebotomy Skills" must be demonstrated and evaluated as being safe in the campus lab before being performed in the clinical area.

   The student's performance will be evaluated as safe or unsafe. If the performance is graded unsafe, further practice will be necessary and return demonstration will be scheduled by appointment at the convenience of the instructor. Videotaping may be used for evaluation of return demonstration.

   Any student who comes to the clinical area unprepared will not be allowed on the clinical floor. The student will be sent to an area designated by his/her clinical instructor for remediation of deficiencies. A clinical absence will be recorded for that clinical day.

2. A post-conference may conclude each clinical day and will conclude each clinical week's experience. In post-conference, the student will evaluate (a) how the clinical objectives and client needs were met; (b) the effectiveness of phlebotomist actions; and (c) the student's thoughts about the clinical experience.

3. In case of illness or crisis, which prevents attendance in the clinical lab, the student must notify the instructor one (1) hour prior to the clinical experience in order to allow for changes in client assignment. If the student is unable to reach the instructor, the student is expected to notify the clinical lab assigned one (1) hour before the clinical experience is to begin.
4. Conduct in the clinical area must conform to professional standards. Smoking is allowed only in designated areas at Northwest Mississippi Regional Medical Center. Helena Regional Medical Center is a non-smoking facility. Loud talking, gum chewing and profanity are prohibited and constitute unprofessional conduct. **CLIENT CONFIDENTIALITY AND COMPLIANCE WITH HIPAA GUIDELINES MUST BE MAINTAINED AT ALL TIMES.**

5. Each student is expected to adhere to the school dress code policy while in the clinical area. Dismissal from the clinical area due to incomplete or inappropriate attire will be recorded as a clinical absence.

6. Each student will be clinically evaluated. It is the student's responsibility to make a **WEEKLY** appointment to review and sign his/her clinical anecdotal/evaluation.

7. No student may leave early from an assigned clinical experience without having first communicated directly with his/her clinical instructor or assigned preceptor. Leaving a clinical area without relief of duty is equivalent to abandonment. If a student abandons a clinical assignment, an **UNSAFE** will be given.

8. The student will adhere to all institutional policies and procedures. The student is expected to follow clinical lines of authority, validate unclear instruction, and to question dubious or arbitrary orders as dictated by "standards of practice". The student will notify the clinical instructor immediately of any significant change in client status.

9. When clinical procedures are to be performed, the student is expected to verify orders, gather necessary equipment, review the procedure, and notify his/her clinical instructor of intended action. **DO NOT ATTEMPT ANY PROCEDURE WITHOUT FIRST NOTIFYING YOUR CLINICAL INSTRUCTOR OF YOUR INTENT!**

If in the professional judgment of the instructor the student demonstrates inappropriate or unsafe behavior, the student will be dismissed from campus lab or clinical. An absence will be recorded. There is no provision for make-up of these absences.
Campus Labs

1. The student must be self-motivated and self-directed.
2. The responsibility for learning is placed on the learner.
3. Evidence of practice is expected prior to skills check-off.
4. When group activities are assigned, the student must be a responsible member by:
   a. Coming to group prepared to share (reading, researching, etc.)
   b. Communicating information in a clear, concise form for discussion
   c. Responding to assigned course work posted by the instructor
   d. Expressing feelings and differing viewpoints with respect for others
   e. Collaborating with group for decision-making
   f. Demonstrating value for contributions of all group members
   g. Role playing (or dramatizing) nurse-client situations
   h. Honestly evaluating self (strengths, weaknesses, and opportunities for growth)

Clinical Evaluation

Both the student and the instructor evaluate student clinical performance each week. A clinical evaluation tool will be used to document performance and/or lack of progress. It is the responsibility by the student to read and sign clinical evaluation tool weekly.
Violation of Safe Practice

An **UNSAFE** behavior is defined as an act of omission or commission that could result in injury, death, prolonged hospitalization or recovery of the client. This includes but is not limited to:

- Failure to protect the client's microbiological, chemical, physical, psychological, and/or thermal safety
- Inadequate use of the phlebotomy process
- Violation of previously learned principles
- Inappropriate independence or dependence in the clinical setting

Procedure for **UNSAFE** Behavior

The instructor will inform the student of unsafe behavior.

The student will be dismissed from the clinical area until the issue is resolved.

The student and instructor will meet the next working day to discuss and document the **UNSAFE** behavior.

If the behavior is determined to be **UNSAFE**, the student will receive an "F" in the phlebotomy skills course and must immediately withdraw. If the student is eligible for readmission, an application may be submitted.

The student has the right to appeal the decision through the college grievance process.

Disclaimer

In accordance with college policy as stated in the *College Catalog*, this publication is not construed as a contract between the student and the Phlebotomy Program. All programs within the Division of Allied Health reserve the right to make changes at any time in individual courses, the curriculum leading to a degree or certificate, as well as policies contained in the *Phlebotomy Handbook*, *College Catalog*, student handbooks, and web. Students are required to be familiar with and observe all rules and regulations of the college.

Cell Phones

To provide an optimal learning environment, all cell phones should be turned off or muted during class, clinical, and testing. Furthermore, students should not send or receive text messages or use cell phones to take pictures during class, clinical, and testing.

Changes in Student Demographics

Student academic files must contain current data. If information such as names, addresses, and phone number changes, it is the student's responsibility to immediately submit the new information to the secretary in the Division of Allied Health.
College Drug and Alcohol Policy

All students are expected to abide by the college drug and alcohol policy as well as the Division of Allied Health's Substance Abuse Testing Policy. Refer to the College and ADN Student Handbooks to review these policies.

Computer Lab

The computer labs on the Helena and DeWitt campuses will be open from 8 am until 4:15 pm for use by nursing students. Use of these labs requires a computer pass that will be distributed at the beginning of each semester and must be displayed at the computer station.

Related Campus Services

Refer to the Phlebotomy Student Handbook or College Catalog for a list of student services.

Academic Dishonesty in Allied Health Programs

Cheating is the intentional use of or attempt to use unauthorized information or study materials. This includes, but is not limited to,

- Copying from another student’s paper
- Using any unauthorized assistance in taking a quiz, exam or final exam, possession during a test of any unauthorized materials which include, but are not limited to, crib notes or technology that would aid in cheating
- Dependence on sources beyond those authorized by the faculty for writing papers, preparing presentation, reports, solving problems, or fulfilling assignments,
- Acquiring without permission tests or other academic material belonging to any PCCUA employee
- Aiding and or abetting another individual in committing any form of academic dishonesty

Students in the Division of Allied Health are expected to do their own work. Therefore, any cheating inside or outside of the classroom is not tolerated. Students who cheat will receive a grade of zero on the assignment or exam and may also receive an “F” in the course and/or be dismissed from the program in which the student is enrolled.

ADA Policy

Lynn Boone, the Vice Chancellor for Student Services serves as the ADA Compliance Officer. If you reside in Arkansas County you may contact the professional advisor on each campus. The process of student referral under the Americans with Disabilities Act can be found on the college web site at http://www.pccua.edu by clicking the Student Menu link.

FERPA Policy

Phillips Community College of the University of Arkansas complies with the Family Educational Rights and Privacy Act (FERPA) of 1974. A student has the right to inspect and review all of his/her records that meet the definition of educational records. No third party has the right to review student records. Directory information can be provided unless the student requests that it be withheld.
ACTS

The Arkansas Course Transfer System contains information about the transferability of courses within Arkansas public colleges and universities. Students are guaranteed the transfer of applicable credits and the equitable treatment in the application of credits for the admissions and degree requirements. Course transferability is not guaranteed for courses listed in the ACTS as "No Comparable Course." Additionally, courses with a "D" frequently do not transfer and institutional polices may vary. ACTS may be accessed on the Internet by going to the ADHE website and selecting Course Transfer. (http://acts.adhe.edu)

STUDENT HEALTH INSURANCE

Phillips Community College of the University of Arkansas does not provide insurance for its students. The college does encourage each student to secure her/his own insurance, and for that reason, the college has contacted United Healthcare Student Resources. Forms for this insurance are available in the Registrar's office.

LATEX SENSITIVITY POLICY

1. The student is responsible for informing faculty of a known allergy to latex, or when symptoms of a latex sensitivity are suspected. Symptoms include, but are not limited, to, runny nose, itching eyes, asthma, eczema, contact dermatitis, and rarely shock.
2. In the event of a known latex allergy, continued enrollment in any allied health program is dependent upon recommendations of an appropriate healthcare provider, and the student's ability to meet curricular requirements.
3. If there is a known allergy to latex, the student must avoid contact with latex gloves and other products containing latex, avoid inhaling the powder from latex gloves worn by other students or individuals in the clinical setting or laboratory, and carefully follow the student's healthcare provider's instructions for dealing with allergic reactions.
4. In campus lab experiences, faculty will make appropriate accommodations for a student with a known latex allergy.
5. Students should use non-latex gloves when available, avoid oil-based hand cream or lotion under gloves, and wash hands with a mild soap and dry thoroughly after removing latex gloves to decrease the possibility of developing a latex sensitivity.
6. When a student suspects he/she is experiencing symptoms of latex sensitivity, the symptoms must be reported immediately to faculty. Further direct contact with all latex containing products must be avoided. The student must consult with an experienced healthcare provider in treating latex allergy. Documentation of prescribed steps to taken to treat the allergic reaction and measures to prevent recurrence must be submitted to the respective program director/coordinator. Steps 2 and 3 will also apply in this situation.

Shingles

Even though the varicella zoster virus typically is not spread to individuals with healthy immune systems or individuals who have had chickenpox, shingles can be detrimental to the health of individuals with immune system deficiencies. Accordingly, students with an outbreak of shingles are obligated to report this condition to faculty before reporting to the clinical setting. Students will not be allowed to attend clinical until all shingle blisters are scabbed over. Students with open shingle blisters must avoid physical contact with the following individuals:

- Anyone who has never had chickenpox
- Anyone with a weak immune system
- All newborns
- All pregnant women

The absentee policy as published in each respective course syllabus will apply.

**Physical Health and Individual Responsibility**

A student with an acute illness that can be transmitted to other individuals in the healthcare setting will not participate in class or clinical. Examples of an acute illness include, but are not limited to, increased temperature, influenza, gastroenteritis, open wounds, draining wounds, and shingles. The absentee policy as published in each respective course syllabus will apply.
PLB 116
PHLEBOTOMY SKILLS
STUDENT EXPECTATIONS

Student must:

- be excited and have a commitment to lifelong learning
- exhibit a spirit of inquiry
- be committed to innovation, continuous quality/performance improvement and excellence
- be committed to a career in phlebotomy (first 4 bullets adapted from NLN Scope and Practice for Academic Nurse Educators, 2005)
- be self-motivated and self-directed
- assume responsibility for learning. At least two (2) hours outside preparation is recommended for each one (1) credit hour. Evidence of preparation is required
- be a responsible group member by participated in peer evaluation, sharing information, participation in learning activities, decision-making with others, and learning to give information in a clear, concise form.

PLB 116
PHLEBOTOMY SKILLS
FACULTY EXPECTATIONS

Faculty will:

- create an environment in classroom, laboratory, and clinical settings that facilitates student learning and the achievement of desired cognitive, affective, and psychomotor outcomes
- be responsible for assisting students to develop the phlebotomist role and integrate the values and behaviors of the profession
- use a variety of assessment and evaluation strategies to determine student learning in classroom, laboratory, and clinical settings
- be responsible for formulated program and educational outcomes and designing a curriculum that reflects contemporary healthcare trends as well as prepare graduates to function effectively in the healthcare environment
- function as change agents and leaders to create a preferred future for phlebotomy education and practice
- engage in scholarship as an integral part of teaching
- use political, institutional, social, and economic forces to attain learning resources and activities (adapted from NLN Scope and Practice for Academic Nurse Educators, 2005)
22B. Instructional Areas

The curriculum must include instruction/experiences in the following:

1. 100 hours of applied experiences;
2. Performance of a minimum of 100 successful unaided collections;
3. Instruction in a variety of collection techniques, including vacuum collection devices, syringe and capillary/skin-puncture methods, and
4. Contact with various patient types, which may include varied clinical settings, such as health fairs, donor or pheresis centers, nursing home collection, in addition to the generally accepted inpatient and outpatient settings.

Response to Standard 22B:

Course Work in Phlebotomy

**PLB 113 Phlebotomy Procedures**
Basic anatomy and physiology of body systems involved in phlebotomy sites; collection equipment and techniques involved in performance of venipuncture.

**PLB 116 Phlebotomy Skills**
Performing and managing specimen collections in the health care setting.

**PLB 123 Special Techniques**
The health care setting, medical terminology, collection equipment and techniques involved in skin punctures, special collection procedures, quality control and assurance procedures, interpersonal skills and health care safety and liability requirements.

These descriptions are also available through the PCCUA on-line student catalog at [http://pccua.edu/college_catalogs.htm](http://pccua.edu/college_catalogs.htm) and the PCCUA Student Catalog on page 74.
22C. Learning Experiences

The learning experiences needed in the curriculum to develop and support entry level competencies must be properly sequenced and include instructional materials, classroom presentation, discussions, demonstrations, laboratory sessions, supervised practice and experience.

1. Student experiences must be educational and balanced so that all competencies can be achieved.

Response to Standard 22C-1:
Students complete the core lecture and laboratory courses studying theory, principles and techniques of phlebotomy. Student core course laboratory sessions emphasize basic techniques, manual methods, and basic instrumentation theories and operations. Demonstrations of all phlebotomy procedures and techniques used in student laboratories are provided as well as numerous opportunities for practice. In order to enhance learning and to support the development of entry level competencies, students in lecture and laboratory courses are provided with detailed instructional materials that include but not limited to lecture notes, study questions, case studies, laboratory manuals, and exposure to information through supplemental computerized tutorials and CDs.

During clinical experiences, students are provided ample opportunities for “hands-on” practice (and are under the supervision of clinical instructors). Students follow a clearly defined rotation schedule through phlebotomy. Once a rotation is complete, the clinical instructors verify competencies have been met and so indicate on the students’ grade report forms.
Phlebotomy Program Self-Study - Documentation for Standards 22A & 22C
NAACLS Competencies Cross-referenced to Course Objectives

Note: Provide a brief explanation of how course objectives which have been provided elsewhere in the self-study have been identified in this cross-referencing matrix.

<table>
<thead>
<tr>
<th>Standards 22A and 22C</th>
<th>NAACLS Competencies</th>
<th>Course Identification (Title/Course #)</th>
<th>PLB 113 Phlebotomy Procedures</th>
<th>PLB 123 Special Techniques</th>
<th>PLB 116 Phlebotomy Skills</th>
<th>General Education Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location of Syllabus in Self-Study</td>
<td>1.0 Demonstrate knowledge of the health care delivery system and medical terminology</td>
<td>Unit 1.2</td>
<td></td>
<td></td>
<td></td>
<td>OT 113 Med Term I</td>
</tr>
<tr>
<td></td>
<td>1.1 Identify the health care providers in hospitals and clinics and the phlebotomist's role as a member of this health care team.</td>
<td>Unit 1.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.2 Describe the various hospital departments and their major functions in which the phlebotomist may interact in his/her role.</td>
<td>Unit 1.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.3 Describe the organizational structure of the clinical laboratory department.</td>
<td>Unit 1.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.4 Discuss the roles of the clinical laboratory personnel and their qualifications for these professional positions.</td>
<td>Unit 1.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.5 List the types of laboratory procedures performed in the various sections of the clinical laboratory department.</td>
<td>Unit 1.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.6 Describe how laboratory testing is used to assess body functions and disease.</td>
<td>Unit 1.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.7 Define medical terminology commonly used in the laboratory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>OT 113</td>
</tr>
<tr>
<td></td>
<td>2.0 Demonstrate knowledge of infection control and safety</td>
<td>Unit 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1 Identify policies and procedures for maintaining laboratory safety.</td>
<td>Unit 3.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2 Demonstrate accepted practices for infection control, isolation techniques, aseptic techniques and methods for disease prevention.</td>
<td>Unit 3.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2.1 Identify and discuss the modes of transmission of infection and methods for prevention.</td>
<td>Unit 3.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2.2 Identify and properly label biohazardous specimens.</td>
<td>Unit 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2.3 Discuss in detail and perform proper infection control techniques, such as handwashing, gowning, gloving, masking, and double-bagging.</td>
<td>Unit 3.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2.4 Define and discuss the term &quot;nosocomial infection&quot;.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3 Comply with federal, state and locally mandated regulations regarding safety practices.</td>
<td>Unit 3.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3.1 Use the OSHA Standard Precautions</td>
<td>Unit 3.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3.2 Use prescribed procedures to handle electrical, radiation, biological and fire hazards.</td>
<td>Unit 3.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3.3 Use appropriate practices, as outlined in the OSHA Hazard Communication Standard, including the correct use of the Material Safety Data Sheet as directed.</td>
<td>Unit 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.4 Describe measures used to insure patient safety in various patient settings, i.e., inpatient, outpatient, pediatrics, etc.</td>
<td>Unit 3.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.0 Demonstrate basic understanding of the anatomy and physiology of body systems and anatomic terminology in order to relate major areas of the clinical laboratory to general pathologic conditions associated with the body systems.</td>
<td>Unit 5.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.1 Describe the basic functions of each of the main body systems, and demonstrate basic knowledge of the circulatory, urinary, and other body systems necessary to perform assigned specimen collection tasks.</td>
<td>Unit 5.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.2 Identify the veins of the arms, hands, legs and feet on which phlebotomy is performed.</td>
<td>Unit 6.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.3 Explain the functions of the major constituents of blood, and differentiate between whole blood, serum and plasma.</td>
<td>Unit 6.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.4 Define hemostasis, and explain the basic process of coagulation and fibrinolysis.</td>
<td>Unit 6.10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.5 Discuss the properties of arterial blood, venous blood, and capillary blood.</td>
<td>Unit 6.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.00 Demonstrate understanding of the importance of specimen collection and specimen integrity in the delivery of patient care.</td>
<td>Unit 8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.1 Describe the legal and ethical importance of proper patient/sample identification.</td>
<td>Unit 8.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.2 Describe the types of patient specimens that are analyzed in the clinical laboratory.</td>
<td>Unit 13.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.3 Define the phlebotomist’s role in collecting and/or transporting these specimens to the laboratory.</td>
<td>Unit 13.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.4 List the general criteria for suitability of a specimen for analysis, and reasons for specimen rejection or recollection.</td>
<td>Unit 9.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.5 Explain the importance of timed, fasting and stat specimens, as related to specimen integrity and patient care.</td>
<td>Unit 8.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.00 Demonstrate knowledge of collection equipment, various types of additives used, special precautions necessary and substances that can interfere in clinical analysis of blood constituents.</td>
<td>Unit 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1 Identify the various types of additives used in blood collection, and explain the reasons for their use.</td>
<td>Unit 7.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.2 Identify the evacuated tube color codes associated with the additives.</td>
<td>Unit 7.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.3 Describe substances that can interfere in clinical analysis of blood constituents and ways in which the phlebotomist can help to avoid these occurrences.</td>
<td>Unit 6.6 Unit 6.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.4 List and select the types of equipment needed to collect blood by venipuncture, capillary, and arterial puncture.</td>
<td>Unit 7.2 Unit 10.2 Unit 12.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.5 Identify special precautions necessary during blood collections by venipuncture, capillary, and arterial puncture.</td>
<td>Unit 8.10 Unit 10.6 Unit 12.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.00 Follow standard operating procedures to collect specimens.</td>
<td>Unit 12.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.1 Identify potential sites for venipuncture, capillary, and arterial punctures.</td>
<td>Unit 8.8 Unit 10.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.2 Differentiate between sterile and antiseptic techniques.</td>
<td>Unit 7.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.3 Describe and demonstrate the steps in the preparation of a puncture site.</td>
<td>Unit 8.8 Unit 10.6 Unit 12.4 Unit 12.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.4 List the effects of tourniquet, hand squeezing and heating pads on capillary puncture and venipuncture.</td>
<td>Unit 10.6 Unit 8.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.5 Recognize proper needle insertion and withdrawal techniques including direction, angle, depth and aspiration, for arterial puncture and venipuncture.</td>
<td>Unit 8.8 Unit 12.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.6 Describe and perform correct procedure for capillary collection methods on infants and adults.</td>
<td>Unit 10.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.7 Identify alternate collection sites for arterial, capillary and venipuncture. Describe the limitations and precautions of each.</td>
<td>Unit 6.7 Unit 10.6 Unit 12.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.8 Name and explain frequent causes of phlebotomy complications. Describe signs and symptoms of physical problems that may occur during blood collection.</td>
<td>Unit 8.10 Unit 8.8 Unit 9.6 Unit 2.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.9 List the steps necessary to perform an arterial, venipuncture and/or capillary puncture in chronological order.</td>
<td>Unit 8.8 Unit 10.6 Unit 12.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.10 Follow standard operating procedures to perform a competent/effective venipuncture on a patient.</td>
<td>Unit 8.8 Unit 10.6 Unit 12.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.11 Follow standard operating procedures to perform a competent/effective capillary puncture on a patient.</td>
<td>Unit 8.8 Unit 10.6 Unit 12.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.00 Demonstrate understanding of requisitioning, specimen transport and specimen processing.</td>
<td>Unit 7.2</td>
<td>Unit 10.4</td>
<td>Unit 10.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.1 Describe the standard operating procedure for a physician requesting a laboratory analysis for a patient. Discuss laboratory responsibility in responding to physician requests.</td>
<td>Unit 8.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.2 Instruct patients in the proper collection and preservation for various samples, including blood, sputum, and stools.</td>
<td>Unit 9.6</td>
<td>Unit 13.2</td>
<td>Unit 13.5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.3 Explain methods for transporting and processing specimens for routine and special testing.</td>
<td>Unit 9.6</td>
<td>Unit 13.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.4 Explain methods for processing and transporting blood specimens for testing at reference laboratories.</td>
<td></td>
<td>Unit 14.5</td>
<td>Unit 14.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.5 Describe the potential clerical and technical errors that may occur during specimen processing.</td>
<td>Unit 8.5</td>
<td>Unit 11.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.6 Identify and report potential pre-analytical errors that may occur during specimen collection, labeling, transporting, and processing.</td>
<td>Unit 9.6</td>
<td>Unit 14.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.7 Explain and follow the criteria for specimens and test results that will be used as legal evidence, i.e. paternity testing, chain of custody, blood alcohol levels, etc.</td>
<td></td>
<td>Unit 11.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.0 Demonstrate understanding of quality assurance and quality control in phlebotomy.</td>
<td></td>
<td></td>
<td>Unit 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.1 Describe the system for monitoring quality assurance in the collection of blood specimens.</td>
<td></td>
<td>Unit 2.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2 Identify policies and procedures used in the clinical laboratory to assure quality in the obtaining of blood specimens.</td>
<td></td>
<td>Unit 2.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2.1 Perform quality control procedures.</td>
<td></td>
<td>Unit 2.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2.2 Record quality control results.</td>
<td>Unit 2.5</td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.2.3 Identify and report control results that do not meet predetermined criteria.</td>
<td></td>
<td>Unit 2.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.0 Communicate (verbally and nonverbally) effectively and appropriately in the workplace.</td>
<td></td>
<td>Unit 1.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.1 Maintain confidentiality of privileged information on individuals.</td>
<td></td>
<td>Unit 1.2</td>
<td>HIPPA DVD</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.2 Value diversity in the workplace.</td>
<td></td>
<td>Unit 1.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.3 Interact appropriately and professionally with other individuals.</td>
<td></td>
<td>Unit 1.4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.4 Discuss the major points of the American Hospital Association's Patient's Bill of Rights or the Patient's Bill of Rights from the institution.</td>
<td></td>
<td>Unit 1.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.5 Model professional appearance and appropriate behavior.</td>
<td></td>
<td>Unit 1.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.6 Model professional appearance and appropriate behavior.</td>
<td></td>
<td>Unit 1.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.7 Define the different terms used in the medicolegal aspect for phlebotomy and discuss policies and protocol designed to avoid medicolegal problems.</td>
<td></td>
<td>Unit 2.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.8 List the causes of stress in the work environment and discuss the coping skills used to deal with stress in the work environment.</td>
<td></td>
<td>Unit 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.9 Demonstrate ability to use computer information systems necessary to accomplish job functions.</td>
<td>Unit 14.2</td>
<td>Unit 14.4</td>
<td>√</td>
<td>CT 114 Comp Info Systems</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2. Student experiences at different clinical sites must be comparable to enable all students to achieve entry level competencies.

Response to Standard 22C-2:
When entering each clinical experience the student will receive a clinical handbook. This handbook will contain the course syllabus, course outline, and evaluation tools for the clinical coordinators. The four clinical affiliates for the program are Helena Regional Medical Center, Northwest Mississippi Regional Medical Center, Baptist Health Medical Center-Stuttgart, and DeWitt Hospital and Nursing Home provide the student the opportunity to achieve entry level competencies.
3. Policies and processes by which students may perform service work must be published and made known to all concerned in order to avoid practices in which students are substituted for regular staff. After demonstrating proficiency, students with qualified supervision, may be permitted to perform procedures. Service work by students in clinical settings outside of academic hours must be noncompulsory.

Response to Standard 22C-3:
A statement regarding service work by students is included in the affiliation agreement under I. Responsibilities of the Parties, C. Responsibilities of Hospital, Section2: "To maintain a sufficient number of staff support to carry out normal service functions, so STUDENTS will not be performing in lieu of staff."
22D. Evaluations

Written criteria for passing, failing, and progression in the program must be provided. These must be given to each student at the time of entry into the program. Evaluation systems must be related to the objectives and competencies described in the curriculum for both didactic and applied components. They must be employed frequently enough to provide students and faculty with timely indications of the students’ academic standing and progress and to serve as a reliable indicator of the effectiveness of instruction and course design.

Response to Standard 22D:
PCCUA PLB Program Student Handbook, p. 7

PHLEBOTOMY PROGRESSION
Guidelines for progressing in the phlebotomy curriculum
A minimum grade of “C” in PLB 113 and PLB 123 is required in order to progress into PLB 116.
A minimum GPA of 2.0 is a prerequisite for continuance in the Phlebotomy Program.
A minimum grade of “C” in each PLB course is required for completion of the Phlebotomy Program.
PLB 113
PHLEBOTOMY PROCEDURES
EXAM 2
February 16, 2011

DIRECTIONS: Each of the questions or incomplete statements below is followed by suggested answers or completions. Select the BEST answer in each case.

1. Leukocytes (WBC) function primarily as
   (A) oxygen transport mechanisms
   (B) host cells
   (C) clotting mechanisms
   (D) defense mechanisms

2. Normal range, 150,000 to 400,000/cubic millimeter
   (A) erythrocyte
   (B) thrombocyte
   (C) leukocyte
   (D) stem cell

3. A blood clot in a blood vessel is called a/an
   (A) embolism
   (B) embolus
   (C) phlebitis
   (D) thrombus

4. The heart muscle gets its blood supply from the:
   (A) carotid arteries
   (B) coronary arteries
   (C) pulmonary arteries
   (D) pulmonary veins

5. The chamber of the heart that receives blood from the pulmonary circulation is the
   (A) left atrium
   (B) left ventricle
   (C) right atrium
   (D) right ventricle
6. The middle layer of the heart is called the:
   (A) endocardium
   (B) epicardium
   (C) myocardium
   (D) pericardium

7. The EKG shows Q, R, S and T waves due to
   (A) atrial contractions
   (B) labor contractions
   (C) myocardial infarction
   (D) activity of the ventricles

8. When taking a blood pressure, the systolic pressure is the pressure reading when the
   (A) artery is compressed and blood flow is cut off
   (B) cuff is completely deflated
   (C) first heart sounds are heard as the cuff is deflated
   (D) muffled sound is heard as the cuff is deflated

9. The purpose of the systemic circulation is to
   (A) carry blood to and from the lungs
   (B) carry oxygen and nutrients to the cells
   (C) remove impurities from the blood
   (D) return oxygenated blood to the heart

10. Which of the following blood vessels are listed in the proper order of blood flow?
    (A) aorta, superior vena cava, vein
     (B) artery, arteriole, capillary
     (C) vein, venule, capillary
     (D) venule, capillary, arteriole

11. The internal space of a blood vessel is called the
    (A) atrium
    (B) lumen
    (C) septum
    (D) valve

12. The largest vein and the largest artery in the body in that order are
    (A) cephalic and femoral
    (B) vena cava and aorta
    (C) pulmonary and femoral
    (D) inferior vena cava and femoral
13. The preferred vein for venipuncture in the "H" pattern is the
   (A) accessory cephalic
   (B) basilic
   (C) median cephalic
   (D) median cubital

14. The major difference between plasma and serum is that serum
   (A) contains fibrinogen, plasma does not
   (B) looks clear, plasma looks cloudy
   (C) looks dark yellow, plasma looks pale yellow
   (D) contains no fibrinogen, plasma does

15. An individual's blood type (A, B, AB, or O) is determined by the presence or absence of which of
    the following on the red blood cells?
    (A) antibodies
    (B) antigens
    (C) chemicals
    (D) hormones

16. Which is the correct sequence of events after blood vessel injury?
    (A) platelet aggregation, vasoconstriction, fibrin clot formation
    (B) vasoconstriction, platelet aggregation, fibrin clot formation
    (C) vasoconstriction, platelet aggregation, fibrin clot formation
    (D) fibrinolysis, platelet adhesion, vasoconstriction

17. Lymph originates from
    (A) joint fluid
    (B) tissue fluid
    (C) synovial fluid
    (D) bone marrow

18. A heart disorder characterized by fluid buildup in the lungs is called
    (A) aortic stenosis
    (B) mitral valve prolapse
    (C) myocardial infarction
    (D) congestive heart failure

19. Which of the following is a function of the lymphatic system?
    (A) carry oxygen to the cells
    (B) regulate blood pressure
    (C) remove microorganisms
    (D) synthesize coagulation factors
20. When platelets stick to one another during the coagulation process it is called

(A) cohesion  
(B) inhibition  
(C) aggregation  
(D) adhesion

21. The next stage of the coagulation process after fibrin clot formation is:

(A) fibrinolysis  
(B) clot formation  
(C) vasoconstriction  
(D) all of the above

22. A person who has A-negative blood has red blood cells that:

(A) have the A antigen and lack the Rh antigen  
(B) have both the A antigen and the Rh antigen  
(C) lack the A antigen and have the Rh antigen  
(D) lack both the A antigen and the Rh antigen

23. Whole blood consists of all of the following except

(A) white blood cells  
(B) fibrin clot  
(C) plasma  
(D) platelets

24. Which of the following formed elements is actually part of a bone marrow cell called a megakaryocyte?

(A) erythrocyte  
(B) granulocyte  
(C) reticulocyte  
(D) thrombocyte

25. Which of the following veins are most commonly used for venipuncture?

(A) median basilic and median cubital  
(B) cephalic and basilic  
(C) radial and basilic  
(D) median cubital and median cephalic

26. The tunica adventitia is the:

(A) external layer of a blood vessel  
(B) inside lining of a blood vessel  
(C) internal layer of a blood vessel  
(D) middle layer of a blood vessel
27. A major difference between veins and arteries is

   (A) arteries have a thicker external layer
   (B) arteries have no endothelial layer
   (C) veins have a thicker media layer
   (D) veins have valves

28. While selecting a vein for venipuncture you feel a distinct pulse. What you are feeling is a/an

   (A) valve
   (B) nerve
   (C) large vein
   (D) artery

29. A vein is defined as a blood vessel that carries

   (A) blood away from the heart
   (B) blood to the heart
   (C) deoxygenated blood
   (D) oxygen-rich blood

30. Which of the following arteries carries deoxygenated blood?

   (A) brachial
   (B) femoral
   (C) radial
   (D) pulmonary

31. Diastolic blood pressure is the pressure in the arteries during

   (A) ventricular contraction
   (B) ventricular relaxation
   (C) atrial contraction
   (D) atrial relaxation

32. The sound of the heart beat comes from

   (A) contracting myocardium
   (B) firing of the sinoatrial node
   (C) opening and closing of the valves
   (D) opening and closing of the veins

33. The heart’s “pacemaker” is the:

   (A) bundle of His
   (B) chorda tendinea
   (C) papillary muscle
   (D) sinoatrial node

280
34. What is the function of the left ventricle?

(A) deliver blood to the aorta  
(B) deliver blood to the pulmonary artery  
(C) receive blood from the pulmonary vein  
(D) receive blood from the vena cava

35. The mitral valve in the heart is also called the

(A) aortic valve  
(B) bicuspid valve  
(C) pulmonic valve  
(D) tricuspid valve

36. Partitions that separate the right and left chambers are called

(A) chordae tendineae  
(B) cusps  
(C) purkinje fibers  
(D) septa

37. The thin membrane lining the heart that is continuous with the lining of the blood vessels is the

(A) endocardium  
(B) epicardium  
(C) myocardium  
(D) pericardium

38. Contraction of the right atrium forces the blood through the tricuspid valve into the

(A) right ventricle  
(B) left ventricle  
(C) pulmonary artery  
(D) pulmonary vein

39. Contraction of the right ventricle forces the blood through the pulmonary semilunar valve into the

(A) pulmonary artery  
(B) pulmonary vein  
(C) right atrium  
(D) left atrium

40. Oxygen-rich blood flows back to the heart via the pulmonary veins and enters the

(A) left atrium  
(B) right atrium  
(C) left ventricle  
(D) right ventricle
41. Contraction of the left atrium forces the blood through the bicuspid valve into the

(A) left ventricle
(B) right ventricle
(C) pulmonary artery
(D) pulmonary vein

42. Contraction of the left ventricle forces the blood through the aortic semilunar valve into the

(A) aorta
(B) vena cava
(C) pulmonary artery
(D) pulmonary vein

43. This diagnostic test is specific for myocardium damage

(A) myoglobin
(B) troponin T (TnT)
(C) cholesterol
(D) digoxin

DIRECTIONS: For each of the questions or incomplete statements below, ONE or MORE of the numbered responses are correct. In each case select

A. If only 1, 2, and 3 are correct
B. If only 1 and 3 are correct
C. If only 2 and 4 are correct
D. If only 4 is correct
E. If all are correct

44. __________ If a blood specimen is allowed to clot (without anticoagulant), what remains?

(1) Fibrin clot
(2) Blood cells
(3) Serum
(4) Plasma

45. __________ Plasma has which of the following features?

(1) Contains anticoagulants
(2) Contains approximately 90% water
(3) Can be separated by centrifugation
(4) Is the liquid portion of the blood
DIRECTIONS: For each of the questions or incomplete statements below, ONE or MORE of the numbered responses are correct. In each case select

A. If only 1, 2, and 3 are correct
B. If only 1 and 3 are correct
C. If only 2 and 4 are correct
D. If only 4 is correct
E. If all are correct

46. ___________ The human heart has which of the following features?

   (1) Is the size of a man’s fist
   (2) Has four chambers
   (3) Is located slightly left of the midline
   (4) Is a gland

47. ___________ Capillaries have which of the following features?

   (1) May be so small that only one cell can pass through
   (2) Have sensitive nerve endings
   (3) Link arterioles to venules
   (4) Are located only in the fingers

48. ___________ Tests for blood types usually are performed in which laboratory(ies)?

   (1) virology
   (2) bacteriology
   (3) chemistry
   (4) blood bank/transfusion medicine

49. ___________ Red blood cells have which of the following features?

   (1) Measure about 7-8 micrometers in diameter
   (2) Normally have no nucleus in circulating blood
   (3) Carry oxygen and carbon dioxide
   (4) Have a biconcave disc shape

50. ___________ Red blood cells contain?

   (1) Hemoglobin
   (2) Granules
   (3) Blood type antigens on the surface membrane
   (4) Bile
Name: __________________________

1. Drawing a patient's blood without his or her permission can result in a charge of
   A) Assault and battery
   B) Invasion of privacy
   C) Malpractice
   D) Negligence

2. Two phlebotomists are discussing a patient's condition in the elevator. They are
   overheard by the patient's daughter. This is an example of
   A) Failure to exercise reasonable care
   B) Improper or unskilled care
   C) Invasion of privacy
   D) Mistreatment of a patient

3. Which of the following would not violate a patient's right to confidentiality?
   A) Indicating the nature of a patient's disease on the door
   B) Keeping a list of human immunodeficiency virus (HIV)-positive patients posted in
      the laboratory
   C) Posting a patient's laboratory results on a bulletin board in his or her room
   D) Sharing collection site information on a difficult patient

4. If a phlebotomist __________, he or she is negligent.
   A) Does not obtain a specimen from a combative patient
   B) Fails to put the needle in the sharps container
   C) Puts the bedrail in an upright position
   D) Reports obvious changes in patient condition

5. A national organization that sets standards for phlebotomy procedures is the
   A) ASCP
   B) NAACLS
   C) NCA
   D) CLSI
6. Examples of quality control are all of the following except
   A) Checking expiration dates of evacuated tubes
   B) Documenting maintenance on centrifuge
   C) Filling out your time sheet daily
   D) Recording refrigerator temperature daily

7. When the threshold value of a clinical indicator of QA is exceeded and a problem is identified
   A) A corrective action plan is implemented
   B) An incident report must be filed
   C) The patient specimens must always be redrawn
   D) The patient's physicians must be notified

8. You are the only phlebotomist in an outpatient drawing center. A physician orders a test with which you are not familiar. What is the most appropriate action to take?
   A) Call the physician's office for assistance
   B) Draw both a serum and a plasma sample
   C) Refer to the procedure manual for instruction
   D) Send the patient to another drawing center

9. Which one of the following is not a phase of the litigation process?
   A) A complaint against the defendant is filed by the plaintiff
   B) Appeal of the jury decision is begun by the losing party
   C) Correction of the situation is begun using policies and procedures already in place
   D) Depositions are given while a court reporter records every word

10. Phlebotomists are involved in the Joint Commission's performance measurements in the area of myocardial infarction in what way?
    A) Reporting pregnancy testing results
    B) Procurement specimens for pneumonia testing
    C) Collecting specimens for timed tests for cardiac enzymes
    D) Collecting specimens for blood cultures at specified times

11. The CLIA federal regulations are administered by
    A) CMS
    B) COW
    C) WHO
    D) CAP
12. __________ are set up to monitor all aspects of laboratory work.
   A) Quality indicators
   B) GLPs
   C) Sentinel events
   D) Thresholds

13. Failure to keep privileged medical information private is
   A) Breach of confidentiality
   B) Fraud
   C) Invasion of Privacy
   D) Assault

14. A type of negligence committed by a professional is called
   A) Assault
   B) Battery
   C) Invasion of privacy
   D) Malpractice

15. Educational standards for phlebotomy programs
   A) Competencies
   B) Goals
   C) Hopes and dreams
   D) Due care

16. Level of care a person of ordinary intelligence and good sense would provide under the
given circumstances
   A) Delta check
   B) Due care
   C) Civil action
   D) Informed consent
KEY TERM MATCHING

KEY TERMS

17. ____CMS
18. ____ASCP
19. ____NAACLS
20. ____CLSI
21. ____JCAHO
22. ____CAP
23. ____CLIA’88

DESCRIPTIONS

a. Nongovernmental agency charged with establishing standards for the operation of hospitals and other health-related facilities
b. Offers proficiency testing and influences quality improvement in phlebotomy through standards
c. Not-for-profit organization for professionals in the field of laboratory medicine
d. Agency that manages federal health care programs of Medicare and Medicaid
e. Federal regulations passed by congress to establish quality standards that apply to all laboratory facilities
f. National organization that develops guidelines and sets standards for laboratory procedures
g. Provides either accreditation or approval for clinical laboratory educational programs

24. Which manual describes the chemical, electrical, and radiation safety for the laboratory?
   A) Collection manual
   B) Infection control manual
   C) Procedure manual
   D) Safety manual

25. A comparison of current test results with previous results for the same test on the same patient is called a
   A) Delta check
   B) Quality indicator
   C) Quality system essential
   D) Sentinel event
MATCH THE TYPES OF PATIENT CONSENT WITH THE CORRECT DESCRIPTION.

TYPE OF CONSENT
26. _____Informed consent
27. _____Expressed consent
28. _____Implied consent
29. _____HIV consent
30. _____Minor consent
31. _____Refusal of consent

DESCRIPTION
a. A constitutional right to refuse a medical procedure
b. Consent is implied by actions
c. Implies voluntary and competent permission
d. Parent/guardian consent required for medical treatment
e. Required before surgery
f. State laws specify what type of information must be given

LITIGATION PROCESS
Number the following phases in the litigation process in chronological order form 1-7
32. _____A deposition is taken
33. _____Appeal is filed by the losing party
34. _____Attorney decides whether to take case or not
35. _____Attorney files complaint
36. _____Injured party consults attorney
37. _____Patient becomes aware of prior possible injury
38. _____Trial phase with judge and jury

39. The _____contains procedures that outlines hand washing and other decontamination procedures and precautions when handling specimens.
   A) Safety manual
   B) Infection control procedure manual
   C) Equipment check forms
   D) Risk management

40. Failure to exercise “due care” is
   A) Assault
   B) Battery
   C) Invasion of privacy
   D) Negligence
Phlebotomy Technician

Student Clinical Evaluation

<table>
<thead>
<tr>
<th>Student Last Name</th>
<th>First Name</th>
<th>MI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period of Evaluation From:</td>
<td>To:</td>
<td></td>
</tr>
<tr>
<td>Instructor (Please Print):</td>
<td>Clinical Site</td>
<td></td>
</tr>
</tbody>
</table>

This evaluation form is to be filled out by the clinical instructor responsible for the student during the period of evaluation. This appraisal form is used to evaluate the student's performance at the end of the clinical rotation and will become part of the student's permanent record.

Instruction to Evaluators:

1. Please be honest in rating the following characteristics of the student.

2. Base your judgement on behavior you feel is characteristic of the student during the period of evaluation rather than on an isolated incident.

3. The following behaviors/characteristics are categorized. Assign the appropriate number grade (0-100%) for each of the 15 areas listed on the following pages.

4. Comments must be entered for any rating in the POOR to MARGINAL category.

5. **If a student falls within a rating which you feel is fair, but part of the descriptor does not apply, mark out the phrase which does not apply.**

6. Under the COMMENTS section, please write a brief overview of the student’s performance. Any problems which you encountered with the student, as well as praise, should be notated here. This is very helpful to the students so they will learn their strengths and weaknesses.

**IMPORTANT:** Please contact the Phlebotomy Program Director, Claude Rector, at once if you suspect or know of any student who is acting unprofessionally, i.e., sharing patient results with any unauthorized person, using inappropriate language, etc. Phone: (870) 338-6474 ext. 1079; email: crector@pccua.edu

SP08

291
# Phlebotomy Technician Student Evaluation

<table>
<thead>
<tr>
<th>Skill</th>
<th>Poor to Marginal Needs Improvement (0-69)</th>
<th>Average (70-79)</th>
<th>Above Average (80-89)</th>
<th>Excellent (90-100)</th>
<th>Grade (0-100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Punctuality and Attendance</td>
<td>Frequently late or absent and/or takes much too long at breaks.</td>
<td>Occasionally late or absent and/or takes too long on breaks.</td>
<td>Rarely late or absent and/or abuses break time.</td>
<td>Never late or absent and/or does not abuse break times.</td>
<td></td>
</tr>
<tr>
<td>4. Attitude</td>
<td>Fails to cooperate with others; does not recognize own limitations; and fails to respect others' professional roles.</td>
<td>Generally cooperates with others; occasionally fails to recognize own limitations; usually respects others' professional roles.</td>
<td>Cooperates with others; recognizes own limitations and respects others' professional roles.</td>
<td>Cheerfully and willingly performs all work assigned; expends extra effort to cooperate with others; recognizes own limitations; respects and complements others' professional roles.</td>
<td></td>
</tr>
<tr>
<td>5. Adaptability</td>
<td>Cannot function in unexpected or stressful situations. Extremely flustered at these times.</td>
<td>Able to function adequately in unexpected or stressful situations. Occasionally gets flustered.</td>
<td>Functions well in unexpected or stressful situations. Rarely gets flustered.</td>
<td>Excellent ability to function and perform under stressful or unexpected situations. Never gets flustered.</td>
<td></td>
</tr>
<tr>
<td>6. Quantity of Work</td>
<td>Does not complete work assigned at times or performs the minimal amount of work to meet objectives.</td>
<td>Performs a satisfactory amount of work which is expected of a student at this level.</td>
<td>Performs more work than most students at this level.</td>
<td>Performs more work than most students at this level.</td>
<td></td>
</tr>
<tr>
<td>7. Observing Laboratory Safety</td>
<td>Does not exercise caution when handling biologic specimens. Does not wash hands most of the time. Often forgets to disinfect work area or clean up spills. Does not observe lab safety rules. At risk of contracting AIDS or hepatitis.</td>
<td>Generally handles biologic specimens cautiously. Occasionally forgets to clean up spills, wash hands and/or disinfect work area. Has been found not observing lab safety rules.</td>
<td>Handles biologic specimens with appropriate caution. Washes hands at appropriate times. Cleans up spills and disinfects work area when finished. Observes lab safety rules.</td>
<td>Excellent technique in handling biologic specimens. Always washes hands at appropriate times. Always cleans up spills immediately and disinfects work area when finished. Always observes lab safety rules and works to assure the safety of others.</td>
<td></td>
</tr>
<tr>
<td>8. Observing Standard Precautions</td>
<td>Fails to follow Standard Precautions and infection control guidelines thereby putting self and patients at risk. Fails to change and/or wear gloves during blood collection. Constantly forgets to wear gloves when handling biological samples.</td>
<td>Generally follows Standard Precautions and infection control guidelines most of the time. Occasionally forgets to wear gloves when handling biological samples.</td>
<td>Follows Standard Precautions and infection control guidelines most of the time. Occasionally forgets to wear gloves when handling biological samples.</td>
<td>Practices Standard Precautions and follows infection control guidelines without fail. Always wears gloves when collecting blood and handling any type of biological sample.</td>
<td></td>
</tr>
</tbody>
</table>

Initials
<table>
<thead>
<tr>
<th>Skill</th>
<th>Poor to Marginal Needs Improvement (0-69)</th>
<th>Average (70-79)</th>
<th>Above Average (80-89)</th>
<th>Excellent (90-100)</th>
<th>Grade (0-100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. Maintenance of Work Area and Supplies</td>
<td>Usually does not restock work area, puts supplies and reagents away. Work area is cluttered most of the time.</td>
<td>Usually restocks work area, puts supplies away. Some clutter in the work area.</td>
<td>Almost always restocks work area, puts supplies away. Very little clutter in work area.</td>
<td>Always restocks work area, puts supplies away. No clutter in work area.</td>
<td></td>
</tr>
<tr>
<td>10. Clerical Skills</td>
<td>Due to the number of clerical errors this student has made, he/she is at risk of compromising patient care.</td>
<td>Occasionally makes a clerical error. Work is legible.</td>
<td>Rarely makes a clerical error. Work is neat and legible.</td>
<td>Never makes clerical errors. Work is extremely neat and legible.</td>
<td></td>
</tr>
<tr>
<td>11. Professional Appearance</td>
<td>Appearance/dress/hygiene not appropriate for professional environment</td>
<td>Appearance/dress/hygiene marginally appropriate. Needs change to the following area(s):</td>
<td>Appearance/dress/hygiene appropriate.</td>
<td>Appearance/dress/hygiene always excellent.</td>
<td></td>
</tr>
<tr>
<td>12. Oral Communication Skills</td>
<td>Poor communication skills. Patients/co-workers cannot understand student's communication.</td>
<td>Occasional difficulty in communication with patients/co-workers. Needs to work on the following area(s):</td>
<td>Good communication skills for the most part. Occasionally has difficulty in getting point across.</td>
<td>Communication skills excellent. Always able to get point across to patients and co-workers.</td>
<td></td>
</tr>
<tr>
<td>13. Interaction with Patients</td>
<td>Bedside manner unacceptable. Patients and/or visitors complain about their treatment.</td>
<td>Bedside manner is lacking for the following reason(s):</td>
<td>Good bedside manner. No patient complaints.</td>
<td>Excellent bedside manner. Makes patient and/or visitors comfortable. Patients and/or visitors compliment.</td>
<td></td>
</tr>
<tr>
<td>14. Professional Judgment</td>
<td>Unresponsive to criticism; proceeds on own without checking with phlebotomy instructor; overestimates abilities.</td>
<td>Generally responsive to criticism; occasionally fails to check with phlebotomy instructor before proceeding; occasionally overestimates abilities.</td>
<td>Responds readily to criticism; checks routinely before proceeding; seeks assistance when approaching limits of ability.</td>
<td>Seeks out input on performance; effectively carries out responsibilities within limits of ability; routinely seeks instructor advice and consultation.</td>
<td></td>
</tr>
<tr>
<td>15. Phlebotomy Technical Skills</td>
<td>Has not achieved minimum proficiency in phlebotomy; remediation is recommended</td>
<td>Has achieved minimum proficiency skills in phlebotomy.</td>
<td>Has exceeded minimum proficiency skills and is able to draw samples from easy to moderately difficult patients.</td>
<td>Excellent phlebotomy skills. Has exceeded minimum proficiency and is able to draw samples from all types of patients, including difficult draws.</td>
<td></td>
</tr>
<tr>
<td>16. Overall Grade</td>
<td>Failing</td>
<td>Average</td>
<td>Above Average</td>
<td>Excellent</td>
<td></td>
</tr>
</tbody>
</table>
Please use the space below to state general comments about the student's overall performance. Constructive criticisms help the student identify areas of strength they are good in and the areas in which more work is needed. They are to be viewed as helpful so that the student has a general idea as to which skills are acceptable and which skills to work harder on.

Comments: ____________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Evaluator's Signature __________________________ Date __________

Student's Signature __________________________ Date __________

(TO THE STUDENT: This document becomes part of your permanent file. Your signature is to verify that you have read this document and does not indicate agreement. Please initial each page of the evaluation.)

294

Program Director's Signature __________________________ Date __________