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Question: 1

According to CLSI standards, while the phlebotomist is inside the laboratory, the phlebotomist should wear

A. a long-sleeved laboratory coat/gown
B. a clean uniform
C. isolation gear
D. gloves and a mask

Answer: A

Explanation:
According to CLSI standards, while the phlebotomist is inside the laboratory, the phlebotomist should wear a long-sleeved laboratory coat/gown that is closed in the front. These garments should not be worn outside of the laboratory; they may be made of disposable material. Any open area, such as a cut or puncture, should be covered with an impermeable dressing to prevent contact with blood or other body fluids. The phlebotomist should wear gloves in areas set up to receive specimens.

Question: 2

If unable to obtain a specimen when attempting a venipuncture, which one of the following actions should generally be avoided?

A. Slightly withdrawing the needle.
B. Slightly inserting the needle further.
C. Probing laterally.
D. Removing the needle and starting over.

Answer: C

Explanation:
If unable to obtain a specimen when attempting a venipuncture, probing laterally should generally be avoided. It is painful and often unsuccessful and should only be attempted when the location of the vein has been established. If the vein is in the medial aspect of the antecubital fossa, then lateral probing should never be used because of the risk of hitting the brachial artery or a nerve. In some cases, the needle may need to be removed and an attempt is made at a different site.

Question: 3

The proper use of a disinfectant is on

A. skin
B. inanimate objects
C. mucous membranes
D. skin and inanimate objects

Answer: B

Explanation:
The proper use of a disinfectant is on inanimate objects, such as environmental surfaces and non-critical equipment, such as blood pressure cuffs. Disinfection differs from sterilization in that disinfection reduces the number of microorganisms but does not kill all of them. Sterilization is performed when all microorganisms and spores are destroyed. Sterilization is essential for critical items, which can readily spread infection because they contact sterile tissue and/or the vascular system, including venipuncture needles and IV catheters.

Question: 4

The vein that returns deoxygenated blood to the right atrium from the upper part of the body is the

A. Aorta
B. Saphenous
C. Superior vena cava
D. Inferior vena cava

Answer: C

Explanation:
The vein that returns deoxygenated blood to the right atrium from the upper (superior) part of the body is the superior vena cava. Both the inferior and the superior vena cavas bring blood to the right atrium, but the inferior vena cava brings blood from the lower (inferior) part of the body. The superior vena cava is relatively short and runs adjacent to the right mediastinum, collecting blood from the upper extremities, head, and neck. The inferior vena cava is much longer and traverses along the right side of the spinal column.

Question: 5

The initial screening test for thyroid dysfunction is usually

A. TSH
B. T3
C. T4
D. Anti-TPO

Answer: A

Explanation:
The initial screening test for thyroid dysfunction is usually TSH (thyroid stimulating hormone, normal range 0.4-4.2 mIU/L) because the pituitary gland releases TSH in response to levels of T3 (thyroxine) and T4 (triiodothyronine). If levels of T3 and T4 decrease (hypothyroidism), the TSH levels increase. If T3 and T4 levels increase (hyperthyroidism), the TSH levels decrease. Anti-TPO (anti-thyroperoxidase antibodies) is tested if thyroid dysfunction is believed due to an immune response.

Question: 6

Which of the following substances that may be present in collection tubes is NOT an anticoagulant?

A. Sodium fluoride
B. Sodium citrate
C. ACD (acid citrate dextrose)
D. Potassium oxalate

Answer: A

Explanation:
Sodium fluoride is not an anticoagulant but is an additive used to stabilize the level of glucose in a blood specimen. Other additives include thrombin, which promotes blood clotting, and gel, which serves as a barrier between serum and cells. Anticoagulants, used to prevent the blood from clotting in collection tubes, include sodium citrate, potassium oxalate, sodium and lithium heparin, K2-EDTA (with potassium), Na2-EDTA (with sodium), ACD (acid citrate dextrose), SPS (sodium polyanethol sulfonate), and CTAD (citrate, theophylline, adenosine, dipyridamole).

Question: 7

If the phlebotomist notes that an aliquot of serum contains a fibrin clot, the most likely reason is

A. improper transfer of serum from the specimen tube
B. the specimen was stored at the incorrect temperature
C. centrifugation was carried out before the clotting was complete
D. the centrifuge was unbalanced

Answer: C

Explanation:
If the phlebotomist notes than an aliquot of serum contains a fibrin clot, the most likely reason is that centrifugation was carried out before the clotting was complete. Fibrin clots are likely to form if hemolysis occurs, usually from mishandling a specimen or leaving the tourniquet on for too long. Fibrin clots may appear as globules (opaque or gelatinous) or strands in serum or plasma. In most cases, an aliquot with a fibrin clot needs to be discarded.

Question: 8

When performing filter paper collection for newborn screening, the phlebotomist should NOT

A. air dry the filter paper
B. warm the heel before puncture
C. wipe off the first blood drop
D. apply > 1 gtt per collection paper

Answer: D

Explanation:
When performing filter paper collection for newborn screening, the phlebotomist should not apply more than 1 gtt per collection paper. The first drop is wiped off, and only gentle pressure should be used to encourage further blood. After a large drop of blood collects, the filter paper is carefully touched to the blood drop (but not the skin) on one side of the collection paper only. After collection, the filter paper must be air dried for a minimum of three hours at room temperature.

Question: 9

Considering the order of the draw, which collection tube/bottle should be filled first?

A. Light blue-capped tube
B. Green-capped tube
C. Red and black-capped tube
D. Yellow-capped SPS tube

Answer: D

Explanation:
Considering the order of the draw, the collection tube that should be filled first is the yellow-capped (contains sodium polyanethol sulfonate [SPS]) blood culture tube to ensure that the specimen remains sterile with no contamination. This is followed by the light blue-capped tube (contains citrate additive). Next is the red and black-capped tube (which may or may not contain a clot activator or gel plasma separator) and last the green-capped tube (contains heparin).

Question: 10

The organization that develops and publishes the National Patient Safety Goals is

A. The Joint Commission
B. COLA
C. CAP
D. CLIA

Answer: A

Explanation:
The organization that develops and publishes the National Patient Safety Goals (NPSGs) is the Joint Commission, which is an accrediting agency for various types of medical facilities, including laboratories, critical access hospitals, behavioral health care, and ambulatory health care. NPSGS are published yearly. NPSGs for laboratories in 2015 include identifying patients correctly with 2 identifiers, improving staff communication by ensuring test results get to the correct person in a timely manner, and preventing infection by following CDC hand cleaning guidelines.

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