Method Comments Date Observed/verified

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| 1.Successful performance of routine patient testing, Verified by direct observation |  |  |  |
| 2. Medical Record audit of test result recording |  |  |  |
| 3. Review of Proficiency Tests, Quality Control or Instrument performance. |  |  |  |
| 4. Direct Observation of performance of Instrument maintenance |  |  |  |
| 5. Performance of External Proficiency Samples or Internal Blind Samples |  |  |  |
| 6. Problem Solving Skills |  |  |  |