

Trainee Nar	ne & Title:	
Location:		
Date:	Trainer:	
Test:		
Test:		

Trainer should review all material listed below and verify that the trainee has read the appropriate procedures or manufacturer instructions involved and understands them. File completed form appropriately.

Checklist	Date Completed	Trainee Initials	Trainer Initials		
1. Trainee locates, reads and understands policies and procedures for the PPM test(s).					
<ol><li>Trainer discusses principle of test procedure so that trainee understands scope and purpose of the test.</li></ol>					
3. Trainer identifies equipment, reagents, stains, and supplies to perform test and trainee knows location.					
<ol> <li>Trainer demonstrates compliance with standard safety precautions including appropriate PPE and trainee understands the precautions.</li> </ol>					
<ol><li>Trainee observes proper specimen collection, handling, and storage requirements for patient specimens.</li></ol>					
6. Trainee is able to reconstitute, prepare, and store reagents required for the PPM test.					
7. Trainee demonstrates knowledge of microscope components and proper microscope maintenance.					
8. Trainee observes test procedure performed by trainer.					
9. Trainee performs the procedure and should be able to:					
<ul> <li>Identify proper specimen type, use of the appropriate collection device, labeling, handling, and storage of specimens</li> </ul>					
b. Organize work area for testing including preparation of reagents					
c. Perform quality control (QC) samples, if available prior to performing patient samples					
d. Set up timer and follow incubation times per the PPM procedure					
e. Interpret results					
<ul> <li>f. Decontaminate and clean work area, including proper disposal of hazardous waste and sharps and microscope cleaning.</li> </ul>					
g. Document corrective action taken for errors in testing and unacceptable QC.					
10. Data entry, recording, and reporting test results. Trainee demonstrates the ability to perform:					
a. Test order and accessioning					
b. QC and interpretation of results, if applicable					
c. Corrective action					
d. Report results					
Frainee Comments:					
Frainee Signature:Date:					
Frainer Comments:					
Frainer Signature:Date:Date:					