MTS 2017

1. You are called by the house supervisor who notifies you that there was an employee exposure. She says that the employee will be coming up to the lab with the chart labels for both the source and the employee. What is a very important piece of information you need to get while you are still on the phone with her?

 a. The time that the exposure occurred.

b. The name and MRN of the source patient.

c. If the employee has been notified of the new urine drug screen collection process.

d. Which tests should be ordered.

2. After you have received the paperwok from the exposed employee in question 1, which tests should you order for the workup?

 a. HIV Screen, Hepatitis C RNA by PCR, Hepatitis B Surface Anitgen

 b. HIV-1 RNA Viral Load, Hebatitis B Surface Antigen, Hepatitis B Surface Anitbody.

 c. HIV Screen, Hepatitis C RNA by PCR, Hepatitis B Surface Antibody.

d. HIV Screen, Hepatitis C Antibody Screen, Hepatitis B Surface Antigen.

3. You need to collect blood cultures on a patient who is a difficult stick. You assess the patient and decide to use a syringe with a 25G needle. You are only able to collect 10 mL on the patient before their blood stops flowing into the syringe. Which blood culture bottles will you use for this collection?

 a. Aerobic Only

 b. Pedi Tube

c. Aerobic and Anaerobic

d. Pedi and Anaerobic

4. The ER draws the first set of blood cultures and sends it up through the tube station. You are processing that day and you know there are steps that need to be done to process them correctly. Which of these is not one of those steps?

a. Enter the fill volume and the site of collection in the Micro tab section of the order

b. Enter in NUR if it was a nurse collect or if you can read the initials enter the initials of the person collecting it.

c. Enter the time collected and the received time.

d. None of the above.

5. There is a very difficult stick in the PCU and the physician is requesting blood cultures. The patient has an altered mental status and is prone to randomly jerking their arm away. What is the most appropriate way to proceed?

a. Call a nurse or another phlebotomist into the room and ask him/her to assist you in holding the arm still so you can get a good scrub and stick so you don’t contaminate the cultures.

b. Tell the nurse that it’s impossible to get it, and your coworker will try later after they are medicated.

 c. Go ahead and just lay on the patients arm to keep it still. The nurses are too busy…

d. Do your best. There are two sets anyway, if one is positive we will know its just a contamination and not worry about it.

6. A large bag of tubes comes down from the phlebotomy team during morning run. You are trying to hurry and get the tubes received in, so you scan them and quickly distribute them to the different departments. You didn’t look at each tube’s test, but that’s ok right? Green is always chemistry anyway. What can potentially go wrong here?

 a. You just stuck and Ionized Calcium tube in the centrifuge

 b. You just spun down a blue top that was meant for a platelet clumper

 c. A lavender top BNP just went to Hematology and will not be delayed till it’s found.

d. All of the above. You need to slow down and pay attention.

7. It has been a very busy Saturday. And now a fellow BSWH employee comes in wanting someone to draw their blood for employee health. They were supposed to stop by on Wednesday but they forgot. All they need is a T-Spot, can we do that really quickly for them?

 a. We require them to have an appointment to draw them

 b. Of course! It’s the least we can do!

 c. Inform them that this test is only done at LabCorp

d. I’m sorry. T-Spots can only be drawn and sent out Monday through Friday. Can you come back during the week?

8. There is a really annoying beeping noise coming from the wall over near blood bank. I mean, really, really annoying. How do I make it stop?

a. That’s the Trauma Pager! Go read the pager message, make sure a blood banker knows it went off, over head page everyone the details, and make sure one of your team mates can drop everything and run down there.

b. Go push the big button on it. That’ll shut it off. How did that get there??

c. Pick it up and throw it in the trash. It’ll dull the sound.

d. Ignore it. The beeping is annoying, but not worth worrying about it.

9. An outpatient walks into the lab and needs his blood drawn for testing. What needs to happen for this process to be properly completed?

a. Patient must have registered with Access Services and have an open account with a valid visit number. If they do not have a standing order, they must have an armband. If they have a standing order it must be current and not expired.

b. They must have a valid order from a Texas Doctor that has the Doctor’s name and signature, patient’s name and date of birth, diagnosis written out, tests that need to be ordered.

c. The orders must be placed into the computer before drawing and a second person will need to verify that nothing is added, missed, or ordered incorrectly.

d. All of the above.

10. A rainbow comes down from the floor, and you are receiving them in. What is the proper way to overlay a label before you distribute them?

 a. Align the label so that the MRN at the bottom is still visible under the Soft label

 b. Align the label so the patient’s name at the top is visible under the Soft label

 c. Flag the label horizontally around so that you can still see most of the chart label

d. Don’t relabel at all. Just hand the tech a pile of labels and tubes. Its their job to match them up anyway.