

Chapter 1. Introduction to Blood Collection

Multiple Choice

Identify the choice that best completes the statement or answers the question.

- _____ 1. For purposes of accreditation, clinical laboratories may be inspected by which of the following?
 - A. College of American Pathologists (CAP)
 - B. The Joint Commission (TJC)
 - C. Commission on Laboratory Assessment (COLA)
 - D. All of the above

- _____ 2. An agency that assures quality care by hospitals is the:
 - A. The Joint Commission (TJC).
 - B. Centers for Disease Control and Prevention (CDC).
 - C. Occupational Safety & Health Administration (OSHA).
 - D. College of American Pathologists (CAP).

- _____ 3. The agency that provides proficiency testing for the laboratory is:
 - A. Health Maintenance Organization (HMO).
 - B. Preferred Provider Organization (PPO).
 - C. College of American Pathologists (CAP).
 - D. Diagnosis-Related Group (DRG).

- _____ 4. Which of the following occurs before testing of a specimen?
 - A. Preexamination variables
 - B. Postexamination variables
 - C. Management variables
 - D. Examination variables

- _____ 5. The program established by a health-care organization to guarantee quality patient care is:
 - A. quality control.
 - B. accreditation.
 - C. quality management.
 - D. continuous quality improvement.

- _____ 6. Which of the following are preexamination variables associated with blood collection?
 - A. Collecting samples
 - B. Transporting samples
 - C. Processing samples
 - D. All of the above

- _____ 7. The Health Insurance Portability and Accountability Act (HIPAA) primarily affects blood collectors when they are:
 - A. processing samples for shipment.
 - B. entering laboratory results into the computer.
 - C. scheduling patients for laboratory tests.
 - D. reporting test results to health-care providers.

- _____ 8. Under the Health Insurance Portability and Accountability Act (HIPAA), written consent by the patient is required to:
- A. perform point-of-care testing (POCT).
 - B. report test results to health-care providers.
 - C. generate electronic requisitions.
 - D. send samples to a reference laboratory.
- _____ 9. Patients who extend their arms after a blood collector has explained a venipuncture procedure are:
- A. giving informed consent.
 - B. waiving malpractice claims.
 - C. giving implied consent.
 - D. giving informed consent and waving malpractice claims.
- _____ 10. A blood collector could be held legally responsible for:
- A. nerve injury.
 - B. injuries when a patient faints.
 - C. misidentification of a patient.
 - D. All of the above
- _____ 11. Which of the following are required to complete the chain of infection?
- A. Source
 - B. Host
 - C. Mode of transmission
 - D. All of the above
- _____ 12. An infection contracted by a patient while in the hospital is termed:
- A. antibiotic-resistant.
 - B. staphylococcal.
 - C. healthcare-associated infection.
 - D. unfortunate.
- _____ 13. The recommended disinfectant for blood and body fluid contamination is:
- A. sodium hydroxide.
 - B. antimicrobial soap.
 - C. hydrogen peroxide.
 - D. sodium hypochlorite.
- _____ 14. Which of the following are transmission-based precautions isolation categories?
- A. Droplet
 - B. Contact
 - C. Airborne
 - D. All of the above
- _____ 15. A patient with tuberculosis would be placed in:
- A. protective isolation.
 - B. body fluid isolation.
 - C. droplet isolation.
 - D. airborne isolation.

- _____ 16. In addition to changing gloves between every patient, blood collectors should:
- A. change their laboratory coats.
 - B. disinfect the blood collection tray.
 - C. double-bag the samples.
 - D. sanitize their hands.
- _____ 17. Centrifuging an uncapped sample may produce a biologic hazard in the form of:
- A. vectors.
 - B. sharps contamination.
 - C. aerosols.
 - D. sample contamination.
- _____ 18. Which of the following factors are the responsibilities of the blood collector in managing total patient care?
- A. Correct patient identification
 - B. Patient preparation
 - C. Timing of collections
 - D. All of the above
- _____ 19. The Needlestick Safety and Prevention Act requires employers to:
- A. allow blood collectors to work flexible schedules.
 - B. involve blood collectors in the selection of safety devices.
 - C. provide blood collectors with glass capillary tubes.
 - D. test blood collectors annually for hepatitis B and HIV.
- _____ 20. Which of the following should a blood collector be tested for after an accidental needlestick?
- A. Hepatitis B virus (HBV)
 - B. HIV
 - C. Hepatitis C virus (HCV)
 - D. All of the above
- _____ 21. The majority of healthcare-associated infections are caused by which of the following?
- A. Personnel not following established infection control procedures
 - B. Blood transfusions carrying hepatitis
 - C. Contaminated surgical instruments
 - D. Radiation from radiology procedures
- _____ 22. Alcohol-based hand sanitizers may be used as a substitute for handwashing:
- A. only in a blood donation center.
 - B. only in certain patient care areas such as oncology or obstetrics and gynecology.
 - C. at any time.
 - D. when the hands are not visibly contaminated with blood or other body fluids.
- _____ 23. *Chain of custody* refers to the:
- A. method of infection control.
 - B. patient identification procedures.
 - C. documentation of handling for legal samples.
 - D. collection of samples for employment physicals.

- ___ 24. Blood collectors are involved in which of the following phases of the testing process?
- A. Preexamination and postexamination phases
 - B. Preexamination phase only
 - C. Preexamination and examination phases
 - D. Postexamination only
- ___ 25. Samples should remain covered during processing and storage before actual testing to:
- A. allow better fit in the centrifuge buckets.
 - B. reduce the chances of splashing, contamination, and evaporation.
 - C. reduce interference with the centrifuge's tachometer.
 - D. reduce the introduction of examination variables.
- ___ 26. Interstate shipping of infectious material is regulated by the:
- A. Centers for Disease Control and Prevention.
 - B. U.S. Department of Transportation.
 - C. Occupational Safety & Health Administration.
 - D. U.S. Department of Health.
- ___ 27. Which of the following are necessary when operating the centrifuge?
- A. Firmly securing the lid before operating
 - B. Making a final check of balancing before closing the lid
 - C. Checking for excessive vibration before walking away
 - D. All of the above
- ___ 28. A major safety concern when processing samples is the:
- A. production of aerosols.
 - B. use of transfer systems.
 - C. autoclaving of samples.
 - D. volume and type of sample.
- ___ 29. The needle holder that is part of the evacuated tube collection system is:
- A. disposed of in the general trash after removing the collection needle.
 - B. disposed of as a unit with the collection needle into a red bag.
 - C. disposed of as a unit with the collection needle into a sharps container.
 - D. made of a grade of plastic that does not require disposal in a sharps container.

True/False

Indicate whether the statement is true or false.

- ___ 30. Postexposure prophylaxis should be initiated within 24 hours for maximum benefit.
- ___ 31. Needle safety devices should be activated using both hands.
- ___ 32. Quality management is a process that guarantees accurate test results, timely delivery of samples to the laboratory, and quality patient care.
- ___ 33. Centers for Medicare & Medicaid Services is the laboratory regulating agency that is made up of laboratory, industry, and government personnel.

Chapter 1. Introduction to Blood Collection

Answer Section

MULTIPLE CHOICE

1. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-3
TOP: Clinical laboratory regulation
2. ANS: A PTS: 1 DIF: Level 1 OBJ: 1-3
TOP: Clinical laboratory regulation
3. ANS: C PTS: 1 DIF: Level 1 OBJ: 1-3
TOP: Clinical laboratory regulation
4. ANS: A PTS: 1 DIF: Level 1 OBJ: 1-2
TOP: Quality management variables
5. ANS: C PTS: 1 DIF: Level 1 OBJ: 1-5
TOP: Quality management variables
6. ANS: D PTS: 1 DIF: Level 2 OBJ: 1-2
TOP: Quality management variables
7. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-3
TOP: Documentation
8. ANS: B PTS: 1 DIF: Level 1 OBJ: 1-3
TOP: Documentation
9. ANS: A PTS: 1 DIF: Level 2 OBJ: 1-3
TOP: Legal issues
10. ANS: D PTS: 1 DIF: Level 2 OBJ: 1-3
TOP: Legal issues
11. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Biologic hazards
12. ANS: C PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Biologic hazards
13. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Biologic hazards
14. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Biologic hazards
15. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Biologic hazards
16. ANS: D PTS: 1 DIF: Level 2 OBJ: 1-4
TOP: Biologic hazards
17. ANS: C PTS: 1 DIF: Level 2 OBJ: 1-4
TOP: Biologic hazards
18. ANS: D PTS: 1 DIF: Level 1 OBJ: 1-1
TOP: Quality management
19. ANS: B PTS: 1 DIF: Level 1 OBJ: 1-4
TOP: Sharp hazards
20. ANS: D PTS: 1 DIF: Level 2 OBJ: 1-4
TOP: Sharp hazards
21. ANS: A PTS: 1 DIF: Level 2 OBJ: 1-4
TOP: Biologic hazards

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|-----|---|--------|--------------|----------------|
| 22. | ANS: D | PTS: 1 | DIF: Level 2 | OBJ: 1-4 |
| | TOP: Biologic hazards | | | |
| 23. | ANS: C | PTS: 1 | DIF: Level 1 | OBJ: 1-3 |
| | TOP: Legal considerations | | | |
| 24. | ANS: A | PTS: 1 | DIF: Level 2 | OBJ: 1-1 1-2 |
| | TOP: Factors influencing a blood sample | | | |
| 25. | ANS: B | PTS: 1 | DIF: Level 2 | OBJ: 1-4 |
| | TOP: Sample processing and transport | | | |
| 26. | ANS: B | PTS: 1 | DIF: Level 1 | OBJ: 1-4 |
| | TOP: Sample processing and transport | | | |
| 27. | ANS: D | PTS: 1 | DIF: Level 1 | OBJ: 1-4 |
| | TOP: Sample processing and transport | | | |
| 28. | ANS: A | PTS: 1 | DIF: Level 2 | OBJ: 1-4 |
| | TOP: Sample processing and transport | | | |
| 29. | ANS: C | PTS: 1 | DIF: Level 2 | OBJ: 1-4 |
| | TOP: Safety precautions | | | |

TRUE/FALSE

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|-----|-------------------------------------|--------|--------------|----------|
| 30. | ANS: T | PTS: 1 | DIF: Level 1 | OBJ: 1-4 |
| | TOP: Sharp hazards | | | |
| 31. | ANS: F | PTS: 1 | DIF: Level 2 | OBJ: 1-4 |
| | TOP: Sharp hazards | | | |
| 32. | ANS: T | PTS: 1 | DIF: Level 1 | OBJ: 1-5 |
| | TOP: Quality management | | | |
| 33. | ANS: F | PTS: 1 | DIF: Level 1 | OBJ: 1-3 |
| | TOP: Clinical laboratory regulation | | | |