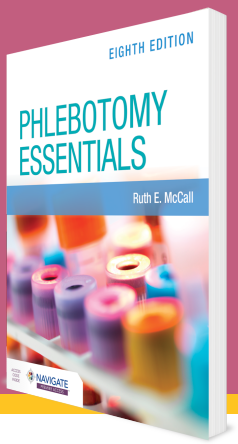
Test Bank for Phlebotomy Essentials with Navigate Premier Access 8th McCall



CHAPTER 2
CRITICAL THINKING QUESTIONS

Phlebotomy Essentials, Eighth Edition

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Quality Assurance and Legal Issues in Healthcare

1. Of the 17 specimens that a phlebotomist collected last week, 10 required redraws. What quality assurance implications does this have? What actionsmight be taken to remedy the situation?

2. A CBC specimen was rejected for testing by the hematology department. The tube was filled to the proper level completely and labeled correctly. What might have been the reason for rejection?

3. A glucose specimen was forgotten in a phlebotomist's tray. It was discovered 3 hours after it was drawn. Should the specimen be submitted for testing or should it be recollected? Explain your answer.

4. A new phlebotomist has been criticized by her supervisor for not meeting the 5 minutes/patient limit and has been told to increase speed or perhaps consider another type of work. The very next patient for a blood draw is hesitant to extend his arm for the venipuncture, but the phlebotomist proceeds to force the patient to cooperate and draws the blood quickly without any explanation. What are the legal and ethical issues associated with this situation?

5. As the phlebotomist is redirecting and probing in a patient's arm to get blood to flow into the tube, a better site in the adjacent vein is spotted.Thinking that the patient will not notice, the phlebotomist quickly with draws the needle from the vein and moves it to another prominent vein only centimeters away, without changing needles or explaining the situation to the patient. Fortunately, the blood comes quickly and the phlebotomist dismisses the patient, who is satisfied and unaware of what just happened. What are the safety issues and legal ramifications of what the phlebotomist did?

6. A phlebotomist goes to the ER to draw blood from an unconscious, badlyinjured accident victim. The anxious RN tells the phlebotomist to draw a "rainbow" and a blood alcohol level and adds that she will send the doctor's orders to the lab as soon as she gets them. The injured man does not yet have an ID band on his wrist because the phlebotomist was right there whenhe arrived. How should the phlebotomist identify the patient in order to meetNPSGs? Should the phlebotomist collect one of every color of the tubes on her tray (the "rainbow"), or should the phlebotomist wait for the doctor'sorders?