

## **TECHNOLOGIST IN BLOOD BANKING**

EXPERIENCE DOCUMENTATION FORM (Routes 2 & 4)

PART I (TO BE COMPLETED BY APPLICANT)			
Applicant's Name		ASCP Customer ID #	
Address		Email Address	
City, State, Zip Code		Last Four Digits of	Applicant's Social Security #
PART II (MUST BE COMPLETED AND SIGNED BY T ORDER TO BE ACCEPTABLE) SUBJECT: VERIFICATION OF EXPERIENCE FOR EXAMIN This individual, identified above, has applied for the I	I <b>ATION ELIGIBIL</b> Board of Certifi	.ITY cation Technologist in Bloc	
establish this applicant's eligibility for certification, the  1. PLEASE COMPLETE: EXPERIENCE (INCLUDING ON-	_	-	
Date experience started in Blood Banking:	Month	Day	Year
Date experience <b>ended</b> in Blood Banking:			Year
How many hours per week in Blood Banking?			other area(s)?
technologist in blood banking must be competent  SEROLOGIC AND/OR MOLECULAR TESTING  ABO grouping and Rh typing  Antibody detection and identification  Crossmatching  Direct antiglobulin tests  Tests for other blood group antigens  QUALITY CONTROL/ASSURANCE  Reagents, equipment  LABORATORY OPERATIONS  *Competency for the tasks indicated by the asterisks 3. BY SIGNING THIS FORM, I AS THE IMMEDIATE SUF	s may be demoi	ROUTINE PROBLEM SO Transfusion adverse re Immune hemolytic and Hemolytic disease of th Rh immune globulin st Indications for transfus  DONOR COLLECTION, Donor selection, prepa Processing and donor to Component preparation	emias ne fetus and newborn (HDFN)* udies* sion  PROCESSING, AND TESTING* uration, and collection testing on for storage and administration  nce, observation, or simulation.
COMPETENT IN EACH OF THE BLOOD BANKING AR  (Please Print) Immediate Supervisor or Laboratory Ma	REAS CHECKED (	ON THIS FORM.	Title
Immediate Supervisor or Laboratory Management* Signature			Date
Telephone Number			Email Address
Institution			
City, State BE SURE TO INCLUDE A LETTER OF AUTHENTICITY FRO			

STATE THAT THE EXPERIENCE DOCUMENTATION FORM WAS COMPLETED, SIGNED AND DATED BY YOUR IMMEDIATE SUPERVISOR OR LABORATORY MANAGEMENT\*. \*Management is defined as someone in a management role who can verify technical experience. See <a href="https://www.ascp.org/boc/us-documentation">www.ascp.org/boc/us-documentation</a> for submission instructions.

#### ASCP BOARD OF CERTIFICATION

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## **COMPETENCY STATEMENTS**

## TECHNOLOGIST IN BLOOD BANKING

IN REGARD TO LABORATORY OPERATIONS AND THE PERFORMANCE OF LABORATORY TESTS INVOLVING BLOOD GROUP IMMUNOLOGY, BLOOD GROUP SYSTEMS, BLOOD PRODUCTS, SEROLOGIC AND MOLECULAR TESTING, PHYSIOLOGY AND PATHOPHYSIOLOGY, LABORATORY OPERATIONS, AND TRANSFUSION PRACTICE AT CAREER ENTRY, THE TECHNOLOGIST IN BLOOD BANKING:

#### **APPLIES**

- principles of basic and special laboratory procedures using knowledge of standard operating procedures in order to perform tests
- knowledge to identify sources of error in laboratory testing
- knowledge of fundamental biological characteristics as they pertain to laboratory testing
- principles of theory and practice related to:
  - o management
  - safety
  - o education
  - research and development

#### **PREPARES**

- reagents and blood components according to established procedure
- instruments to perform tests
- controls appropriate for testing procedures

## **CALCULATES**

results from test data obtained from laboratory procedures

#### **SELECTS**

- procedural course of action appropriate for the type of sample and test requested
- reagents/blood components/donors according to established procedures
- appropriate controls for tests performed
- routine and special laboratory test procedures to verify test results according to established protocol
- instruments to perform tests appropriate to test methodology according to established procedures
- instruments for new laboratory procedures

#### **CORRELATES LABORATORY DATA**

- and clinical data to assess test results
- and quality control data to assess test results
- with other laboratory data to assess test results
- with physiologic processes to assess/validate test results and procedures

#### **EVALUATES**

- laboratory and clinical data to:
  - specify additional tests
  - o recognize common procedural/technical problems
  - verify test results
  - o check for possible sources of error
  - o determine possible inconsistent results
  - recognize health and disease states
  - assess validity/accuracy of procedures for a given test
  - o determine appropriate instrument adjustments
  - o make a final identification
  - take corrective action according to predetermined criteria
  - determine alternate methods for a given test
  - assure personnel safety

- various methods to establish new testing procedures
- laboratory operational procedures
- test results obtained by alternate methodologies
- laboratory data to establish reference range criteria for existing or new tests

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## **GUIDELINES FOR EVALUATING EXPERIENCE OF A CANDIDATE**

## **TECHNOLOGIST IN BLOOD BANKING**

To qualify for certification as a technologist in blood banking, the applicant should be competent to perform the tests and procedures indicated. The blood bank technologist should have the equivalent knowledge and skill to those of a graduate of an accredited Medical Laboratory Scientist program in the area of blood banking.

#### FOR EACH AREA OF EXPERIENCE LISTED BELOW, THE CANDIDATE SHOULD BE ABLE TO:

- 1. obtain necessary patient/donor history
- 2. recognize clerical errors in records and in the labeling of patient specimens and blood products
- 3. select appropriate samples, reagents, procedures, controls, and donor units
- 4. perform tests accurately and within a reasonable period of time
- 5. correctly observe, record, and interpret results produced by various methods
- 6. recognize and resolve routinely encountered problems including, but not limited to, those described below

SEROLOGIC AND/OR MOLECULAR TESTING			
AREA OF EXPERIENCE	SUGGESTED EXTENT OF EXPERIENCE		
	Discrepancies due to:		
	• subgroups		
ABO grouping and Rh typing	rouleaux		
	unexpected alloantibodies		
	cold autoantibodies		
	lack of expected antigens/antibodies		
	positive DAT		
	mixed field agglutination		
	variant Rh phenotypes/genotypes		
	Blood samples with:		
Antibody detection and	a single alloantibody		
identification	commonly encountered mixtures of alloantibodies		
	autoantibodies		
	Recipient with unexpected alloantibodies, rouleaux, cold and warm		
Crossmatching	autoantibodies		
	Donor with positive DAT		
	Selection of appropriate blood products		
	Electronic crossmatching		
Direct antiglobulin tests	Samples coated with:		
	• IgG		
	complement		
	both IgG and complement		
Tests for other blood group	Red cell phenotyping/genotyping		
antigens	Phenotyping of red cells with positive DAT		
QUALITY CONTROL/ASSURANCE			
AREA OF EXPERIENCE	SUGGESTED EXTENT OF EXPERIENCE		
Quality control/assurance	Performance of routine procedures to include:		
Quality Control/assurance	• temperature monitoring of incubators, water baths, refrigerators, and freezers		



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	inspection of instruments including, but not limited to centrifuges and cell	
	washers for correct performance	
	all required procedures on reagents	
ROUTINE PROBLEM SOLVING		
AREA OF EXPERIENCE	SUGGESTED EXTENT OF EXPERIENCE	
Transfusion adverse reactions	<ul> <li>Standard procedures for investigation of reactions due to:</li> <li>ABO incompatibility</li> <li>unexpected alloantibodies</li> <li>nonimmunologic causes</li> </ul>	
Immune hemolytic anemias	<ul> <li>Routine procedures to detect autoantibodies in plasma and eluate</li> <li>Use of monospecific antiglobulin reagents</li> <li>Recognition of need for further tests to identify underlying alloantibodies and to select blood for transfusion</li> </ul>	
Hemolytic disease of the fetus and newborn (HDFN)*  *Competency may be demonstrated through performance, observation, or simulation	<ul> <li>Routine procedures on maternal and infant blood samples including preparation of eluate and identification of antibody in eluate</li> <li>Selection of donor blood for exchange transfusion in cases due to incompatibility in ABO, Rh, and other blood group systems</li> </ul>	
Rh immune globulin studies*	Cases with:  • serologic weak D-positive mother	
*Competency may be	maternal plasma containing anti-D	
demonstrated through	maternal plasma containing alloantibodies other than anti-D	
performance, observation,	excessive fetal bleed and the number of Rhlg doses required	
or simulation	Rh-negative infant	
Indications for transfusion	<ul> <li>Criteria for transfusion of blood components (e.g., red cells, platelets, plasma, Rhlg) to various patient populations including neonates, infants, and adults</li> <li>Component modification and special indications for various medical conditions</li> </ul>	
LABORATORY OPERATIONS		
AREA OF EXPERIENCE	SUGGESTED EXTENT OF EXPERIENCE	
	Procedure/policy selection and evaluation	
Laboratory operations	Reagent and supply inventory	
	Safety	
	DONOR COLLECTION, PROCESSING, AND TESTING*	
	may be demonstrated through performance, observation, or simulation	
AREA OF EXPERIENCE	SUGGESTED EXTENT OF EXPERIENCE	
Donor selection, preparation, and collection	<ul> <li>Donor interview and deferral as appropriate</li> <li>Phlebotomies</li> <li>Donor adverse reactions</li> </ul>	
Processing and donor testing	<ul> <li>Tests for transmittable diseases</li> <li>Samples with ABO/Rh confirmation not in agreement with unit label</li> <li>Quarantine of blood and blood products</li> <li>Market withdrawals, recalls, and look-back investigation</li> </ul>	



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Component preparation for storage and administration

- Preparation of components for administration and storage
- Storage and transportation of blood and blood components
- Donor unit labeling