# MLAB 2360: Clinical I
# WBC & Platelet Estimates

## Competency Assessment Form

**Time Limit = 25 minutes**

Student: _____ Date: _____

Testing Location: _____

Start Time: _____ End Time: _____

Initial Test ☐

Retest ☐

| ***Action*** | ***Performed*** | ***Not Performed*** |
|---|---|---|
| **(Note: The skill is to be started by the instructor "You have been given an order from the physician for a differential count on your patient.")** | | |
| Dons appropriate PPE for the task | ☐ | ■ |
| Calculates the white blood cell estimate within 30% of expected values | ☐ | ■ |
| Calculates the platelet estimate within 30% of expected values | ☐ | ■ |
| Records results using correct units | ☐ | ☐ |
| Discards biohazardous waste | ☐ | ■ |

Total Checks: _____ _____

(Any check in a gray box indicates an unsatisfied critical criteria)

**Comments:**

_____

_____

_____

_____

No

_____

Instructor's Signature: _____

Student's Signature: _____

**Scoring:**

Total Possible Checks = 5

Minimum Required = 4

Total Checks Acquired = _____

Critical Criteria Met? ☐ ☐ Yes

***Pass*** ☐ ***Fail*** ☐

An action plan will be developed for the student if critical criteria are not met.
Action Plan: