



Letter of Phlebotomy Experience for California Phlebotomist Certification

The applicant is submitting ____ Letters of Phlebotomy Experience for different locations.

Applicant Full Name: _____

Applicant Address: _____

Applicant Telephone: _____ Applicant Email: _____

Employment and phlebotomy experience must be verifiable by the current CLIA Lab Director (MD, DO, or CLB only) even if work was performed under the previous CLIA Laboratory Director (MD, DO, or CLB). Only show dates within the last 5 years.

Dates of Employment (mm/dd/yy): ____/____/____ to ____/____/____ Percent of full-time work week ____%.

Additional work dates in same facility: ____/____/____ to ____/____/____ Percent of full-time work week ____%.

Name of Laboratory or Medical Office/Clinic: _____

Laboratory or Medical Office/Clinic Address: _____

Laboratory CLIA Certificate Number: _____

Laboratory or Medical Office business email (if/when applicable): _____

Laboratory or Medical Office business telephone (main business line): _____

Laboratory CLIA certificate (check one) Accreditation Compliance Waiver PPMP Total

Hours of on-the-job phlebotomy experience within the last 5 years only:

If less than 1040 hours: ____ hours If 1040 hours or greater: ____ hours

Attestation by the Current CLIA Laboratory Director of Office/Clinic Where Employed

The above named individual has on-the-job experience performing phlebotomy within the last 5 years, in accordance with the California Business and Professions Code section 1220(d)(1) or (d)(2)(A) and Title 17, California Code of Regulations §1030(3),(4), and has demonstrated proficiency in the following areas:

1. Selection of blood collection equipment appropriate to test requisitions.
2. Preparation of the patient and infection control.
3. Venipuncture from patients of varying ages, including pediatric/geriatric, and varying health/obesity status.
4. Skin puncture from patients of varying ages, including pediatric/geriatric, and varying health/obesity status.
5. Post puncture care.
6. Processing of blood containers after collection, including centrifugation.
7. Proper disposal of needles, sharps, and medical waste.

This applicant has also completed the following procedures on clinical patients of varying ages, health, and obesity status:

Applying for Limited Phlebotomy Technician (LPT) certification: Minimum 25 supervised successful skin punctures.

Applying for Certified Phlebotomy Technician I (CPT I) certification: Minimum of 50 supervised successful venipunctures, minimum 10 successful skin punctures, and supervised observation of two arterial punctures. Videos of actual arterial draws may be used by supervisor.

Applying for Certified Phlebotomy Technician II (CPT II) certification: Minimum of 20 supervised successful arterial punctures pursuant to Business and Professions Code 1220(d)(1) or (d)(2)(A) and Title 17, CCR §1030(3),(4). Meets all requirements as CPT I and has a minimum of 1040 hours on-the-job experience in phlebotomy within the last five years.

Legibly printed name of CLIA Laboratory Director (MD/DO/CLB only)

CLIA Laboratory Director signature

CLIA Laboratory Director License Number and Type (MD/DO/CLB only)

Date (mm/dd/yy)