

PROFESSIONAL EDUCATION AND RESOURCES COMPANY
CLASSROOM SKILLS LAB
PHLEBOTOMY AND IV LIVE STICK DOCUMENTATION RECORD

Student Name _____

Successful Blood Draw # 1

Date: _____ **Location of Draw:** Hand AC Forearm

No. of Attempts Until Successful: _____

Device Used: Vacutainer Butterfly Needle Syringe

Comments: _____

Instructor/Preceptor Signature: _____

Successful Blood Draw # 2

Date: _____ **Location of Draw:** Hand AC Forearm

Device Used: Vacutainer Butterfly Needle Syringe

No. of Attempts Until Successful: _____

Comments: _____

Instructor/Preceptor Signature: _____

Successful IV ACCESS #1

Date: _____ **Location of IV:** Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macro drip **Fluid Choice:** D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments: _____

Instructor/Preceptor Signature: _____

Successful IV ACCESS #2

Date: _____ **Location of IV:** Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macro drip **Fluid Choice:** D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments: _____

Instructor/Preceptor Signature: _____

Successful IV ACCESS #3

Date: _____ **Location of IV:** Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macro drip **Fluid Choice:** D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments: _____

Instructor/Preceptor Signature: _____

Successful IV ACCESS #4

Date: _____ **Location of IV:** Hand AC Forearm Upper Arm

Catheter Used: 22 ga 20 ga 18 ga 16 ga 14 ga

IV Set: Microdrip Macro drip **Fluid Choice:** D5W NS LR Saline lock

No. of Attempts Until Successful: _____

Comments: _____

Instructor/Preceptor Signature: _____

***Note: Students are required to complete the above minimums successful prior to being released to initiate IV's or perform phlebotomy in the clinical setting. All documentation must be complete and be placed in the student file for the course.**