

2026 POINT OF CARE TESTING

Name:	Employee ID#:
Unit:	Title:

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Preceptor or other verified personnel date and initial completed skill.**

Skill/Learning Not all skills are applicable to all Nursing areas – if not applicable mark as N/A	Completed Online Module	Date Completed (or N/A)	Verifier Initials
AdenoPlus Checklist	DAHS-NSCAPRPS26-POCT		
Bacterial Vaginosis (OSOM BV Blue) Test Checklist	DAHS-NSCBVRT26-POCT		
CoaguChek Checklist	DAHS-NSCCOAGU26-POCT		
Cobas® Liat® System Checklist	DAHS-NSCCOBAS26-POCT		
HemoCue Hb 201 DM Checklist	DAHS-NSCHEMOC26-POCT		
Hemoglobin A1c (HbA1c) Afinion Checklist	DAHS-NSCHEMOG26-POCT		
Hemaprompt FG Checklist	DAHS-NSCHPFG26-POCT		
Lactate Plus Checklist	DAHS-NSCLPMSM26-POCT		
Nova StatStrip Checklist	DAHS-NSCNOVA26-POCT		
pH Paper Checklist	DAHS-NSCPHP26-POCT		
Urine Dipstick Clinitek Status+ Connect Checklist	DAHS-NSCURID26-POCT		
Urine Drug Screen Abbott iScreen Checklist	DAHS-NSCALERE26-POCT		
Urine Pregnancy Test Checklist	DAHS-NSCURIP26-POCT		

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PRECEPTOR SIGNATURE:

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:

Initials:	Print Name:	Signature:

PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health Policies/Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

Name:	Signature:	Date:
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AdenoPlus Checklist # DAHS-NSCAPRPS26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health policy POCT 57: AdenoPlus by Quidel QuidelOrtho Learning hub QuickVue Adenoviral conjunctivitis test video		
<input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describes sample collection and handling. <input type="checkbox"/> Demonstrates proper QC and patient testing procedure of AdenoPlus test <input type="checkbox"/> Correctly interprets patient and quality control results <input type="checkbox"/> Verifies test kit is functioning properly, supplies and reagents are not outdated, and quality controls are within acceptable limits <input type="checkbox"/> Describe Quality Control Remedial Action for out-of-control results		

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Bacterial Vaginosis (OSOM BV Blue) Rapid Test Checklist # DAHS-NSCBVRT26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy POCT.58, Bacterial Vaginosis Rapid Test by OSOM BV Blue Test, Sekisui Diagnostics		
<ul style="list-style-type: none"> <input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describes proper sample collection of vaginal fluid <input type="checkbox"/> Demonstrates proper test procedure <input type="checkbox"/> Correctly interprets results <input type="checkbox"/> Verbalizes understanding of valid results (internal procedural controls). Articulates appropriate action for out-of-control results <input type="checkbox"/> Demonstrates quality control testing using Sekisui OSOM BVBLUE positive and negative sialidase controls. Describes stability of controls and when testing must be performed 		

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CoaguChek Checklist # DAHS-NSCCOAGU26-POCT	Date	Verifier Initials
REFERENCES:		
1. UC Davis Health Policy POCT.42: Prothrombin Time (INR), Whole Blood by Roche CoaguChek XS		
<ul style="list-style-type: none"> <input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describe the Roche CoaguChek XS Meter components and their function <input type="checkbox"/> Describe the indications for use <input type="checkbox"/> Describe specimen collection criteria and limitations <input type="checkbox"/> Describe storage requirements, stability criteria, and handling of testing strips <input type="checkbox"/> Demonstrate how to ensure matching of meter and test strips with the code chips <input type="checkbox"/> Describe the integrated quality controls <input type="checkbox"/> Describe remedial action for Out-of-Control Results 		

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Cobas® Liat® System Checklist	# DAHS-NSCCOBAS26-POCT		
REFERENCES: 1. UC Davis Health Policy POCT.59: Roche Cobas Liat System, Molecular testing of Infectious Disease		Date	Verifier Initials
<input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describes sample collection and handling <input type="checkbox"/> Describe the stability and handling of the reagent kits <input type="checkbox"/> Verbalizes understanding of valid results. Articulates what to do when an indeterminate or invalid result occurs <input type="checkbox"/> Direct observations of routine patient testing, including, as applicable, patient identification and sample processing and testing <input type="checkbox"/> Demonstrates routine cleaning of instrumentation and immediate work area			

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HemoCue Hb 201 DM Checklist # DAHS-NSCHEMOC26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy POCT.43: Hemoglobin, Whole Blood by HemoCue Hb 210 DM 2. HemoCue Hb 201 DM Analyzer Instructions for Use Manual, HemoCue 3. HemoCue Hb 201 DM Analyzer & HemoCue DM Docking Station Reference Manual, HemoCue 4. HemoCue Hb 201 Microcuvettes Package Insert, HemoCue 5. HemoCue Cleaner Package Insert, HemoCue 6. HemoCue Technical Letter No 2 September 2010, HemoCueAB 7. R & D Systems R & D Glu/Hgb Control Package Insert, 6/07, R & D Systems, Inc.		
<ul style="list-style-type: none"> <input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describe how to handle the microcuvettes and proper sampling technique <input type="checkbox"/> Describe the storage and stability of the liquid controls <input type="checkbox"/> Demonstrate how to perform daily QC using liquid controls <input type="checkbox"/> Describe Quality Control Remedial Action for out-of-control results <input type="checkbox"/> Describe how to perform patient testing on the HemoCue Hb 201 DM Analyzer <input type="checkbox"/> Describe what to do when you have a critical value <input type="checkbox"/> Describe the limitations of the HemoCue HB 201 DM procedure <input type="checkbox"/> Describe the maintenance for the HemoCue Hb 201 DM Analyzer 		

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Hemoglobin A1c Afinion™ 2 Analyzer Checklist # DAHS-NSCHEMOG26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health POCT Policy 65:Hemoglobin A1c: Whole Blood: Afinion 2 Analyzer		
<input type="checkbox"/> Completes online module and reads associated policy. <input type="checkbox"/> Demonstrates routine patient test performance, including as applicable, patient identification and preparation, specimen collection, handling, processing, and testing. <input type="checkbox"/> Records and reports test results, including reporting critical results as applicable. <input type="checkbox"/> Describes limitations of the procedure <input type="checkbox"/> Performs instrument maintenance and function tests, as applicable. <input type="checkbox"/> Describes problem solving process.		

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HemaPromt FG, Fecal & Gastric Occult Checklist # DAHS-NSCHPFG26-POCT	Date	Verifier Initials
REFERENCES: 1. Department of Pathology & Laboratory Medicine Policy POCT.21		
<input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Direct observations of routine patient test performance, including, as applicable, patient identification and preparation, specimen collection, handling, processing and testing <input type="checkbox"/> Monitoring the recording and reporting of test results, including, as applicable reporting of critical results <input type="checkbox"/> Describes the limitations of procedure <input type="checkbox"/> Direct observation of performance of instrument maintenance and function checks, as applicable <input type="checkbox"/> Evaluation of problem-solving skills		

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Lactate Plus Checklist # DAHS-NSCLPMSM26-POCT	Date	Verifier Initials
REFERENCES: 1. Department of Pathology & Laboratory Medicine POCT Manual POCT.66		
<input type="checkbox"/> Completes online module and associated policy. <input type="checkbox"/> Direct observations of routine patient test performance, including, as applicable, patient identification and preparation, specimen collection, handling, processing and testing. <input type="checkbox"/> Monitoring the recording and reporting of test results, including as applicable reporting of critical results. <input type="checkbox"/> Describes the limitations of the procedure. <input type="checkbox"/> Direct observation of performance of instrument maintenance and function checks, as applicable. <input type="checkbox"/> Evaluation of problem-solving skills.		

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Nova StatStrip Checklist # DAHS-NSCNOVA26-POCT	Date	Verifier Initials
References: 1. Instructions for Use: Nova Biomedical StatStrip Glucose Hospital Meter System. Version 1.86. UC Davis Health 2. UC Davis Health Policy POCT.51: Glucose, Whole Blood by Nova StatStrip Glucose Hospital Meter System		
<ul style="list-style-type: none"> <input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describes the Nova StatStrip Glucose Hospital Meter System components and their functions <input type="checkbox"/> Describes the stability and handling of glucose test strips and controls, including open dating, expiration dates and procedure notes <input type="checkbox"/> Describes specimen requirements: amount, types, and recommended anticoagulants <input type="checkbox"/> Describes the conditions when it is not appropriate to perform a glucose fingerstick <input type="checkbox"/> Demonstrates how to perform quality control testing using one control solution. Describes when QC must be run, what QC Lockout is, and what to do if the QC test results FAIL <input type="checkbox"/> Demonstrate how to run a patient test. (Using one control run as a patient) <input type="checkbox"/> Describes the procedure for critical values and questionable patient test results <input type="checkbox"/> Describes the limitations of the Nova StatStrip Glucose Hospital Meter System glucose test results <input type="checkbox"/> Demonstrates how to review results on the meter <input type="checkbox"/> Describes the routine maintenance for the Nova StatStrip Glucose Hospital Meter System, docking station, and accessory box 		

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pH Paper Checklist # DAHS-NSCPHP26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy POCT.22: pH Fluid Nitrazine Paper 2. UC Davis Health Policy POCY.23: pH Fluid by pHyracid Paper 3. Instructions for Use: pHizatest Product Insert. Rev. Nov 15, 2019 4. pHizatest Specification Sheet, version #4, 06-19-2013. 5. Micro Essentials pHizatest Product Information Sheet, Rev. 12-20-12. 6. Micro Essential Hydrion Product Information Sheet, Rev. 10-16-13.		
<input type="checkbox"/> Completes online module and reads associated policies <input type="checkbox"/> Describes indications of use for each paper type <input type="checkbox"/> Describes the stability and handling, including open dating, expiration dates and quality control <input type="checkbox"/> Describes/demonstrates how to perform and result a test <input type="checkbox"/> Describes the limitations of the procedure		

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Urinalysis dipstick Clinitek Status+ Connect # DAHS-NSCURID26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy: POCT.54: Urine Dipstick by Siemens Uristix and Multistix 10SG Reagent Strips 2. MAS UA Control, Package insert, Thermo Scientific. 3. Multistix 10 SG Reagent Strips, Package insert, Siemens.		
<input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Collects appropriate urine specimen in clean, dry container <input type="checkbox"/> Demonstrates proper test procedure <input type="checkbox"/> Properly compares the reagent areas to the corresponding color chart on the bottle label at the times specified <input type="checkbox"/> Demonstrates quality control testing using the MAS UA controls. Describes stability of controls and when controls must be run <input type="checkbox"/> Verbalizes understanding of procedure to follow when control results are out-of-range		

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Urine Drug Screen by Abbott iScreen® # DAHS-NSCALERE26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy POCT.60: Urine Drug Screen by Abbott iCup DX Pro 2		
<input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Describes proper sample collection of urine and demonstrates importance of appropriate collection times <input type="checkbox"/> Demonstrates or describes proper test procedure <input type="checkbox"/> Correctly interprets results <input type="checkbox"/> Verbalizes understanding of valid results (internal procedural controls) and articulates appropriate action for out-of-control results <input type="checkbox"/> Describes external quality control testing procedure, stability of reagents and requirements of performance		

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Urine Pregnancy Test Checklist # DAHS-NSCURIP26-POCT	Date	Verifier Initials
REFERENCES: 1. UC Davis Health Policy POCT.41: hCG Pregnancy Test, Urine by Sure-Vue hCG 2. Sure-Vue® Urine hCG, Package Insert, Fisher Scientific Company 3. Sure-Vue® hCG Urine Control Set, Package Insert, Fisher Scientific Company		
<ul style="list-style-type: none"> <input type="checkbox"/> Completes online module and reads associated policy <input type="checkbox"/> Collects appropriate urine specimen in clean, dry container. Equilibrate urine and test device to room temperature <input type="checkbox"/> Demonstrates proper test procedure <input type="checkbox"/> Correctly interprets results <input type="checkbox"/> Verbalizes understanding of valid results (internal procedural controls). Articulates what to do when there is no control line visible <input type="checkbox"/> Demonstrates quality control testing using Sure-Vue positive and negative hCG controls. Describes stability of controls and when they must be run 		

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