

CCP PHLEBOTOMY PROGRAM MLT102 VENUPANTURE SHEET

Phlebotomist-trainer should **date and initial** each successful unassisted venipuncture by the student. Please do not document patients' names on this form. Student requires to perform 100 unassisted successful VP.

Student's name: _____ Clinical site: _____

1	26	51	76
2	27	52	77
3	28	53	78
4	29	54	79
5	30	55	80
6	31	56	81
7	32	57	82
8	33	58	83
9	34	59	84
10	35	60	85
11	36	61	86
12	37	62	87
13	38	63	88
14	39	64	89
15	40	65	90
16	41	66	91
17	42	67	92
18	43	68	93
19	44	69	94
20	45	70	95

21	46	71	96
22	47	72	97
23	48	73	98
24	49	74	99
25	50	75	100

Supervisor's signature: _____ Supervisor's name: _____