

University of Colorado Hospital – Clinical Laboratory
Point of Care Testing Program
Manual Urinalysis by Siemens Reagent Strip Competency

Performance Criteria	Meets Criteria Please Initial		Comments
	Yes	No	

Knowledge Demonstration:			
States what the optimal specimen for this assay is and why only fresh urine should be used.			
Knows why a urine specimen that is over an hour old is unacceptable.			
Is familiar with interfering substances and how they affect the assays on the test strip.			
Skill Demonstration:			
Checks expiration date of reagent strips. Stores reagent strips at room temperature. Dates when opened. Knows reagents are good until expiration date on bottle.			
Checks expiration of controls. Stores controls in the refrigerator when not in use. Dates and initials controls when opened. Knows controls are good until manufacturer expiration date on the bottle.			
Performs Quality Control by running the two control levels when a new box of reagent strips is opened and monthly for test strips in use more than 30 days. Positive and negative controls may also be randomly run with patient tests.			
Knows that all reagent strips must remain in the original bottle with cap tightly shut.			
Performs complete processing of a patient sample to the point of result interpretation by correctly timing each color block test area.			
Knows to dip the strip completely, but briefly (no more than one second) to avoid dissolving out the reagents on the strip.			
Knows the importance of removing excess urine from the test strip and holding the strip horizontal to prevent mixing of reagent areas.			
Knows how to interpret the assays on the strip using the color blocks without soiling the chart with urine.			
Records strip lot number, quality control, and patient results on the control/patient result log.			
Disposes of test strips and patient specimen in red trash receptacle, according to UCH policy.			
Knows how to access the Manual Urinalysis by Siemens Reagent Strips procedure and reads the procedure.			

Employee Name (**print**): _____ Employee #: _____ Unit: _____

Employee Signature: _____ Position: _____

Evaluator Signature: _____ Initials: _____ Date: _____