

Venipuncture, injection, and skin puncture certification

This is to certify that _____ has demonstrated and completed on the job training as a *Medical Assistant* under the auspices of the undersigned as follows and in compliance with *Business and Professions Code section 2069* and *2070*:

- A. Ten clock hours of training in venipuncture and skin puncture for the purpose of drawing blood.
- B. Ten clock hours of training in administering injections and performing skin tests.
- C. Satisfactory performance by the trainee of at least 10 of each of the following procedures: intramuscular injections, subcutaneous injections, skin tests, venipunctures, and other skin punctures performed in the office.
- D. Training A through C above, shall include knowledge of the following:
 - Pertinent anatomy and physiology appropriate to the procedure
 - Choice of equipment
 - Proper technique including sterile technique
 - Hazards and complications
 - Post treatment and test patient care
 - Emergency procedure
 - California law and regulations for medical assistants

Physician's signature

Date

Provider name: _____

Office address: _____

Office phone number: _____