

CALREGIONAL PHLEBOTOMY PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Which statement demonstrates integrity in obtaining a blood sample?**
 - A. A phlebotomist who gets a specimen for a doctor after taking shortcuts
 - B. A phlebotomist who follows the rules when obtaining a blood sample
 - C. A phlebotomist admits making a mistake
 - D. A phlebotomist who takes advantage of learning situations
- 2. Which antiseptic is most commonly used to cleanse the venipuncture site?**
 - A. Hydrogen peroxide.
 - B. Povidone-iodine.
 - C. 70% isopropyl alcohol.
 - D. Soap and water.
- 3. Which test is associated with using a 24-hour urine specimen to assess kidney function?**
 - A. Glucose tolerance test
 - B. Fibrin split products
 - C. Culture and sensitivity
 - D. Creatinine clearance
- 4. Transporting blood specimens with the stopper up has nothing to do with which of the following?**
 - A. Maintaining the sterility of the sample
 - B. Encouraging complete clot formation
 - C. Minimizing stopper-caused aerosols
 - D. Reducing agitation-caused hemolysis
- 5. What does the suffix of the term glycolysis mean?**
 - A. Breakdown
 - B. Against
 - C. Glucose
 - D. Living

- 6. Which of the following is not a valid reason to reject a specimen for analysis?**
- A. A bilirubin specimen is icteric
 - B. CBC specimen contains clots
 - C. A fasting glucose specimen is lipemic
 - D. An electrolyte specimen is hemolyzed
- 7. Which sample contains fibrinogen?**
- A. Plasma.
 - B. Serum.
 - C. Red blood cells.
 - D. Platelets.
- 8. Which term means inflammation of the liver?**
- A. Cystitis.
 - B. Nephritis.
 - C. Neuritis.
 - D. Hepatitis.
- 9. Which duty is least likely to be performed by local public health agencies?**
- A. Diabetes screening
 - B. Immunization and vaccination
 - C. Licensure of healthcare personnel
 - D. Venereal disease screening
- 10. Which statement accurately describes syringe versus vacuum collection methods?**
- A. Vacuum collection uses a syringe to draw blood into a collection syringe and then transfer to tubes.
 - B. Vacuum collection uses evacuated tubes with negative pressure; syringe method uses a syringe to draw blood into a collection syringe and then transfer to tubes; both require proper technique and safety.
 - C. Vacuum collection uses evacuated tubes with no transfer required.
 - D. Both methods require no safety practices.

Answers

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1. B
2. C
3. D
4. A
5. A
6. A
7. A
8. D
9. C
10. B

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Explanations

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1. Which statement demonstrates integrity in obtaining a blood sample?

- A. A phlebotomist who gets a specimen for a doctor after taking shortcuts
- B. A phlebotomist who follows the rules when obtaining a blood sample**
- C. A phlebotomist admits making a mistake
- D. A phlebotomist who takes advantage of learning situations

Integrity in obtaining a blood sample means doing the right thing by following the established procedures every time. In phlebotomy, this means correctly identifying the patient, using the proper collection method and order, labeling accurately, and handling specimens according to policy. When a phlebotomist sticks to the rules, patient safety is protected and the sample's accuracy and reliability are preserved, which really shows responsible, ethical practice. Shortcuts undermine safety and accuracy because they skip essential steps, potentially harming the patient or compromising the specimen. Admitting a mistake is important for accountability, but it's about addressing an error after the fact rather than showing the act of obtaining the sample correctly. Taking advantage of learning situations would be unethical rather than principled behavior.

2. Which antiseptic is most commonly used to cleanse the venipuncture site?

- A. Hydrogen peroxide.
- B. Povidone-iodine.
- C. 70% isopropyl alcohol.**
- D. Soap and water.

Using a fast-acting, quickly drying antiseptic is essential for venipuncture. 70% isopropyl alcohol is preferred because it rapidly reduces skin microbes and dries quickly, leaving little residue that could interfere with the blood sample or tests. Hydrogen peroxide isn't ideal for skin prep of puncture sites due to potential tissue irritation and because it's not as effective for antiseptics on intact skin. Povidone-iodine takes longer to dry and can leave residues that affect certain tests or stain the skin. Soap and water cleans but does not provide ongoing antiseptic action at the puncture site. For these reasons, the most common choice is 70% isopropyl alcohol.

3. Which test is associated with using a 24-hour urine specimen to assess kidney function?

- A. Glucose tolerance test
- B. Fibrin split products
- C. Culture and sensitivity
- D. Creatinine clearance**

Creatinine clearance uses a 24-hour urine collection to estimate how well the kidneys are filtering blood. Creatinine, a waste product produced at a relatively steady rate by muscle, is filtered by the kidneys and excreted in urine with little reabsorption. By measuring how much creatinine is excreted in urine over an entire day and comparing it with the creatinine level in the blood, you get an estimate of the glomerular filtration rate (GFR), which reflects overall kidney function. That 24-hour collection is key because it provides the total amount cleared in a day, allowing calculation of clearance in milliliters per minute. For this test to be accurate, the collection must be truly complete over the full 24 hours; missing urine or delays can skew results. While newer practice often uses estimates like eGFR from a single blood sample, creatinine clearance from a 24-hour urine specimen remains a direct, practical way to assess kidney filtration capacity. The other options measure different physiological processes—glucose tolerance tests carbohydrate metabolism after a glucose load, fibrin split products relate to coagulation and fibrinolysis, and culture and sensitivity identify pathogens and guide antibiotics—so they are not about kidney filtration in a 24-hour urine context.

4. Transporting blood specimens with the stopper up has nothing to do with which of the following?

- A. Maintaining the sterility of the sample**
- B. Encouraging complete clot formation
- C. Minimizing stopper-caused aerosols
- D. Reducing agitation-caused hemolysis

The key idea here is that the position of the stopper during transport mainly affects how much the sample is exposed to air and how easily it might be disturbed, which can influence clotting behavior, aerosol formation, and wear from agitation. Sterility, however, is determined by how the specimen was collected and how well the container remains a closed system. If aseptic technique was used and the tube stays closed, simply transporting with the stopper oriented upward does not inherently determine whether the sample stays sterile. In other words, sterility is about preventing microbial ingress through proper closure and collection technique, not about whether the stopper is lifted during transport. The other factors—air exposure affecting clot formation, potential aerosols from a compromised or open cap, and agitation-related hemolysis—are more directly linked to how the stopper is managed during handling.

5. What does the suffix of the term glycolysis mean?

- A. Breakdown**
- B. Against
- C. Glucose
- D. Living

Understanding the suffix: "-lysis" denotes breaking down or destruction. When attached to "glyco-" (relating to sugar), glycolysis literally means "sugar breakdown." In this pathway, glucose is broken down to release energy stored in its bonds, forming ATP and NADH. The other options don't describe a suffix meaning: "against" would come from a prefix like anti-, "glucose" is the sugar involved rather than the action, and "living" isn't related to the term.

6. Which of the following is not a valid reason to reject a specimen for analysis?

- A. A bilirubin specimen is icteric**
- B. CBC specimen contains clots
- C. A fasting glucose specimen is lipemic
- D. An electrolyte specimen is hemolyzed

The main idea here is that whether a specimen is rejected depends on how that condition interferes with the specific test being performed. For a bilirubin test, icterus (the yellow color from high bilirubin) is not a reason to reject. In fact, the very condition you're trying to measure is present in the specimen, and there are methods that can quantify bilirubin despite the icteric appearance. So an icteric bilirubin specimen does not invalidate the test — it simply reflects the result you're trying to obtain. In contrast, the other scenarios describe issues that do compromise certain analyses: clots in a CBC prevent accurate cell counting because clots trap cells and distort morphology; a lipemic sample can interfere with colorimetric measurements used in many tests (including glucose assays); and a hemolyzed electrolyte specimen releases intracellular contents that skew electrolyte levels, making the result unreliable. These are valid reasons to reject for the respective tests. So the not-a-valid-reject reason here is an icteric bilirubin specimen, because it aligns with what you're measuring and doesn't inherently invalidate the bilirubin analysis.

7. Which sample contains fibrinogen?

- A. Plasma.
- B. Serum.
- C. Red blood cells.
- D. Platelets.

Fibrinogen is a soluble coagulation factor that circulates in blood plasma. During clot formation, thrombin converts fibrinogen into fibrin to form the clot. When blood is allowed to clot and serum is collected, fibrinogen is consumed and removed from the liquid portion, so serum lacks fibrinogen. If you need to assess fibrinogen or coagulation factors, you use plasma, which is the anticoagulated liquid portion of blood and still contains fibrinogen. Red blood cells and platelets are cellular components and do not provide the fibrinogen that remains in plasma.

8. Which term means inflammation of the liver?

- A. Cystitis.
- B. Nephritis.
- C. Neuritis.
- D. Hepatitis.

In medical terms, the suffix -itis signals inflammation, and when it's attached to a root that names an organ, it means inflammation of that organ. For the liver, the root is hepat-, so inflammation of the liver is hepatitis. The other terms refer to inflammation of different organs: cystitis is inflammation of the bladder (cyst- = bladder), nephritis is inflammation of the kidneys (nephr- or nephro- = kidney), and neuritis is inflammation of a nerve (neur- = nerve). So the term that means inflammation of the liver is hepatitis.

9. Which duty is least likely to be performed by local public health agencies?

- A. Diabetes screening
- B. Immunization and vaccination
- C. Licensure of healthcare personnel
- D. Venereal disease screening

The key idea is that local public health agencies focus on activities that protect and promote the health of the community, such as screening for diseases, vaccination programs, and STI screening. These are direct public health services aimed at preventing illness and controlling outbreaks at the population level. Diabetes screening is a preventive health service that local agencies commonly organize or support to identify people at risk and connect them to care. Immunization and vaccination programs are classic public health duties, aiming to prevent communicable diseases and protect the community. Venereal disease screening fits with public health goals of detecting and treating sexually transmitted infections to curb spread. Licensure of healthcare personnel, on the other hand, is a regulatory function typically handled by state licensing boards or agencies. It involves setting professional standards, validating qualifications, administering exams, and issuing licenses. Local health departments don't grant licenses to individuals; that authority resides at the state level. Therefore, licensure of healthcare personnel is the least likely duty for local public health agencies.

10. Which statement accurately describes syringe versus vacuum collection methods?

- A. Vacuum collection uses a syringe to draw blood into a collection syringe and then transfer to tubes.
- B. Vacuum collection uses evacuated tubes with negative pressure; syringe method uses a syringe to draw blood into a collection syringe and then transfer to tubes; both require proper technique and safety.**
- C. Vacuum collection uses evacuated tubes with no transfer required.
- D. Both methods require no safety practices.

Two main blood collection approaches differ in how the blood gets into the tubes. In the vacuum (evacuated-tube) method, tubes are pre-evacuated to create negative pressure, so when the needle is inserted, blood is drawn directly into the tube without using a separate syringe or a transfer step. In the syringe method, a sterile syringe is used to aspirate blood into a collection syringe, and then the blood is transferred into one or more evacuated tubes. That extra transfer step is what distinguishes it from the vacuum method. Both approaches require proper technique and safety practices, including correct needle handling, avoiding contamination, following tube inversion and labeling guidelines, and using appropriate personal protective equipment. The statement also correctly notes that safety is essential in both methods. Why the other options aren't as accurate: stating that vacuum collection uses a syringe to draw into a collection syringe describes the syringe method, not vacuum collection; claiming no transfer is required in all vacuum collection cases ignores the planning and safety steps involved in real-world collection and blends concepts; and asserting that no safety practices are needed is simply incorrect.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

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We wish you the very best on your exam journey. You've got this!

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