MyCAA Education & Training Plan (ETP)

The University of Texas at El Paso
Professional and Public Programs
101 W. Robinson Ave, Memorial Gym; Rm. 111 El Paso, TX 79968
915-747-7578
http://www.ppp.utep.edu/

Student Information:	
Student Name:	
School Issued Student ID:	N/A
Program Name:	Phlebotomy Technician Certificate Program with Clinical Externship C.14.8
Program Type:	Certificate
Program Duration:	4 Months
Scheduled Start Date:	
Estimated Completion Date:	
Course Delivery Format	Online

Program Overview:

The Phlebotomy Technician Program prepares students to collect blood and other laboratory specimens from clients for the purpose of laboratory analysis. Students will become familiar with all aspects of blood collection and will review the skills needed to perform venipunctures safely. The course also includes medical terminology, related anatomy and physiology, micro-collection procedures, medical laboratory and collection safety, and more. The program also includes an optional clinical externship at a local healthcare provider.

Certification/Licensure Eligibility upon Program Completion:

Students should have or be pursuing a high school diploma or GED.

With the exception of California where this program is NOT available, there are no state approval and/or state requirements associated with this program.

There are several National Certification exams that are available to students who successfully complete this program:

- American Society of Phlebotomy Technician (ASPT) Phlebotomy Technician (CPT) Exam (The exam can be proctored at a local testing facility and is available to all students who complete this program.)
- NHA Certified Phlebotomy Technician (CPT) Exam (The exam can be proctored at a local testing facility and is available to all students who complete this program.)

Tuition Cost:

\$3,650

Course Breakdown:

Course/Program Code	Course/Program Title	Course Credits (if applicable)		
UTEP-PH 07	Phlebotomy Technician Certificate Program with Clinical Externship	375 Contact Hours/ 37.5 CEU's		
School Official Certifica	ation:			
By my signature below, I con named in this document.	ertify the above information is true, accura	ate, complete, and being submitted on	behalf of the institution	
		_		
Signature/Title of Authorized School Official		Date		
School Official Printed First and Last Name		School Official E-mail and Ph	School Official E-mail and Phone Number	