

# Saudi Laboratory Specialist Licensure Examination (SLLE)

# **EXAMINATION CONTENT GUIDELINE**



**Note:** Read this guide before submitting an application to test. At the time of application, you will be required to acknowledge that you have read and understood this guide and the policies and procedures contained within.

#### **EXAMINATION MODEL**

#### **General Rules**

#### What are Licensure Examinations?

Licensure Examinations are assessments to ensure that the degree of incompetence of healthcare practitioners will not harm the public. It assesses the ability to apply knowledge, concepts, and principles that constitute the basis of safe and effective health care.

## What is Saudi Laboratory Specialist Licensure Examination (SLLE)?

The SLLE is an exam that assesses the readiness of a Laboratory Specialist to practice and/or proceed to postgraduate training. It consists of 200 MCQs which may include up to 10% additional pilot questions. The exam is divided into two parts of 100 questions (+\-10) each with a time allocation of 120 minutes for each part. There is a scheduled 30-minute break between the two parts. The questions have four options from which the candidate will choose one best answer.

The examination shall contain recall questions that evaluate knowledge and questions with scenarios that evaluate other skills (interpretation, analysis, decision making, reasoning and problem solving). Examination questions are related to the subtest areas (outlined in Appendix A), may be both theoretical and procedural. Theoretical questions measure skills necessary to apply knowledge, calculate results, and correlate patient results to disease states. Procedural questions measure skills necessary to perform laboratory techniques, evaluate laboratory data, and follow quality assurance protocol.

### How is the SLLE pass score established?

In November 2019, the SCFHS conducted a rigorous standard setting exercise to assign a cut score on the reporting scale of 200-800. Following the standard setting exercise, the panel recommended a pass score of 530. This pass score was reviewed and approved by the Central Assessment Committee (CAC).

#### What is a test blueprint, and what is its purpose?

A test blueprint is a document that reflects the content of a specialty licensure examination. The blueprint is the plan used for "building" the exam. The purpose of the blueprint is to ensure including questions related to what is expected to be known.



# **Examination Sections:**

The SLLE questions encompass different sections within the area of Medical/Clinical Laboratory Science: Blood Banking, Urinalysis and Other Body Fluids, Clinical Chemistry, Hematology, Immunology, Microbiology, and Laboratory Operations. Each of these sections comprises a specific percentage of the overall 200-questions licensure examination. The SLLE sections are described in the following table:

Section	Description
BLOOD BANK 15-20%	Blood Group Systems and HLA system, Antibody Screen & Identification, Antibody Titration, Pre-Warm Technique Crossmatch.DAT, Elution/Adsorption, Blood Donation (Whole blood and Apheresis), Blood Component, Transfusion Therapy, Autoimmune hemolytic Anemias, Transfusion Reactions, HDFN, Phenotyping/Genotyping (molecular testing)
URINALYSIS & OTHER BODY FLUIDS 5-10%	Physical, Chemical & Microscopic Urinalysis and Body Fluid Analysis (CSF, Amniotic, Synovial, Serous, Semen & Feces)
CLINICAL CHEMISTRY 15-20%	Carbohydrates, Acid Base, Electrolytes, Proteins & Other Nitrogen- Containing Compounds, Enzymes, Heme Derivatives, Lipids & Lipoproteins, Endocrinology, Tumor Markers, TDM, Toxicology,
HEMATOLOGY 15-20%	Erythrocytes & Leukocytes, Reticulocyte Count, ESR, Sickle Cell Test, Hemoglobin Electrophoresis, RBC Enzymes, RBC/WBC Morphology & Differentials, Platelets, Hemostasis,
IMMUNOLOGY & SEROLOGY 5-10%	Autoimmunity, Immune Responses, Physiology of the Immune system, Immunology of Viral & Mycobacteria, Parasites, Molecular Biology & Cytogenetics
HISTO- & CYTO TECHNIQUES 5-10%	Sample types, Processing, Embedding, Cutting, stains, Frozen section, Sample storage and disposal, Molecular Pathology
MICROBIOLOGY 15-20%	General Microbiology, Bacteriology (Gram- Positive Cocci, Gram-negative Bacilli, Gram-Negative Cocci, Gram-positive Bacilli, Anaerobes, Mycobacteria, Spirochetes, Other Atypical Bacteria), Mycology, Virology, Parasitology
LABORATORY OPERATIONS 5-10%	Quality Assessment/Troubleshooting, Safety, Management, Laboratory Mathematics, Instrumentation, Molecular Techniques, Education and Communication, Laboratory Information Systems
PATIENT SAFETY & PROFESSIONALISM 5-10%	Regulations of Saudi healthcare system, Teamwork and inter-professional collaboration, Professional attitudes and ethical behaviors of healthcare workers, Islamic, legal, and ethical principles in professional practice

- 1. For a more specific overview of the areas on the SLLE, please refer to the CONTENT OUTLINE (See Appendix A & B).
- 2. Examination outlines adapted from:
- SCFHS Laboratory Specialist Licensure Examination
- ASCP Board of Certification
- American Medical Technologist Certification



**Appendix A: Saudi Laboratory Specialist Licensure Examination Content Outline** 

Section			
	1. Blood Group Systems	A. Genetics	<ol> <li>Basic</li> <li>Molecular</li> <li>Inheritance of Blood Groups</li> <li>Relationship Testing</li> </ol>
		B. Blood group Nomenclature and Antigens	<ol> <li>ABO</li> <li>Lewis</li> <li>Rh</li> <li>MNS</li> <li>P, P1PK</li> <li>LE</li> <li>Kell</li> <li>Kidd</li> <li>Duffy</li> <li>Lutheran</li> <li>Other Blood Group Systems</li> <li>Antigens of High incidence</li> <li>Antigens of Low incidence</li> <li>HLA System</li> <li>Platelet/ Granulocyte Specific Antigens and Antibodies</li> </ol>
BLOOD BANK 15-20%		C. Role of Blood Groups in Transfusion	Immunogenicity     Antigen Frequency
		A. Antibody Screen	
	2. Antibody Screen and Identification and ABO Discrepancy	B. Antibody Identification	<ol> <li>Alloantibodies</li> <li>Autoantibodies</li> </ol>
		C. ABO Discrepancy	
		A. Crossmatch	
	3. Crossmatch and Special Tests	B. Special Tests	<ol> <li>Direct Antiglobulin Test (DAT)</li> <li>Phenotyping and Genotyping (Molecular Testing)</li> <li>Elution/adsorption</li> <li>Antibody Titration</li> <li>Pre-warm Technique</li> </ol>
	4. Blood Donation, Transfusion Therapy, Transfusion Reactions and Hemolytic Disease of the Fetus and Newborn (HDFN)	A. Blood Donation and Components Preparation	<ol> <li>Types of Donations (Whole blood and Apheresis donation)</li> <li>Special Donor Categories (Autologous and Directed blood donation)</li> <li>Donor selection and Qualification</li> <li>Donor testing, Transfusion         <ul> <li>Transmitted diseases, and Reentry</li> </ul> </li> </ol>

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			<ol><li>Components Preparation and Storage</li></ol>
		B. Transfusion Therapy	<ol> <li>RBC</li> <li>PLT</li> <li>FFP</li> <li>Cryoprecipitated AHF</li> <li>Granulocyte</li> </ol>
		C. Autoimmune Hemolytic Anemias	3. Grandiocyte
		D. Blood bank role in Stem Cell and Solid Organ Transplant	
		E. Transfusion Reactions	
		F. Hemolytic Disease of the Fetus and the Newborn (HDFN)	<ol> <li>Types (ABO and Non-ABO HDFN)</li> <li>Antenatal and Postnatal Testing</li> <li>Intrauterine Transfusion (IUT)</li> <li>Neonatal Exchange Transfusion</li> <li>Cord blood Testing and Rh<sub>0</sub>(D)         <ul> <li>Immunoglobulin (RhIG) Eligibility</li> </ul> </li> <li>Rosette and Kleihauer-Betke Test</li> </ol>
		A. Physical	<ol> <li>Color, Volume, Odor, and Clarity</li> <li>Specific Gravity/Osmolality</li> </ol>
URINALYSIS & OTHER BODY FLUIDS 5-10%	1. Urinalysis	B. Chemical	<ol> <li>Reagent Strip</li> <li>Confirmatory Tests (pH, blood, leukocytes, Nitrites, protein, glucose, ketones, bilirubin, urobilinogen, electrolytes (Na, K, Cl, Ca, P, Mg), uric acid, amino acids).</li> </ol>
		C. Microscopic Sample Preparation	<ol> <li>Cells</li> <li>Casts</li> <li>Crystals</li> <li>Contaminants</li> <li>Artifacts/microorganisms</li> </ol>
		D. Urine specimen	<ol> <li>Types</li> <li>Collection techniques</li> <li>Sample preservation (Storage and handling)</li> </ol>
	2. Other Body Fluids (Qualitative and Quantitative)	A. CSF (physiology and composition, physical and chemical examination, microscopic and microbiological examination).	

		B. Amniotic, Synovial, Serous, Semen and Feces (physiology and composition, physical and chemical examination, microscopic and microbiological examination).	
		A. Carbohydrates  B. Acid Base	<ol> <li>Glucose</li> <li>Glycated hemoglobin</li> <li>pH, pCO<sub>2</sub>, pO<sub>2</sub></li> </ol>
	Carbohydrates, Acid     Base and Electrolytes	B. Acid Base	2. Osmolality, base excess
	ŕ	C. Electrolytes	<ol> <li>Sodium, potassium, chloride, bicarbonate, anion gap</li> <li>Calcium, magnesium, phosphorus</li> </ol>
	2. Proteins and Other Nitrogen-Containing Compounds	A. Protein and Other Nitrogen- Containing Compounds	<ol> <li>Total protein, albumin</li> <li>Globulins (alpha 1, alpha 2, beta, gamma)</li> <li>Ferritin, transferrin</li> <li>Iron and TIBC</li> <li>Ammonia</li> <li>Creatinine, BUN</li> <li>Uric acid</li> <li>Troponin</li> <li>Other (e.g., BNP)</li> </ol>
CLINICAL CHEMISTRY 15-20%		B. Heme Derivatives	Bilirubin, urobilinogen
15-20%	Enzymes, Lipids and Lipoproteins      Special Chemistry (Endocrinology, Tumor Markers, TDM, Toxicology)	A. Enzymes	<ol> <li>Amylase, lipase</li> <li>AST, ALT</li> <li>CK, LD</li> <li>ALP</li> <li>GGT</li> <li>Other</li> </ol>
		B. Lipids and Lipoproteins	<ol> <li>Cholesterol (total, HDL, LDL)</li> <li>Triglycerides</li> <li>Phospholipids (PG)</li> </ol>
		A. Endocrinology and Tumor Markers	<ol> <li>T3, T4, TBG, TSH</li> <li>hCG, FSH, LH, estradiol</li> <li>Other hormones (e.g., cortisol)</li> <li>Tumor markers (e.g., alpha fetoprotein, CEA, hCG, PSA)</li> </ol>
		B. TDM and Toxicology	<ol> <li>Therapeutic drug monitoring</li> <li>Drugs of abuse</li> <li>Other toxicology (e.g., carbon monoxide)</li> </ol>

	5. Molecular Techniques	<ul> <li>A. Targeted Mutation Analysis (e.g., PCR)</li> <li>B. Detection of Unknown Mutations (e.g., SSCP)</li> <li>C. Detection of Copy Number Variations (e.g., Southern Blot)</li> <li>D. Basic Molecular Biology</li> </ul>	
	Sampling and acceptance criteria	A. Types of tubes used     B. Adequacy (EDITA-Sodium citrate)     C. Integrity of samples (clotted-hemolytic-lipemic)	
HEMATOLOGY 15-20%	2. Erythrocytes, Leukocytes and PLT	A. Red Blood Cells and Indices	<ol> <li>RBC count</li> <li>Hemoglobin, hematocrit, and indices</li> <li>Histograms interpretation on instrument (Normo-Macro-Micro)</li> </ol>
		B. White Blood Cells	<ol> <li>WBC count</li> <li>Differential (Neut, Mono, Lymph, Eos &amp; Baso)</li> <li>Histograms interpretation on instrument (Lobularity vs. Mononucleated cells distributions)</li> </ol>
		C. Platelet count	<ol> <li>PLT count</li> <li>Histograms interpretation on instrument (PLT clump)</li> </ol>
		A. Reticulocyte Count	
		B. ESR	
	3. Other Tests	C. Tests for Hemoglobin Defects	<ol> <li>Sickle cell tests</li> <li>Hemoglobin electrophoresis</li> </ol>
		D. RBC enzymes (e.g., G-6PD)	
	4. Morphology and Differentials	A. Red Blood Cell Morphology	RBC shape, size, and color (normal Vs abnormal)

		<ol> <li>RBC Inclusions</li> <li>RBC parasite (Plasmodium sp. Babesia, Microfilaria and Trypanosomes)</li> </ol>
	B. White Blood Cell Morphology	<ol> <li>WBC differential linage (Mature Vs Immature)</li> <li>WBC inclusions</li> </ol>
	C. Platelet Morphology	<ol> <li>Manual Estimation (Adequate Vs Thrombocytopenia)</li> <li>Recognize PLT Clumping (pseudothrombocytopenia)</li> </ol>
	A. Flow Cytometry	<ol> <li>Basic Knowledge of Principle</li> <li>Main CD markers (Blast, Myeloid and Lymphoid)</li> </ol>
5. Flow cytometry, Cytogenetics, and Molecular Biology	B. Cytogenetics & Molecular Biology (JAK2 - Philadelphia chromosome – BCR- ABL)	
	A. PT, INR & ISI  (calculated using establish normal population with each new lot#),  aPTT, TT	
	B. Fibrinogen, D-dimer (calibration with new lot#)	
6. Coagulation and	C. Factor Assays (intrinsic-extrinsic pathways)	
Hemostasis	D. Inhibitors Anticoagulants (lupus)	
	E. Mixing Studies	
	F. Anticoagulant Therapy Vs Prophylaxis and Their Effect on the Patient Result (warfarin & HMWH Vs aspirin, LMWH,	



		apixaban & enoxaparin)  G. Hypercoagulability tests (protein C & S)  H. Disease Correlation (most common, DIC, Sepsis, Liver disease, Hemophilia, Christmas disease, etc.)	
	1. Immunity	A. Autoimmunity	<ol> <li>ANA, anti-DNA</li> <li>CRP/RF</li> <li>Thyroid Antibodies</li> <li>Special Tests</li> </ol>
IMMUNOLOGY AND SEROLOGY 5-10%	2. Infectious Diseases	B. Immune Responses  A. Viral	Physiology of the Immune System  1. EBV/infectious mononucleosis 2. Hepatitis 3. HIV/HTLV/CMV 4. Rubella/measles 5. Special Viral Immunoassays
		B. Microbial	Syphilis     Other Than Syphilis
HISTO- AND CYTO TECHNIQUES	1. Pre- Analytical:	<ul> <li>A. Patient or specimen identification</li> <li>B. Sample types and containers</li> <li>C. Sample Preparation and Fixation</li> <li>D. Grossing</li> <li>E. Sample rejection</li> </ul>	
5-10%	2. Analytical:	<ul><li>A. Processing</li><li>B. Embedding</li><li>C. Cutting</li><li>D. Staining, special stains</li></ul>	



		E. Immunohistochemi stry	
		F. Frozen section	
		G. Molecular Pathology	
		H. Cytological Technique (Liquid Base Cytology)	
		I. Cytological Technique (Cell Block Processing)	
		J. Cytological Technique (FNA Sample Processing)	
		A. Sample retention and storage	
		B. Sample disposal laws and regulations	
	3. Post-Analytical:	C. Report and Document Retention	
		D. Quality Assurance in Histopathology and Cytology	
		E. Safety Histopathology and Cytology	
MICROBIOLOGY Includes biochemical, immunologic, serologic, and other molecular methodologies (e.g., MALDI-TOF) required	General Principle of medical and clinical	A. Microbial Taxonomy, Structure, Metabolism, Genetics, and host interaction	
for identification and detection of	microbiology:	B. Normal flora	
microorganisms and antimicrobial susceptibility testing		C. Safety, specimen management, sterilization and	

15-20%		disinfection, and QC in microbiology	
		D. Diagnostic Approaches for detection, identification, and analysis of microbial pathogens (bacteria, fungi, virus, and parasites)  E. Evaluation of Antimicrobial Activity	
		A. Gram-positive Cocci:	<ol> <li>Staphylococcus</li> <li>Streptococcus</li> <li>Enterococcus</li> <li>Micrococcus</li> </ol>
		B. Gram – positive Bacilli:	<ol> <li>Bacillus</li> <li>Corynebacterium</li> <li>Erysipelothrix</li> <li>Gardnerella, Lactobacillus</li> <li>Listeria</li> <li>Nocardia</li> <li>Streptomyces</li> </ol>
	2. Bacteriology:	C. Gram-negative Bacilli:	<ol> <li>Enterobacteriaceae (e.g.,         Citrobacter, Escherichia,         Enterobacter, Klebsiella,         Morganella, Proteus, Providencia,         Salmonella, Serratia, Shigella,         Yersinia)</li> <li>Other Gram-negative Bacilli (e.g.,         Acinetobacter, Aeromonas,         Bordetella, Brucella,         Campylobacter, Eikenella,         Francisella, Haemophilus,         Helicobacter, Legionella,         Pasteurella, Plesiomonas,         Pseudomonas, Burkholderia,         Stenotrophomonas,         Chryseobacterium, Vibrio, HACEK,         Bartonella, Capnocytophaga)</li> </ol>
		D. Gram-negative Cocci:	Neisseria and Moraxella
		E. Anaerobes:	1. Gram-positive (e.g., Bifidobacterium, Clostridium, Eubacterium, Actinomyces,

		Peptostreptococcus, Propionibacterium)  2. Gram-negative (e.g., Bacteroides, Fusobacterium, Porphyromonas, Prevotella, Veillonella)  1. Mycobacterium tuberculosis complex (e.g., M. tuberculosis)
	F. Mycobacteria:	2. Mycobacteria Other than MTB (e.g., M. avium-intracellulare, M. leprae)
	G. Spirochetes:	<ol> <li>Treponema</li> <li>Borrelia</li> <li>Leptospira</li> </ol>
	H. Other Atypical bacteria:	<ol> <li>Chlamydiae</li> <li>Richettsiae</li> <li>Mycoplasma</li> </ol>
	I. Gram-negative Coccobacilli	
	A. Yeast (e.g., Candida, Cryptococcus, Geotrichum, Malassezia)	
	B. Dimorphic fungi (e.g., Blastomyces, Coccidioides, Histoplasma, Sporothrix)	
3. Mycology:	C. Dermatophytes (e.g., Epidermophyton, Microsporum, Trichophyton)	
	D. Zygomycetes (e.g., Absidia, Mucor, Rhizopus)	
	E. Opportunistic molds/septate hyaline molds (e.g., Aspergillus, Penicillium)	
	F. Dematiaceous molds	

		G. Pneumocystis	
	4. Virology:	Viruses in human disease (e.g., B19 Virus, Papillomavirus, Adenovirus, Hepatitis A - E viruses, Herpesvirus, Poxvirus, Poliovirus, Rotavirus, Norovirus, Dengue Virus, Rubella virus, HIV, HTLV, Influenza virus, Measles virus, mumps virus, RSV, Rabies virus, Ebola virus and Coronavirus and similar related viruses)	
	5. Parasitology:	<ul> <li>A. Blood and tissue protozoa (e.g., Plasmodium, Trypanosoma, and similar parasites)</li> <li>B. Intestinal and urogenital protozoa (e.g., Cryptosporidium, Entamoeba, Giardia, Trichomonas, and similar parasites)</li> <li>C. Intestinal and tissue helminths (e.g., Ascaris, Enterobius, hookworm, Schistosoma, Strongyloides, Taenia, Trichinella, Trichuris, filarial worms and similar helminths)</li> </ul>	
LABORATORY OPERATIONS 5-10%	<ol> <li>Quality</li> <li>Assessment/Troubles hooting</li> </ol>	A. Pre-Analytical, Analytical, Post- Analytical	<ol> <li>Pre-Analytical (e.g., Knowledge of sampling methods and sample receipt rule,</li> <li>Analytical (e.g., Reference values, Prevalence and Predictive value,</li> </ol>

			Clinical Sensitivity and Specificity test. 3. Post-Analytical: Results Reporting, Recording, Documentation and Medical Confidentiality.
		B. Quality Control	<ol> <li>Knowledge of parameters enabling long term to follow up</li> <li>Controls curves</li> <li>Proficiency testing</li> <li>Westgard Rules</li> </ol>
		C. Compliance	<ol> <li>Procedures</li> <li>Policy and general approach in laboratory</li> </ol>
		D. Regulation	<ol> <li>Standard Operating Procedures</li> <li>Corrective actions</li> <li>OSHA, CLIA, HIPAA (Lab law)</li> </ol>
		A. Safety Levels	
		B. Biological Pathogens	
		C. Biological Safety	
	2. Safety	D. Exposure and Infection	
	,	E. Ionizing and Non- ionizing radiations	
		F. Chemical, Fire	
		G. Electricity Risks	
		H. Waste Handling	
		A. Purchasing: Items specifications and analyze needs	
	3. Management	B. Inventory Control	
		C. Competency: Employees performance	
		A. Concentrations	
	4. Laboratory  Mathematics	B. Units, Dilutions	
iviatnematics	C. Standard deviation		
	5. Instrumentation	A. Manual Laboratory Instrumentation	

		B. Calibration	
		C. Automated	
		Laboratory Instruments	
		A. Training programs	
	6. Education and Communication	B. Developing technical skills	
		C. Problem Solving	
	7. Laboratory Information Systems	Software and Information Security	
PATIENT SAFETY AND PROFESSIONALISM 5-10%	Saudi Law for Health     Practitioners		
	Patients' Rights,     Safety and Privacy		

Note: Blueprint distributions of the examination may differ up to +/-5% in each level.



# **Appendix B: Competency Statement**

For the laboratory areas of Body Fluids, Blood Bank, Clinical Chemistry, Hematology, Immunology and Microbiology, the following competencies are evaluated:

#### **APPLIES KNOWLEDGE OF**

- Theory and principles related to:
  - Anatomy (Body Fluids) Biochemistry (Chemistry and Hematology) Education Genetics (Blood Bank) Growth characteristics/diagnostic and infective forms (Microbiology) Immunology (Blood Bank and Immunology) Laboratory information systems Physiology (Body Fluids, Chemistry, Hematology, Immunology).
- Data security/patient confidentiality
- Fundamental biological characteristics related to laboratory testing
- Medical terminology
- Principles of performing basic/special laboratory procedures
- Sources of error in laboratory testing
- Standard operating procedures
- Theory and practice related to laboratory operations(management/safety/education/R&D)

#### **SELECTS APPROPRIATE**

- Controls for test performed
- Course of action
- Instruments for new laboratory procedures
- Instruments to perform requested test
- Quality control procedures
- Reagents/media/blood products
- Routine/special procedures to verify test results
- Type of sample and method for test requested

#### **PREPARES / PROCESSES**

- Controls
- Equipment and instruments

# **CALCULATES RESULTS**

#### ASSESSES TEST RESULTS BY CORRELATING LABORATORY DATA WITH

- Clinical or other laboratory data
- Physiologic processes to validate test results and procedures
- Quality control data
- Results obtained by alternate methodologies

#### **EVALUATES**

- Appropriate actions and methods
- Corrective actions
- Patient-related requirements
- · Possible sources of error or inconsistencies
- Quality control procedures
- Specimen-related requirements

#### **EVALUATES LABORATORY DATA TO**

- Assess test for procedural validity/accuracy
- Assure personnel safety
- Check for procedural/technical problems
- Make identifications
- Recognize and report abnormal test results and/or the need for additional testing
- Recognize and resolve possible inconsistent results/sources of error
- Recognize related disease states
- Take corrective action
- · Verify test results for reporting

# ATTRIBUTES OF PROFESSIONALISM BY THE ABILITY TO

- Adhere to the regulations of Saudi healthcare system in the Kingdom
- Respect teamwork and inter-professional collaboration
- Demonstrate professional attitudes and ethical behaviors of healthcare worker
- Apply Islamic, legal and ethical principles in professional practice



# **Appendix C: References**

Subjects	References		
BLOOD BANK	<ul> <li>Harmening D.M. (2012). Modern Blood Banking &amp; Transfusion Practices.6<sup>th</sup> Ed.Philadelphia, PA: F.A.Davis Company</li> <li>Fung M.K., Eder A.F., Spitalnik S. L., Westhoff C. M.(2017). Technical Manual. 19<sup>th</sup> Ed. Bethesda, MD: AABB Press</li> </ul>		
URINALYSIS AND OTHER BODY FLUIDS	<ul> <li>Ging, P. M., &amp; R. O. (2009). The biochemistry of body fluids. (4<sup>th</sup> ed.). ACBI Scientific Committee Guidelines.</li> <li>Brunzel, N. A. (2013). Fundamentals of urine and body fluid analysis (4<sup>th</sup> ed.). Elsevier.</li> </ul>		
CLINICAL CHEMISTRY	<ul> <li>Marshall, W. J., Lapsley, M., &amp; Day, A. (2016). Clinical Chemistry (8<sup>th</sup> ed.).</li> <li>Bishop, M. L., Fody, E. P., &amp; Schoeff, L. E. (2010). Clinical Chemistry:         Techniques, principles, correlation (6<sup>th</sup> ed.). Lippincott Williams &amp; Wilkins.</li> <li>Clinical Biochemistry (1<sup>st</sup> ed.). (2016). Charles University.</li> </ul>		
HEMATOLOGY	<ul> <li>Keohane, E., Smith, L., &amp; Walenga, J. (n.d.). Rodak's Hematology (5<sup>th</sup> ed.). Elsevier.</li> <li>Rodak, B. F., &amp; Carr, J. H. (n.d.). Clinical Hematology Atlas (5<sup>th</sup> ed.). Elsevier.</li> </ul>		
IMMUNOLOGY AND SEROLOGY	Todd, I., Spickett, G., & Fairclough, L. (n.d.). Lecture Notes: Immunology (7 <sup>th</sup> ed.). Wiley.		
HISTO- AND CYTO TECHNIQUES	<ul> <li>Bancroft, J. D., &amp; Gamble, M. (2007). Theory and Practice of Histological Techniques (6<sup>th</sup> or latest ed.). Churchill Livingstone.</li> </ul>		
MICROBIOLOGY (MICR)	<ul> <li>Tille, P. (2013). Bailey &amp; Scott's Diagnostic Microbiology (13<sup>th</sup> ed.). Mosby.</li> <li>Procop, G. W., &amp; Koneman, E. W. (2016). Koneman's Color Atlas and Textbook of Diagnostic Microbiology (7<sup>th</sup> or latest ed.). LWW.</li> </ul>		
LABORATORY OPERATIONS (LO)	<ul> <li>Landsverk, M. L., &amp; Wong, L. C. (n.d.). Clinical Molecular Diagnostic Techniques: A Brief Review.</li> <li>Laboratory Quality Management System Handbook WHO</li> </ul>		
PATIENT SAFETY AND PROFESSIONALISM	<ul> <li>وثيقة الحقوق (الرابط) – المصدر: وزارة الصحة السعودية</li> <li>نظام مزاولة المهن الصحية (الرابط) – المصدر: وزارة الصحة السعودية</li> </ul>		

Note: This list is intended for use as a study aid only. SCFHS does not intend the list to imply endorsement of these specific references, nor are the exam questions necessarily taken from these sources.



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