

## LABORATORY ASSISTANT

### GLYNNWOOD LABORATORY, BENONI



### **WE MAKE PATIENT CARE A PRIORITY. IF YOU DO, JOIN OUR TEAM TODAY!**

PathCare is a partnership of pathologists in private practice across South Africa that has been assisting doctors and healthcare professionals determine and confirm diagnoses since 1923. We are registered with the HPCSA (Health Professions Council of South Africa) and all our laboratories are SANAS accredited.

An opportunity exists for a Roving Laboratory Assistant to join the team at our Glynnwood Laboratory in Benoni. We are seeking an individual who displays a high level of ethics and integrity while consistently aligning with the PathCare values. The successful candidate will be expected to work at the Glynnwood, Alberton and Mulbarton

### Key Competency Requirements

- Grade 12 (Matric)
- Registered with the HPCSA as a qualified Laboratory Assistant
- Computer literate
- Relevant experience in a busy specimen reception department
- Experience with handling challenging queries and clients
- Experience with sending and receiving samples using Meditech shipping batches
- Experience with managing on hold list and incomplete reports.
- Experience with providing telephonic results
- Experience working on Skylims
- Client-focused with excellent attention to detail
- Display initiative and the ability to problem-solve
- Effective communication and interpersonal skills with the ability to work under pressure, independently as well as in a team
- A positive attitude & flexible work-style
- Ability to work under pressure and adapt to unforeseen changes
- A strong sense of devotion to quality
- Ability to work unsupervised at night
- Ability to interact well with different departments in the laboratory.
- Must be prepared to work shifts, weekends & public holidays
- Must have an acceptable disciplinary track record/performance record with regard to the technical and behavioral competencies required to perform in this position

### Key Responsibilities

- Receipt and processing of specimens
- Distribution of specimens and maintain acceptable TAT.
- Specimen preparation
- Handling of queries
- Shipping specimens to reference laboratories

### **CLOSING DATE: Tuesday, 4<sup>th</sup> February 2025**

Your contribution to the company will be rewarded with a market-related remuneration package which includes a retirement fund contribution and risk benefits (Group Life and Disability cover), annual bonus, competitive maternity benefits, health care allowance, discounted pathology tests, payment of HPCSA/SANC annual registration fees and developmental opportunities at the PathCare Training Academy.

Applicants who meet the criteria and are interested in joining our dynamic team are required to complete the attached application form and submit this together with a CV to [raquel.quartilho@pathcare.net](mailto:raquel.quartilho@pathcare.net)

Please note: by applying for this position, your application will be subject to verification checks of your driver's licence, ID document, qualifications/proof of registration, credit and criminal checks if required. Candidates must be willing to participate in a rigorous evaluation process.

## APPLICATION FOR EMPLOYMENT

Position Applied For	
Location Of Position	

Surname				
First Names				
Title (e.g. Mr, Dr)				
Nickname				
Residential Address				
PO Box/Private Bag/Work addresses are not allowed				
	Postal Code			
Phone No. - Home	( )			
- Work	( )			
- Cell				
Private Email Address				
Postal Address (if different to residential)				
	Postal Code			
Identity Number				
Passport Number				
Tax Number				
Are you registered with SARS as a taxpayer	Yes No	Do you have employment in addition to Pathcare	Yes No	
Marital Status (for SARS)	Single	Married	Community Property	In Out
Next Of Kin Full Names				
Relation to you (eg. wife)				
Address			Postal Code	
Two Contact Numbers				

SCHOOLING RECORD	
Highest Grade Passed	
Year Obtained	
Name Of School / Institution	

TERTIARY QUALIFICATIONS		
Degree/Diploma	Institution	Year

CURRENT / LATEST EMPLOYMENT RECORD			
Company Name			
Position Held			
Period Employed		to	
Final Salary			
Reason For Leaving			
May we contact them?	Yes	No	
Manager Name			
Phone Number	( )		

Employment Equity Required for statistical purposes	Gender	Male	Female
Mark relevant with X	Race	African	Coloured
		White	Indian
Nature Of Disability:	Disability	No	Yes

PREVIOUS EMPLOYMENT RECORD	
1. Company Name	
Position Held	
Period Employed	to
Reason Left	
Manager's Name	
Phone Number	( )
2. Company Name	
Position Held	
Period Employed	to
Reason Left	
Manager's Name	
Phone Number	( )

Professional Registration For Current Year (please mark with X)	HPCSA	Nursing	
	Other	None	
Registration Number			
Are you paid up for year?	No	Yes	Please attach receipt

Have you had prior PathCare Employment?	No	Yes
	If yes, state Job Title	
	If yes, state Location	

**Do you have any actual or potential conflicts of interest you would like to declare regarding information, products/services or relationships (family and/or friends) either within PathCare or with external service or product providers? If yes, please provide additional details:**

I certify that all information given by me is, to the best of my knowledge is true and correct. I understand that any false statements could result in the termination of my contract. I hereby authorise PathCare to carry out a credit and criminal record check if it is a requirement for the position as well contact the previous employers and references. I have indicated on this form or other related documents such as my CV, etc. I hereby authorise and give consent to the Company and/or its duly authorised verification agent to process the personal information provided herein in terms of the Protection of Personal Information Act ("POPIA") for the purposes of performing the necessary background and credit checks as well as confirming employment history. I authorise the Company to further process the personal information provided herein should it proceed to employ me. I understand and agree that the Company will automatically destroy information provided herein should your application not be successful within a period of 3 (three) months.

Date \_\_\_\_\_

Signature Of Applicant \_\_\_\_\_