Edward-Elmhurst HEALTH | Healthy Driven

Specimen Collection- Blood

1. Identify the patient. Ask the patient to state their name and date of birth, and confirm it matches the test requisition provided by the patient.

2. Examine both arms for adequate veins.

3. Put on clean gloves.

4. Tie the tourniquet on the patient's arm, but not so tightly as to cause pain. Patient should make a fist but should not pump and clench excessively. (Do not leave the tourniquet on the arm for more than 1 minute)

5. Identify the vein that will be used and then release the tourniquet.

6. Alcohol swabs must be used to clean the venipuncture site. Scrub the site somewhat vigorously and allow the area to dry completely before proceeding.

7. Reapply the tourniquet again. Hold the patient's arm below the venipuncture site with one hand and pull the skin tightly with the thumb to stabilize the vein.

8. Insert the needle into the vein quickly and smoothly at approximately a 15 degree to the skin. The needle should run in the same direction as the vein and should be inserted with the bevel facing up.

9. As the blood begins to flow, instruct the patient to open their fist.

10. Remove the tourniquet upon obtaining access to the vein but before withdrawing the needle from the arm. Allow blood to flow into the vacutainer tubes until filled completely. If the blood flows, then stops, the needle can be moved slightly forward or backward to re-access vein. Probing is not recommended. If this slight movement back and forth does not result in free flow of blood again, remove the tourniquet and look for an alternate site.

11. Upon completion of specimen collection, place a gauze pad over the venipuncture site and remove the needle from the patients arm. Apply pressure until there are no signs of bleeding and then apply a bandage or gauze with tape to the venipuncture site.

Butterfly Draws for Coagulation Testing

1. When using a winged blood collection set for venipuncture and a coagulation tube is first to be drawn, a discard tube should be collected first.

2. The discard tube must be used to fill the blood collection tubing dead space and to assure proper anticoagulant/blood ratio.

3. The discard tube must be a blue top tube.

Drawing Order:

When multiple tubes are drawn, it is important to prioritize the drawing order to prevent a tube additive from contaminating the next tube.

1. Navy Blue (metals testing)
2. Blood Cultures
3. Light blue top (Sodium citrate)
4. Gold top (serum separator tube)
5. Plain red top
6. Dark green top (heparin)
7. Light green top (plasma separator tube)
8. Lavender top (EDTA) or pink top
9. Grey top
10. Yellow top (ACD)

Certain blood collection techniques have been identified as possible sources of error:

- Tourniquet left on arm for over a minute before blood collection
- Techniques causing increased trauma to the vein or surrounding tissues
- Drawing from a site that is still wet from alcohol used to clean the site
- Expired or partially filled collection tube
- Drawing multiple tubes out of order
- Patient incorrectly identified
- Tube incorrectly labeled