

# Blood Collection: Tips for Success

## Best Sites for Venipuncture

Superficial veins of the upper limb



### 1. Median cubital vein

A superficial vein, most commonly used for venipuncture, it lies over the cubital fossa and serves as an anastomosis between the cephalic and basilic veins.

### 2. Cephalic vein

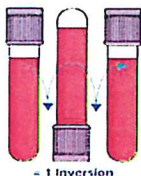
Shown in both forearm and arm, it can be followed proximally where it empties into the axillary vein.

### 3. Basilic vein

Shown in the forearm and arm, it divides to join the brachial vein.

## Order of Draw

Closure Color	Collection Tube	Mixing
<b>BD Vacutainer<sup>®</sup> Blood Tubes</b>		
	• Blood Cultures - SPS	x 8 - 10
	• Citrate Tube*	x 3 - 4
or	• BD Vacutainer <sup>®</sup> SST <sup>™</sup> Gel Separator Tube	x 5
	• Serum Tube	x 5
	• Heparin Tube	x 8 - 10
or	• BD Vacutainer <sup>®</sup> PST <sup>™</sup> Gel Separator Tube With Heparin	x 8 - 10
or	• EDTA Tube	x 8 - 10
	• Fluoride (glucose) Tube	x 8 - 10



**Two Patient Identifiers Prior to Collection ! (Hospital Accreditation Req**

### Site and Device Selection:

- Antecubital area is recommended
- Larger veins and straight blood collection needles 22 G or larger reduce che
- Wingsets only for small, fragile veins and for blood cultures
  - \* use Discard tube if Coag is first tube collected (to purge air from wing

### On VAD (vascular access device) insertion:

- Collecting from catheters 22 G or smaller causes more hemolysis
- Avoid direct connect of tube holder to hub: lifting of catheter to con at hub; sharp angle can cause hemolysis
- Use extension set to avoid kinking (Discard tube to clear air or salin
- Use Luer Lok Access Device<sup>™</sup> for secure connection

- Discard minimum 2X the dead space volume of line for non coagula space volume for coagulation tests

### Let the Alcohol / Chlorohexadine air dry for 30-60 seconds

- Wet alcohol on skin and needleless connectors causes hemolysis
- Do not fan, blow or wipe the site to dry

### Tourniquet time:

- No more than 1 minute; release while cleansing site and alcohol dry
- Release as first tube is filling

### Follow Order of Draw for Venous Blood Collection

- To avoid specimen error caused by carry-over of tube additives

### Hold Vacutainer<sup>®</sup> tube firmly in holder until blood flow ceases

- All tubes must be full to ensure correct ratio of blood to tube additiv
- Full tube critical for Coag studies (blue top tube)

### Mix tubes, by gentle inversion, for the recommended number of times (s

- Mix immediately upon removing from holder, as next tube is filling, 1 (see diagram bottom left)
- Vigorous mixing or shaking causes hemolysis

### Labeling:

- Must be done at bedside *before walking to nursing or pneumatic tut*
- Staff ID, date and time must be legible (Lab Accreditation Requireme
- Do not cover tube cap (caps are removed in Lab; label will rip)
- Barcode straight up and down (analyzer scanner will not read if barc
- Leave "window" for lab to check for clotting, hemolysis and proper
- Document if sample collected from a VAD, and what is being infuse