

Blood Collection – Healthcare

Collection Site Preparation

- 1. The collection site must have all the supplies needed to complete a specimen collection (e.g. collection kits, ink pens, Custody and Control Forms (CCFs), leak-resistant plastic bags, absorbent material, shipping containers, and disposable gloves).
- 2. Ensure that there is a suitable clean surface for the collector to use as a work area, and a secure temporary storage area for maintaining specimens until they are transferred to the laboratory.
- 3. Ensure access to collection supplies is restricted only to the collector(s)/donor(s) and other authorized personnel.

Blood Collection

Please note: You must be a Certified Phlebotomist to perform a blood collection.

- 1. Obtain and complete the applicable Laboratory Request Form (instructions are included in Appendix 1). For electronic requisitions see Appendix 2.
 - a. Write the donor's name and date of birth on the adhesive Label and Requisition Form
 - b. Enter remaining requisition data
 - c. Verify with the donor their name and date of birth
- 2. Check the blood collection tube(s) and butterfly device to ensure the expiration date has not been exceeded.
 - a. Do not use expired tubes otherwise the vacuum may not be sufficient to draw an adequate sample
 - b. Ask the practitioner if an alternative specimen may be collected
 - c. Order more supplies
 - d. Discard expired tubes
- 3. Remove the label from the top of the Laboratory Request Form:
 - a. Place the label lengthwise on the blood tube(s); do not wrap the label around the tube otherwise the bar code cannot be scanned
- 4. Wash hands with soap and water.
- 5. Put on a new pair of medical gloves.
- 6. Ask the following three questions before touching the patient:
 - a. Does the patient have a sensitivity and/or allergy to latex?
 - i. Use latex-free gloves and tourniquet if answer is yes
 - b. Does the patient have a history of fainting?
 - i. If the patient does have a history of fainting, then the patient should be asked to lie down for the blood to be drawn
 - c. Has the patient had an arm shunt, mastectomy or lymphedema?



- i. If the patient has had an arm shunt, mastectomy or lymphedema then blood should be drawn from the other arm
- 7. Assemble the winged infusion/butterfly needle.
- 8. Ask patient to sit in a comfortable position.
- 9. Explain each procedure so the patient is informed and understands what is about to take place.
- 10. Select the vein for venipuncture:
 - a. First inspect the area you plan to use
 - b. Apply the tourniquet about midway between elbow and shoulder and have the patient clench his or her hand. The tourniquet must be applied with enough tension to compress the vein, but not the artery
 - c. It may be necessary to release the tourniquet for a few seconds and reapply: prolonged obstruction of blood flow by the tourniquet may affect test results
 - d. Tourniquet application should not be placed for an extended period of time; if mottling occurs release the tourniquet, seize blood collection and allow blood flow to return
 - e. Always palpate or feel for the vein even when the vein can be seen. This gives you practice in finding deeper, unseen veins. The vein will feel like an elastic tube that gives under pressure. Arteries pulsate, so make certain the structure you feel is not pulsating. If a vein is difficult to find, it may become easier to see if you massage the arm from wrist to elbow, or tap sharply with index and second finger. Do not draw from an artery.
 - f. Attempt to locate the median cubical vein on either arm before considering alternative veins. Due to the proximity of the basilic vein to the brachial artery and the median nerve, the basilic vein should only be considered if no other vein is more prominent
- 11. Scrub the venipuncture site with an alcohol pad.
- 12. Hold vein "fixed" or taut during the puncture.
- 13. Insert the needle with the bevel up at about a 25-degree angle with the skin.
- 14. Attach a BD Vacutainer® (6mL) gray top vacuum tube (15 mg Sodium Fluoride/12 mg Potassium Oxalate) to the butterfly housing, ensuring that tube has completed filling before removing.
- 15. Collect a second tube of blood.
- 16. Release the tourniquet before removing the needle.
- 17. Remove needle from the vein.
- 18. Apply pressure with a dry gauze pad or a Band-Aid®.
- 19. Observe the site for hemostasis (complete clotting) before the site is bandaged in any way.
- 20. Discard tourniquet after each patient.
- 21. Invert the grey-topped tube back and forth 8 times as soon as possible.
 - a. The anticoagulants in the tube need to mix with the blood to prevent clotting
- 22. Dispose of needle(s) in puncture-resistant sharps container.
- 23. Remove gloves and discard into the Hazardous waste container.
- 24. Wash hands with soap and water.



- 25. Make certain each specimen is clearly labeled and the top(s) are securely closed.
- 26. Place the closed collection tubes into the specimen bag with the absorbent pad.
- 27. Fold and place the completed Laboratory Request Form along with a copy of the donor's insurance card in the back pouch of the Aegis specimen bag.
 - a. If the patient does not have an insurance card, you must obtain and verify their social security number and document it in the demographics section of the Laboratory Request Form.
 - b. It is important that the specimen and pad be in one compartment and the paperwork in the other to avoid contamination of the requisition in the event of specimen leakage
- 28. Seal the bag using the zip-top closure.
- 29. Immediately place the sealed specimen bag into the proper shipping container.
 - a. Ship to the laboratory within 24 hours of collection using the preprinted FedEx labels provided by Aegis.

NOTE: If the specimen(s) cannot be shipped within 24 hours of collection, refrigeration is recommended. If the specimen(s) cannot be shipped within 48 hours of collection, freezing is recommended.

30. Difficulties in Drawing Specimen:

- a. Precautions:
 - i. Hematoma (bruising) if a hematoma develops, apply a pressure bandage and elevate the arm
 - ii. If enough blood is not obtained from the first puncture, the opposite arm or another vein may be examined. If the second try is also unsuccessful, do not try again;
 - iii. Ask the practitioner if an alternative specimen may be collected
- b. Adverse Reactions:
 - i. If the patient experiences any adverse reactions during a blood collection, please seek medical assistance immediately

Appendix 1

Laboratory Request Form Completion

Diagnosis Code(s)

NOTE: All requisitions must have a valid ICD-10 code provided by the physician to support the medical necessity of the order.

Diagnosis codes are 3-7 characters (e.g., M79.604). The first digit is alpha, 2nd and 3rd are numeric and 4-7 can be alpha and/or numeric.

- 1. Codes beginning with a numeric digit are not valid. All diagnosis codes must begin with a letter.
- 2. V58.69 is not a valid code



Billing/Insurance

Obtain insurance information and ALWAYS validate it with the patient.

Mark the appropriate check box on the Laboratory Request Form.

If Worker's Comp, Letter of Protection (LOP), or Auto:

Completely fill out the Aegis Insurance Information Form and make a copy of the applicable Letter of Protection (LOP), the front and back of the auto insurance card and the patient's health insurance card and send in with the specimen.

Patient Information

Fill in patients complete Social Security Number, First Name, Middle Initial, Last Name, Sex, Date of Birth, Address, City, State, Zip Code and Phone Number

Patient Signature

Ask the patient to verify their information and get their signature

Collector's Initials

Legibly write your initials in the box.

Date Collected

This is the Date of Service (DOS).

Requesting Provider

Select the appropriate requesting provider (Choose only one).

Sample Label

With the patient present and after completing the patient information, remove the label and place it on the top of the specimen device.

Test Selected

Select the test(s) requested by the provider.

Prescribed Medication(s)

Mark the drugs prescribed and the appropriate usage—either Daily or PRN.

Provider Signature

Obtain the ordering provider's signature.



Appendix 2

Contact Aegis Sciences Corporation at (800) 533-7052 for options to utilize an Electronic Laboratory Requisition

Appendix 3

Packaging and shipping samples

At the end of the business day package all secured specimens for shipment. Select the appropriate container based on the number of specimens. Place the FedEx Express Paid Shipping label on the package for pickup. Schedule pickup by calling 1.800.GoFedEx (1.800.463.3339) or go to fedex.com.

Small white Aegis urine specimen box ("white box") up to 6 specimens



Small and Large Aegis Clinical Boxes ("Aegis box") up to 20



Clinical pack bag

