OREGON DEPARTMENT OF CORRECTIONS

Operations Division

Health Services Section Policy and Procedure #P-D-04.10

SUBJECT: VENIPUNCTURE

<u>POLICY</u>: The collection of venous blood specimens for diagnostic purposes as

ordered by practitioners or per protocol is completed on-site by health

care staff.

REFERENCE: NCCHC Standard P-D-04, Diagnostic Services

OAR 437 Division 2: Subdivision Z: 1910-1030

PROCEDURE:

A. Assemble the following equipment:

Alcohol prep pads or Betadine prep

2X2 gauze or cotton balls

Paper tape or Band-Aids

Tourniquet

Sharps container

Appropriate drawing system (Vacutainer, Syringe, or re-sheathing butterfly) to obtain specimen. To select the proper tube types consult the laboratory manual.

Latex gloves (must be worn with all contact with body fluids)

Laboratory manual (for specimen specifications)

Hemostat

Eye Protection

- B. Organize the equipment for easy access and safe disposal of contaminated materials.
- C. Specific requirements for each specimen, including tube selection, sample size, supplies necessary, and other general information, are provided in the laboratory manual.
- D. Inspect the equipment for any abnormalities or defects.
- E. Correctly identify the patient.
- F. Place the patient in a safe and comfortable position.
- G. You **must** wear gloves beyond this point.

NOTE: OSHA requires gloves be worn for venipuncture.

H. The antecubital fossa is considered the preferred site for venipuncture, the forearm, wrists and the hands veins can be used when antecubital fossa has no suitable venipuncture site.

Venipuncture

- I. Prepare the venipuncture site by cleansing the site using a circular motion with 70% alcohol solution and allow site to air dry. Exceptions for use of alcohol prep are blood cultures, arterial blood gases and blood alcohol. These tests are prepped with Betadine.
- J. Apply the tourniquet well above the venipuncture site.
- K. Collection of the Specimen
 - 1. Vacutainer system
 - a. Attach the needle to the holder.
 - b. Insert the needle at a 15-degree angle in the same direction as the vein, with the bevel side up.
 - c. Carefully push the tube into the holder, puncturing the tube stopper with the needle within the holder.
 - d. Allow the blood to flow into the tube.
 - e. If collection of multiple specimens is needed, the tube should be taken out of the holder gently as not to disturb the needle in the vein.
 - f. An ordered sequence of draw should be maintained drawing tubes with additives last.

NOTE: Blue top tubes need to be filled to the colored line on the label or dilution factors can compromise the specimen. After each tube with additives is drawn, gently invert 5-10 times to avoid clotting.

2. Syringe System

- a. The needle insertion steps are the same as with the vacutainer system. Once the needle is in place, the plunger can be gently and slowly pulled back. Fill the syringe to the desired volume.
- b. Distribute the specimen to the collection tubes in the following order:

Blood culture bottles Blue (sodium citrate) Green (heparin)

Lavender (EDTA)

Gray (potassium oxalate)

Red or Red and Black (non-additive)

Venipuncture

- 3. Re-Sheathing Butterfly Method
 - a. Determine what volume of blood needs to be drawn and arrange the proper number of tubes and/or syringes to collect that amount.
 - b. Attach the syringe or vacutainer holder to the end of the re-sheathing butterfly tubing.
 - c. The initial puncture itself is slightly altered. Grasp the wings of the re-sheathing butterfly, folding them up above the bevel of the needle, between the index finger and the thumb of the drawing hand. Proceed with the venipuncture.
 - d. Once the vein has been entered, secure the re-sheathing butterfly with a piece of tape. A folded 2X2 gauze can be used underneath the resheathing butterfly to maintain the proper angle.
 - e. When using with tubes, fill each tube in the suggested order stated in the vacutainer system section of this procedure. If using the syringe, fill tubes in the order stated in the syringe system.
 - f. When using syringe, or a combination of syringes and vacutainer tubes, use a hemostat with rubber tips to clamp off the line between syringes or systems before disconnecting or connecting.

L. Terminating the Venipuncture

- 1. Release the tourniquet.
- 2. Place gauze or cotton ball over the site and withdraw the needle from the patient's arm, while applying pressure to the site.
- 3. Instruct the patient to maintain the pressure to the site until bleeding has stopped. Secure site with tape or Band-Aid.

M. Disposal of Contaminated Material

- 1. An approved OSHA biohazard disposal container must be readily available and in close proximity to the location of specimen collection.
- 2. Materials saturated with blood must be placed in a biohazard trash container.
- 3. The entire vacutainer needle system must be placed in a sharps container.
- 4. Recapping of needles by a two-handed technique is prohibited. IF YOU MUST, recapping of needles shall be accomplished through the use of a mechanical device.

Venipuncture

5. If the device is equipped with a safety mechanism, the safety mechanism must be activated prior to disposal.

N. After Specimen Collection

- 1. Complete the test requisition form as instructed in the laboratory manual. Apply the label from the form to the tube(s).
- 2. All specimens should be handled as if they are infectious.
- 3. All specimens should be properly sealed in plastic bag labeled biohazard prior to being transported. Leaking containers pose a health hazard.
- 4. All mailed specimens are to be placed in appropriate biohazard mailers with absorbent material, and then placed in leak proof bag, i.e., state lab specimens.

O. Priority of the Specimen

- 1. STAT: Indicates a medical emergency. Requires that the specimen be drawn, processed and arrangements made for the laboratory to receive the specimen. Results should be obtained as soon as the laboratory has performed the test.
- 2. A.S.A.P.: Indicates a medical priority. The specimen should be drawn, processed and sent to the laboratory at the most convenient time. The laboratory results should be obtained the same day.
- 3. ROUTINE: Indicates no medical priority. The laboratory tests may be drawn at the most convenient time or scheduled. The results will be reported by the laboratory's normal operating procedure.

Effective Date:	
Revision date:	April 2007

Supersedes P&P dated: March 2006