

Neonatal Screening

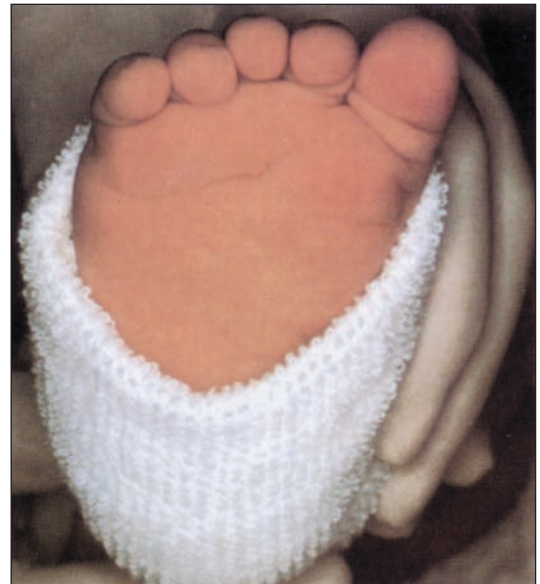
Blood Specimen Collection and Handling Procedure



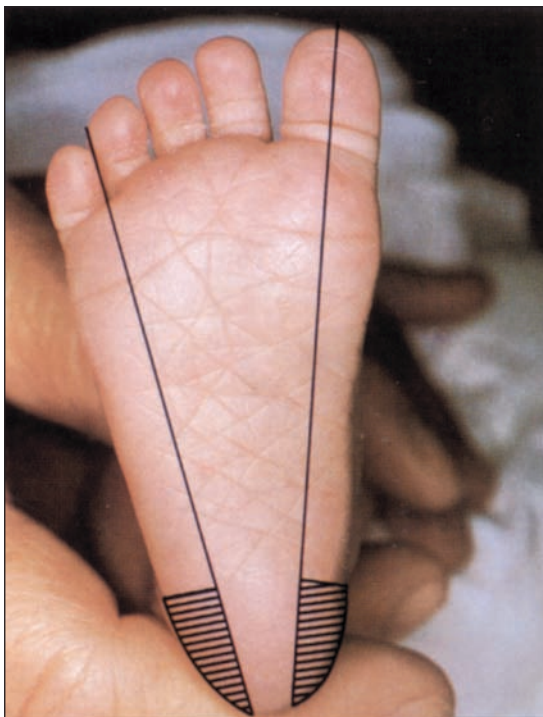
1 Equipment: sterile lancet with tip approximately 2.0 mm – sterile alcohol prep, sterile gauze pads, soft cloth, blood collection form, gloves.



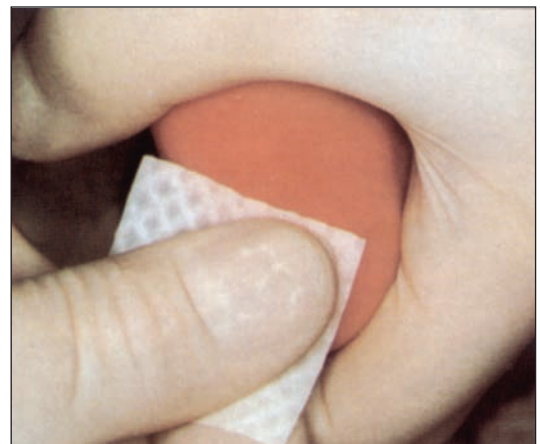
2 Complete ALL information. Do not contaminate filter paper circles by allowing the circles to come into contact with spillage or by touching before or after blood collection. Keep "SUBMITTER COPY" if applicable.



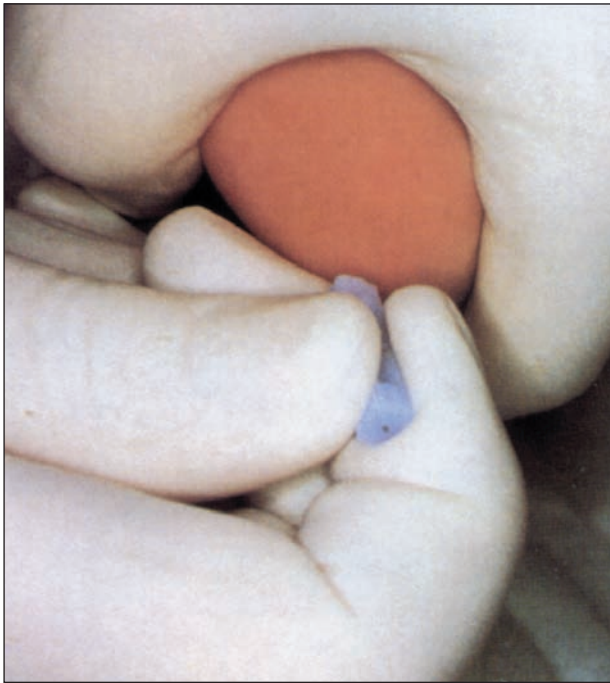
4 Warm site with soft cloth, moistened with warmwater up to 41°C, for three to five minutes.



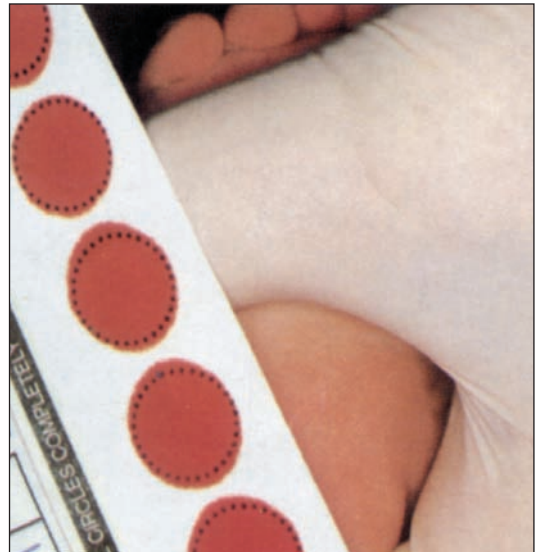
3 Hatched area (//) indicates safe areas for puncture site.



5 Cleanse site with alcohol prep. Wipe DRY with sterile gauze pad.



6 Puncture heel. Wipe away first blood drop with sterile gauze pad. Allow another LARGE blood drop to form.



8 Fill remaining circles in the same manner as step 7, with successive blood drops. If blood flow is diminished, repeat steps 5 through 7. Care of skin puncture site should be consistent with your institution's procedures.



7 Lightly touch filter paper to LARGE blood drop. Allow blood to soak through and completely fill circle with SINGLE application of LARGE blood drop. (To enhance blood flow, VERY GENTLE intermittent pressure may be applied to the area surrounding the puncture site). Apply blood to one side of filter paper only.

NEW YORK SCREENING BLOOD COLLECTION FORM		<input type="checkbox"/> Thick with Recombinant Insulin	
LAB ID: 06752821		<input type="checkbox"/> USE AT YOUR INSTITUTION	
Name: DOE	Sex: M	Weight: 5.5	Height: 20.0
Date of Birth: 03/1/88	Birth Weight: 3.257	Date of Admission: 03/1/88	Time of Admission: 12:00
Maternal ID: 9999999999	Maternal Name: DOE, JANE	Maternal Address: 1 ANY STREET	Maternal City: BUFFALO, NY 14204
Maternal Phone: 0208	Maternal Occupation: 999999	Maternal Race: WHITE	Maternal Ethnicity: 0000
Physician: ROBERT GUERRE, MD	Hospital: CHILDREN'S HOSPITAL	Address: 775 MAIN STREET	City: BUFFALO, NY 14204
Phone: 326-1111	State: NY	Zip: 14204	County: ERIE

9 Dry blood spots on a dry, clean, flat, non-absorbent surface for a minimum of four hours.



10 Mail completed form to testing laboratory within 24 hours of collection.

Information provided by The New York State Department of Health.

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