



KAISER PERMANENTE®

DOCUMENT NUMBER: SBMC-PPP-0031
DOCUMENT TITLE: Venipuncture
DOCUMENT NOTES:

LOCATION: SBMC-rel	VERSION: 05
DOC TYPE: SBMC PPP	STATUS: Release

EFFECTIVE DATE: 08 Feb 2022	NEXT REVIEW DATE: 08 Feb 2024
RELEASE DATE: 08 Feb 2022	EXPIRATION DATE:

AUTHOR:	PREVIOUS NUMBER: SCPMG-PPP-0099
OWNER: SBMC Preatalytic Mgr	CHANGE NUMBER: SBMC-CR-0261

Procedure for Venipuncture

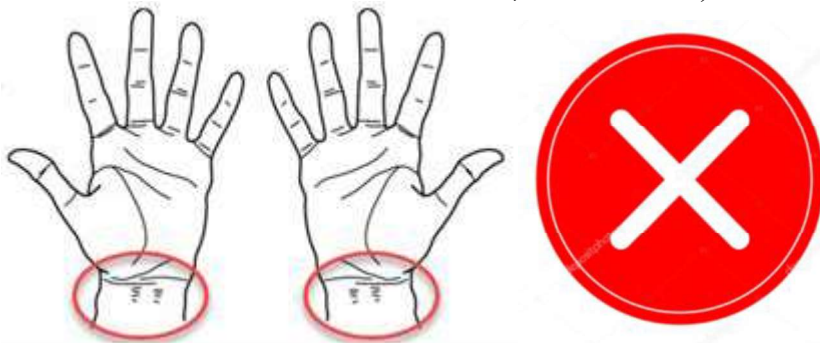
- Introduction** This procedure provides instructions for venipuncture. Venipuncture is the process of collecting or drawing blood from a vein and is the most common way to collect blood specimens for laboratory testing.
-
- Scope** This procedure is intended for any phlebotomist or health care worker who is certified to perform venipuncture or is within their scope of practice.
-
- Policy**
- All Patients must be clearly identified using two [2] identifiers
 - All specimens will be labeled immediately after the specimen is drawn in the presence of the patient.
 - Ambulatory: The patient will be asked to state their full name and full date of birth.
 - In-patient conscious: The patient with capacity (has the ability to respond) will be asked to state their full name and date of birth. The armband is checked and compared to the information stated and to the MediCopia (KPPI) handheld.
 - In-patient unconscious: Verification is done through an adult responsible for the patient, when available. The armband is checked and compared to the information stated and to the MediCopia (KPPI) handheld
 - Ambulatory patient with capacity (has the ability to verify information) or adult responsible for the patient will confirm that the correct label is on the specimen
 - All specimens will be collected in the correct order of draw.
 - All tubes must be mixed by inversion the number of times required, as soon as the tube has been removed from the holder.
 - Gloves must be worn and changed between patients. Wash hands or use approved antiseptic between glove changes.
-

Continued on next page

Procedure for Venipuncture, Continued

Policy, continued

- A new tourniquet will be used for each patient and will be removed after one minute.
- Venipuncture from leg, ankle, or foot veins requires authorization by a laboratory manager or designee and documented provider authorization. Drawing from these sites risks tissue necrosis in diabetic patients and thrombophlebitis in patients with coagulopathies.
 - For an Ambulatory patient provider authorization is written.
 - For Inpatients, Emergency Department, and Urgent Care patient provider authorization is written or verbal.
 - The documentation of provider’s authorization is determined by local protocol (e.g. electronically entered into Health Connect, Cerner, retained in paper file).
- Drawing from the back of the hand (posterior side) is acceptable. Do **NOT** draw from the anterior side (inside of wrist) as seen below.



- Draws are limited to 2 [two] attempts per phlebotomy for hard draws. A second person may attempt the draw with a limit of 2 [two] attempts.
 - Ask patient permission for additional draws after each attempt is missed.
 - If unable to draw the blood, refer patient to a supervisor [outpatient] or nurse [inpatient] per local policy.
 - Inpatient – after first phlebotomist misses, inform nurse of inability to draw specimen and ask for instructions.
- Draws from an arm with an IV will be performed by following the procedure “*Drawing Blood from Patients with an IV*”.
- Never draw blood from a shunt or from the arm where the shunt is located.
- Do not draw blood from the arm that is on the surgical side of a mastectomy unless approved by a provider’s written order.
- Do not draw from any indwelling lines. An RN must discard 10 cc of blood to avoid contamination before filling appropriate tubes.

Continued on next page

Procedure for Venipuncture, Continued

Policy,
continued

- Transfusion Service outpatients and pre-op patients: May require an additional routing form to be completed per local process.
 - All local policies and procedures will be followed.
 - When a blood culture is being drawn, ChloroPrep preparation will be followed as stated in the procedure “*Blood Culture – Skin Preparation and Specimen Collection*”
 - Manual manipulation of needles or other sharps (e.g. recapping, bending, breaking, removal from disposable syringes, etc.) is prohibited.
 - Manual transferring of samples from one collection tube to another is prohibited.
 - Samples are to be labelled by the personnel who performed the phlebotomy.
-

Equipment

- Tourniquet
 - Collection Containers
 - Multi-sample Safety Needles or Winged Collection Device [Butterfly]
 - Alcohol Pads
 - Gauze
 - Gloves
 - Sharps Container
 - Paper Tape or bandage
 - Approved warming device
 - Blood Culture holders and bottles and ChloroPrep [refer to Blood Culture – Skin Preparation and Specimen Collection]
-

**Safety or
Special Safety
Precautions**

Refer to the safety manual for general safety requirements.

Quality Control

- Inspect the alcohol packaging to assure sterility.
 - Inspect the needle packaging to assure sterility.
 - Inspect the tip of the needle for burs
-

Continued on next page

Procedure for Venipuncture, Continued

Before you begin

Order of Draw:

1. Blood Cultures [Current Aerobic/Anaerobic Culture bottles]
2. Sodium Citrate [Blue top]
3. Serum tube with or without clot activator, with or without gel separator [Gold or Red top]
4. Heparin tube with or without gel plasma separator [Green top]
5. EDTA tube [Purple, Pink or White top]
6. Glycolytic inhibitor tube [Gray top]

- If container is not listed verify with LABNET any special instructions for Order of Draw.
- NOTE: Transfer of blood from one collection tube to another is not allowed.

Procedure

Follow the steps below to

Step	Action
1	Introduce yourself, see procedure " <i>Customer Service</i> " <ul style="list-style-type: none"> • Identify the patient with two patient identifiers, either <ul style="list-style-type: none"> • MRN and name OR • Name and birthdate
2	Determine tests to be drawn.
3	Prepare the equipment.
4	Sanitize hands in the presence of the patient and put on gloves.
5	Position the patient. NOTE: The patient's arm should extend downward in a straight line from the shoulder to the wrist and NOT be bent at the elbow. IF you are drawing from the wrist or hand vein, the patient's hand must be supported
6	Apply the tourniquet 3-4 inches above the selected site (refer to policy " <i>Tourniquet Application</i> ") and ask the patient to make a fist, without pumping the hand.

Continued on next page

Procedure for Venipuncture, Continued

Procedure,
continued

Step	Action
7	Select the puncture site by using palpation to determine the location and angle of the vein.
8	Warm the site, if applicable. NOTE: Only use approved warming device.
9	Clean the site with 70% isopropyl alcohol and air dry the site. Exception: Drawing Blood Cultures, refer to procedure " <i>Blood Culture – Skin Preparation and Specimen Collection</i> " Do not blow on the site, wipe or wave it dry. Do not re-palpate (touch the site after cleansing is performed).
10	Remove needle from packaging. Uncap and inspect the needle for burs or other defects.
11	Support the patient's arm and anchor the vein.
12	Hold the needle in your dominant hand with the bevel of the needle facing up. Position the needle above the vein and parallel to its path. Warn the patient about the impending stick.
13	Insert the multi-sample needle into the skin at an angle of 30 degrees or less. Insert butterfly needled (winged collection set) into the skin an angle of 15 degrees or less.
14	Push the first tube into the tube holder to establish blood flow, release the tourniquet and have the patient open their fist. Release the tourniquet when the blood flow has been established, the tourniquet should be applied no longer than one minute.
15	Fill and mix the tubes in the order of draw by changing the tube in the holder after the prior tube is filled. NOTE: It is extremely important to ensure that all Sodium Citrate [Blue top] tubes are filled until the vacuum is exhausted and a 9:1 ratio is established.

Continued on next page

Procedure for Venipuncture, Continued**Procedure,**
continued

Step	Action
16	After the last tube is filled and removed, place the gauze over the puncture site, remove the needle, activate the safety device and apply pressure to the site.
17	Discard the entire collection unit into a sharps container. NOTE: Recapping, bending, breaking, removal of needles from disposable syringes or other manual manipulation of needs is prohibited.
18	Label the specimens in the presence of the patient and verify with the patient that the tube has been labeled correctly, when applicable.
19	Check the site to verify the bleeding has stopped and apply bandage.
20	Dispose of used and contaminated materials into the appropriate containers.
21	Transport the specimens to the Laboratory.

Controlled Documents

The following controlled documents support this policy.

Customer Service
Tourniquet Application
Use of Needles, Winged Collection and Capillary Collection Devices for Phlebotomy
BD Eclipse Blood collection Needle
BD Vacutainer® Push Button Blood Collection Set
Jelco Needle-Pro Blood collection Needle
Drawing Blood from Patients with an IV
Blood Culture – Skin Preparation and Specimen Collection
Post Puncture Care
Adverse Reactions in Phlebotomy
Care of Bruises
Inpatient Orders – Lab Collect with KPPI

Continued on next page

Kaiser Permanente
Medical Care Program
California Division - South

SCPMG Laboratory Systems
PreAnalytic Processing
Procedure

Procedure for Venipuncture, Continued

Non-Controlled Documents The following non-controlled documents support this policy.

McCall and Tankersley, Phlebotomy Essentials, 5th Edition Lipponcott, Williams and Wilkins, 2012. Chapter 8.

CLSI: Procedures for the Collection of Diagnostic Specimens by Venipuncture– Approved Standard – Sixth Edition, H3-A6, Volume 27 Number 26, October 2007.

Authors Preanalytical Processing Working Group

Signature Manifest

Document Number: SBMC-PPP-0031

Revision: 05

Title: Venipuncture

Effective Date: 08 Feb 2022

All dates and times are in Pacific Standard Time.

Procedure for Venipuncture

Initial Approval

Name/Signature	Title	Date	Meaning/Reason
Janice Wolf (K119893)	Director Operations Area Lab	11 Nov 2021, 02:25:45 PM	Approved

Operations Director Approval

Name/Signature	Title	Date	Meaning/Reason
Janice Wolf (K119893)	Director Operations Area Lab	11 Nov 2021, 02:26:07 PM	Approved

Medical Director Approval

Name/Signature	Title	Date	Meaning/Reason
Sony Wirio (A478893)	Pathologist, Medical Director	03 Jan 2022, 10:19:31 AM	Approved