<b>Wake Forest</b> Baptist Medical Center	Specimen Collection Procedures for Microbiology	Dept:	Outpatient Phlebotomy 324306
		<b>Effective Date:</b>	February, 2011
	OP-306-19	Revised Date:	February, 2019
		Contact:	Rinard
			Howard
Name & Title: Gregory Pomper, MD Medical Director		Date:	
Signature:			

### 1) General Procedure Statement:

a. **Purpose:** Blood cultures are drawn under the best possible sterile conditions. Routine blood cultures are drawn in 2 VersaTrek Blood Culture bottles. Blood Cultures for Acid Fast or Mycobactrium species are collected in an Isolator Tube.

# b. Responsible Department/Scope:

- 1.Procedure owner/Implementer: Outpatient Phlebotomy
- 2.Procedure prepared by: Rinard Howard, MHA PBT ACSP
- 3. Who performs procedure: Outpatient Phlebotomy staff

## **Blood Culture Materials**

- 1. Vacutainer Holder with "butterfly" collection set or Syringe and Needle
- 2. Chlorhexidine prep kit
- 3. One Aerobic bottle (silver cap)
- 4. One Anaerobic bottle (red cap)
- 5. Tourniquet
- 6. Gauze
- 7. Gloves
- 8. Adhesive bandage or tape

# 2) Procedure: Blood Cultures

- 1. Use a sterile Chlorhexidine prep kit to cleanse the venipuncture site as follows:
  - **a.** Pinch the wings on the applicator to break the ampule and release the antiseptic. Do not touch the sponge. Wet the sponge by repeatedly pressing and releasing against the venipuncture site until the site is visibly moist.
  - **b.** Use repeated back and forth strokes of the applicator for 30 seconds to thoroughly clean the site.
  - **c.** Allow to air dry for 30 seconds.
- 2. Disinfect the top of the bottles with alcohol, using one alcohol pad for each bottle.
- 3. Collect the sample using the closed Vacutainer system or needle and syringe.

**Important:** The volume in each bottle should not exceed 5ml. If using a syringe, equally divide the sample for each bottle. If using the butterfly collection set, after flow is established, count to 3 and pull the bottle from the holder.

4. Deliver the labeled tubes/bottles along with the requisition to the Clinical Microbiology Laboratory.

#### **Procedure Notes**

- 1. Blood Culture samples are drawn before any other sample.
- 2. For pediatric patients 9 and under, draw 1 ml/year of age.

## **Blood Cultures for Acid Fast and Fungal Cultures.**

# **Materials required:**

- 1. Vacutainer Holder and needle or Syringe and Needle
- 2. Chlorhexidine prep kit
- 3. Isolator blood culture tubes
- 4. Tourniquet
- 5. Gauze
- 6. Gloves
- 7. Adhesive bandage or tape

## **PROCEDURE:**

- 1. Use a Chlorhexidine prep kit to cleanse the venipuncture site as follows:
  - a. Pinch the wings on the applicator to break the ampoule and release the antiseptic. Do not touch the sponge. Wet the sponge by repeatedly pressing and releasing the sponge against the venipuncture until the site is visibly moist.
  - b. Use repeated back and forth strokes of the applicator for 30 seconds to thoroughly clean the site.
  - c. Allow to air dry for 30 seconds.
- 2. Disinfect the STOPPER of the Isolator tube with alcohol before adding the blood. It is important that the tube be thoroughly mixed before sending it to the laboratory.
  Important: At least one full tube of blood is required on all patients. Tubes containing less than 5 ml of blood cannot be processed. 1.5 ml pediatric tubes are available for patients less than 5 years old. The pediatric tubes must contain a minimum of 1ml or those specimens cannot be processed.
- 3. Deliver the labeled Isolator tube with a matching requisition to the Clinical Microbiology Laboratory. Identify the site (ex. Left arm) where the sample was drawn.

#### **Procedure Notes**

- 1. Draw a separate Isolator tube for fungal cultures and acid fast cultures.
- 2. Blood Culture samples are drawn before any other sample.

# INSTRUCTIONS RELATED TO SPECIMEN COLLECTION FOR Drug Levels

AMINOGLYCOSIDES (Vancomycin, Gentamycin, Tobramycin)

**PRINCIPLE:** Certain courses of antibiotic therapy require a base level (trough) drawn prior to hanging the admixture in IV form. After this antibiotic is completely infused, another level is drawn at a pre-determined time afterward when the circulating volume is thought to be at its optimum (peak).

# **COLLECTION / PRESERVATION / TRANSPORTATION:**

Specimens for Aminoglycoside levels are usually scheduled to correspond to the patient's medication protocol. These protocols generally call for trough, peak, or random monitoring of the patient's dose. When drawing these samples the phlebotomist should be check with the nurse that the trough is being drawn before the dose and the peak is being drawn at the appropriate time for the delivery method. Random monitoring does not require special draw time considerations.

3) Related Procedures: N/A

4) References: N/A

5) Attachments: N/A

6) Revised/Reviewed Dates and Signatures:

Reviewed/Revised Date:	By:
	(Medical Director/Designee)
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