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| **Phlebotomy Adverse Reactions** |
| **Purpose** | This procedure provides instructions for a PHLEBOTOMY ADVERSE REACTION before, during, or following a phlebotomy procedure. Minor adverse reactions include hematomas, petechiae, vomiting, and nausea. Serious injuries include syncopal episodes, nerve damage, and seizures.  |
| **Policy Statements** | * To be able to respond appropriately if an emergency were to arise before, during or following a phlebotomy procedure.
* This procedure applies to all laboratory staff who perform phlebotomy.
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| **Procedure** | Follow the steps in the table below for a PHLEBOTOMY ADVERSE REACTION.

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| **Step** | **Action** |
| 1 | If the patient: |  |
| * Faints or becomes unresponsive
 | 1. Call a Dr. Blue
	1. Inpatients – call for a nurse or provider
	2. Outpatients – press the “Code Blue” button located on the wall in each draw room.
2. Where practical, lay the patient flat with their knees up or place their head on the draw chairs armrest. Try to keep them from falling.
3. Loosen tight clothing.
4. If needed, lab can provide a glass of water, juice, or snack. Try to cool them down with a cold compress on their forehead or back of neck.
5. Wait for further instructions from the Dr. Blue team.

1. Be prepared to use the Glucometer if requested by the Dr. Blue team. |
| * Experiences nausea
 | 1. Make the patient as comfortable as possible.
2. Loosen tight clothing
3. Instruct the patient to breathe deeply and slowly.
4. Apply cold compresses to the patient’s forehead or back of neck.
5. Provide juice or snacks if requested.
6. Provide an Emesis bag/trash can if needed.
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| * Vomits
 | 1. Give the patient an emesis bag, or trash can. Provide tissues if needed. (Note: dispose of bodily waste in the proper biohazard receptacle).
2. Give the patient water to rinse out his/her mouth.
3. Provide juice or snacks if requested.
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| * Has convulsions/seizures
 | 1. Call a Dr. Blue
	1. Inpatients- call for a nurse or provider
	2. Outpatients – press the “Code Blue” button located in each draw room.
2. Try to prevent the patient from injuring themselves. Do not restrain the movements of the patient’s extremities completely, but try to prevent him/her from being injured.
3. Place patient on his/her side to prevent aspiration and try to protect their head.
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| 2 | It is mandatory to document any serious injury in the “Phlebotomy Adverse Reaction” log. Refer to [*SCM 3.50.f1 Phlebotomy Adverse Reaction Log*](http://khan.childrensmn.org/Manuals/Lab/SOP/Gen/SpecCol/212342.pdf)*.* File a Safety Learning Report (SLR) if patient injury occurs. |
| 3 | If a Dr. Blue was called, fill out the Dr. Blue/Neonatal Code Blue Team Debriefing Form the best you can. This form is located on Star Net<Forms<Code/RRT Forms<Dr. Blue Feedback Form. |

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| **Historical Record** |  |  |  |
| **Version** | **Written/Revised by:** | **Effective Date:** |
| 1 | Jessica Hines/Dawit Getachew: Updated the adverse reaction log and added the availability of snacks and juice boxes in the lab.  | 11/16/2022 |
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