

## TRAINING UPDATE

**Lab Location:** SGMC & WAH  
**Department:** Phlebotomy

**Date Distributed:** 6/8/2015  
**Due Date:** 6/30/2015  
**Implementation:** 7/1/2015







### DESCRIPTION OF REVISION

<b>Name of procedure:</b>
<b>Order of Draw for Multiple Tube Collections AG.F218.3</b>
<b>Description of change(s):</b>
<p>Add Light Blue Greiner (GREI) and standardize all inversions to 8-10 times</p> <p><b>This FORM will be implemented on July 1, 2015</b></p>

Document your compliance with this training update by taking the quiz in the MTS system.

# Order of Draw for Multiple Tube Collections

Germantown Emergency Center • Shady Grove Medical Center • Washington Adventist Hospital

1		<p><b>Blood Cultures (BLC)</b>            Adult 8-10 mL; Pediatric 1-3 mL  <b>Do not collect from central lines unless ordered by a physician/LIP. Do not cover barcode</b></p>	<p><b>Invert</b>  <b>8-10 Times</b></p>
2		<p><b>Light Blue* (BLUE)</b>            Sodium Citrate, 2.7 mL (<b>Fill to Line</b>)            PT, aPTT, Fibrinogen</p> <p><b>Light Blue Greiner (GREI)</b>            Sodium Citrate, 2mL (<b>Fill to black arrow</b>)            PFA-100, VerifyNow  <b>Discard first tube, Collect two, Hand deliver.</b></p>	<p><b>Invert</b>  <b>8-10 Times</b></p> <p><b>Invert</b>  <b>8-10 Times</b></p>
3		<p><b>Plain Red (RED)</b>            No Anticoagulant, 5mL            Alcohol, Gentamycin, Vancomycin, Digoxin, Rapid HIV (use red and lavender tubes)</p> <p><b>SST Tiger (SST)</b>            No Anticoagulant, Serum Separator, 10mL            Mono, Lyme Disease, Iron, Qual HCG, Hepatitis Panel</p>	<p><b>Invert</b>  <b>8-10 Times</b></p> <p><b>Invert</b>  <b>8-10Times</b></p>
4		<p><b>Mint Green (PST)</b>            Lithium Heparin, 4.5 mL            Basic Metabolic Panel, Liver Panel, CRP, Quant HCG, Thyroid Tests, Cardiac Enzymes, Lipid Panel, Magnesium, LDH, Amylase, Ammonia (on ice)</p>	<p><b>Invert</b>  <b>8-10 Times</b></p>
5		<p><b>Type and Screen Tube (LAV LRG)</b>            EDTA (K2), 10 mL            Type and Screen ONLY  <b>Must be collected using BB labeling system</b></p> <p><b>Lavendar Tube (LAV)</b>            EDTA (K2), 4.0 mL            CBC, Retic Count, HbA<sub>1</sub>C, CEA, H&amp;H, Sed Rate, Kleihauer-Betke, ABO Confirmation, DAT (Direct Coombs), Fetal Cell Screen (RhIG Eval), ABO/Rh, Carboxyhemoglobin,            Rapid HIV (use red and lavender tubes)  <b>DO NOT label using BB labeling system</b></p>	<p><b>Invert</b>  <b>8-10 Times</b></p> <p><b>Invert</b>  <b>8-10 Times</b></p>
6		<p><b>Grey Tube (GT)</b>            Sodium Fluoride Potassium Oxalate, 6 mL            Lactic Acid (On Ice), Glucose Tolerance</p>	<p><b>Invert</b>  <b>8-10 Times</b></p>

Revised 5.22.15

\*When using a butterfly to collect a light blue tube, always draw a discard tube first. The discard tube is another light blue tube that is used to remove the "dead space" from the line, so the actual tube will fill completely.

Reference: CLSI. Procedures for the Collection of Diagnostic Blood Specimens by Venipuncture; Approved Standard--6th Ed. CLSI document GP41-A6. Wayne,PA: Clinical and Laboratory Standards Institute, 2007.