

## TRAINING UPDATE

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

**Date Distributed:** 8/12/2015  
**Due Date:** 8/31/2015  
**Implementation:** 9/1/2015







### DESCRIPTION OF REVISION

<b>Name of procedure:</b>
<b>Order of Draw for Multiple Tube Collections AG.F218.4</b>
<b>Description of change(s):</b>
<p>Change Iron and Therapeutic Drugs (TDM) to mint green top (PST) Correct CEA to SST</p> <p><b>This FORM will be implemented on September 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 or 1.8 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, 6 mL            Alcohol,            Rapid HIV (use red and lavender tubes)</p> <p><b>SST Tiger (SST)</b>            No Anticoagulant, Serum Separator, 7.5 mL            Mono, Lyme Disease, Qual HCG, CEA,            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, Iron,            Quant HCG, Thyroid Tests, Cardiac Enzymes,            Lipid Panel, Magnesium, LDH, Amylase,            Therapeutic Drugs, 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>Lavender Tube (LAV)</b>            EDTA (K2), 4.0 mL            CBC, Retic Count, HbA<sub>1c</sub>, 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 8.5.15

\*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.