

process

Quest Diagnostics Nichols Institute Site: SGAH & WAH

Approved draft for training all sites (version 002)

TRAINING UPDATE

Lab Location:	SGAH & WAH	Date Distributed:	8/22/2012
Department:	Phlebotomy	Due Date:	9/20/2012

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Blood Collection from Indwelling Catheter WAH.P05, SGAH.P05 v002
Section 5:
Parts C, added STAT/ASAP orders to item 2. Add item 4 to specify follow up

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

Non-Technical SOP

Title	Blood Collection from Indwelling Catheter	
Prepared by	Leslie Barrett	Date: 3/23/2009
Owner	Samson Khandagale	Date: 3/23/2009

Print Name and Title	Signature	Date
Refer to the electronic signature page for approval and approval dates.		

12 month (or new) management review and approval: Signature acknowledges SOP version remains in effect with NO revisions.		
Print Name	Signature	Date

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1. PURPOSE

To outline the process for coordinating the collection of a blood sample from any indwelling line by nursing staff.

2. SCOPE

This procedure applies to Phlebotomy staff.

3. **RESPONSIBILITY**

Phlebotomy personnel perform this procedure and must comply with the content. The Client Services Supervisor is responsible for the content and annual review of the procedure.

4. DEFINITIONS

None

5. PROCEDURE

AT NO TIME UNDER ANY CIRCUMSTANCES SHOULD A PHLEBOTOMIST ATTEMPT TO ACCESS OR COLLECT BLOOD FROM ANY IMPLANTED VENOUS, ARTERIAL LINES, GRAFTS OR HEP-LOCKS.

WAH

A. Inpatients:

- 1. I.V. Therapy Critical Care Nurse, will draw blood from accessible indwelling lines.
- Phlebotomist will provide the appropriate tubes and labels for the nurse or I.V. Therapy, at least 1 hour prior to routine and timed collections. For STAT orders, within 10-15 minutes.

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- 3. Phlebotomist will document time and name of RN or Unit Secretary who received the tubes and labels.
- 4. Phlebotomist will reschedule the tests for the next hour using code "IVT" in LIS using program CVIS and REI to input the name of the nurse in LIS.
- Phlebotomist will follow up with Nursing until specimens are received in the Lab and not indicated as un-collected on the un-received phlebotomy collection log.
- 6. Specimen Transport/delivery
 - a) Nurse or IV therapy should tube specimens to the laboratory via pneumatic tube system.
 - **Note:** Blood culture specimens may only be sent via pneumatic tube system in a shatter proof BLC bottle carrier, provided by the Lab. This carrier must then be enclosed in a leak proof bio-bag. Only two BLC carriers in sealed bio-bags may be inserted into one pneumatic tube carrier. This process will prevent accidental breakage and contamination of the pneumatic tube system.
 - b) Phlebotomist may pick up the collected specimens and deliver them to specimen processing or laboratory.

B. Outpatients:

- 1. The Client Representative will contact the Infusion Center to alert them that a patient will be brought for blood draw from an indwelling line.
- 2. A Client Representative/ Phlebotomist will take the LIS labels and escort the patient to the Infusion Center. Phlebotomist will take until collection is completed.
- Once the blood is drawn, the will Phlebotomist bring the specimens back to the Laboratory.

SGAH

C. Inpatients:

- 1. RN will draw blood from accessible indwelling lines.
- Phlebotomist will provide the appropriate tubes and labels for the nurse, at least 1 hour prior to routine and timed collections. For ASAP and STAT orders, within 10-15 minutes. If units have their own barcode printers then labels need not be provided.
- 3. Phlebotomist will document time and name of RN who received the tubes and labels in LIS under function REI.
- 4. Phlebotomist will reschedule the tests for the next hour using code "IVT" in LIS using function CVIS and REI to input the name of the nurse in LIS.

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- 5. Phlebotomist will follow up with Nursing until specimens are received in the Lab and not indicated as un-collected on the un-received phlebotomy collection log.
- 6. Specimen Transport/delivery
 - a) Nurse should tube specimens to the laboratory via pneumatic tube system.
 Note: Blood culture specimens may only be sent via pneumatic tube system in a shatter proof BLC bottle carrier, provided by the Lab. This carrier must then be enclosed in a leak proof bio-bag. Only two BLC carriers in sealed bio-bags may be inserted into one pneumatic tube carrier. This process will prevent accidental breakage and contamination of the pneumatic tube system.
 - b) Phlebotomist may pick up the collected specimens and deliver them to specimen processing or laboratory (only if on the unit).
- D. Outpatients:
 - 1. When the Outpatient Infusion Center is Open, the patient should be directed there; otherwise Resource RN (Nurse Admin) is called to assist.
 - 2. The Client Representative will contact Resource RN to draw blood from outpatients with indwelling lines.
 - 3. Client Representative/ Phlebotomist will prepare the appropriate tubes and LIS labels for the draw. Observe and assist as needed.

6. RELATED DOCUMENTS

None

7. REFERENCES

None

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP P006.001		
000	12/2/09	Section 5: Part B, added Infusion Center Section 5: Parts A and C, added note to item 5.a	L Barrett	SKhandagale
001	6/10/12	Section 5: Parts A and C, 2 added STAT/ASAP orders to item 2. Add item 4 to specify follow up process	SKhandagale	SKhandagale

9. ADDENDA AND APPENDICES None

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