Abiding by the one-minute rule

How can you stay within the one-minute tourniquet rule when finding the vein takes longer than that? Can the alcohol be removed by gauze to speed things up?

It's acceptable, even encouraged, to take your time finding a vein. But if it takes more than a minute to find, cleanse, allow alcohol to dry, and access the vein, then the tourniquet should be released. The standard says that two minutes should be allowed to pass so hemoconcentration can disperse, then retighten, relocate, re-cleanse, and stick within a minute. To make the location of the vein quicker the second time, take note of certain landmarks on the skin the first time (freckles, skin creases, hairlines, skin contours, etc.) so that when the tourniquet is applied the second time you have guideposts. Some collectors make minor indentations on the skin above a palpated vein with a ballpoint pen (cartridge retracted) when the vein is initially located (e.g., blood donor centers). Just don't take to marking the skin with ink; it's unprofessional.

Alcohol should be allowed to dry, not physically removed to expedite the draw. It's a volatile solution, so it shouldn't take more than 15 seconds to dry. You can fill that time with other preparations, so the drying phase shouldn't slow down the procedure. After the vein is located, cleanse the site. While the alcohol dries, select and assemble the needle device, apply gloves, and perform the puncture. There should be no need to remove the alcohol with gauze. By the time you've assembled your supplies and donned your gloves, it's probably dry. Besides, the drying action of alcohol kills some bacteria.

If you're teaching new students, they're less likely to move from one step to the next as quickly as you might. So they will almost always have to find the vein, release the tourniquet, assemble equipment, cleanse the site, reapply the tourniquet, anchor the vein, and insert the needle.