Top Tips for successful blood collection

Pre-collection

- Use of straight needles is preferred.
- A butterfly wingset may be used in difficult to bleed patients.
- Note that the collection of blood specimens through i.v. cannulae is associated with increased rates of haemolysis.

Patient identification

- Obtain minimum patient ID - Name and date of birth using open questions.
- Check details against printed EPR barcode labels.

Infection control

- Use Aseptic Non-Touch Technique
- Single use tourniquet and blood collection tube holder.

Collection tubes

- Observing the correct order of draw will help prevent effects of contamination.
- Mix by gentle inversion once after each tube, then together at the end of the procedure.
- Refer to tube guide on the intranet.

Collection technique

- Use the correct fill volume - this is vital for citrate tube. Collect a discard tube if filling a citrate tube first when using a butterfly. This allows for the air space in the butterfly tubing to be filled with blood rather than being transferred to the tube.
- Do not leave the tourniquet on for an excessive length of time, as this can cause patient discomfort and compromise sample quality.

Safety

- Cover needle using the device’s safety mechanism.
- Immediately dispose of needles in an appropriate sharps bin.

Labelling

- Blood tubes must be labelled at the patient’s side, immediately following venepuncture. Do not leave the patient’s side to label the tubes.
- Tubes must be labelled with barcodes in the correct position/orientation.

Further info available online: https://www.ouh.nhs.uk/biochemistry
For queries, please contact the laboratory: clinicalbiochemistry.advice.ouh@nhs.net