SUBJECT: OBTAINING BLOOD BY VENIPUNCTURE

Policy No.: C121
Effective Date: 8/2002

Purpose of the Procedure: To obtain venous blood samples to analyze blood component levels that provide useful information in diagnosing, treating, and evaluating patients.

Performed by: RNs, LVNs with IV certification, Affiliating Nursing Students in an RN Program under the supervision of an RN

Physician Order: Yes

Equipment:

Alcohol pads
Chlorhexidine* (*for blood cultures see *Nursing Policy C301 Culture: Blood*)
Biohazard Plastic Bag
Gloves
Specimen Label(s)
Butterfly & Vacutainer Holder
Tourniquet
Tape
Blood collection tube(s)
2 x 2 gauze
Sharps containers

Policy Statements:

1. Unless there is a specific physician's order, blood is not to be drawn from a lower extremity or an extremity which contains a:
    a. Venous or arterial access port
    b. Dialysis shunt
    c. Post Mastectomy
2. Paralyzed or immobile extremities should only be used as a last resort if no other site is available.

Procedural Steps:

1. Verify physician's order.
2. Gather supplies and check tubes for breakage, turbidity, and expiration date.
3. Scan the patient's wristband and print the specimen labels.
4. Compare specimen labels in the presence of the patient by using two patient identifiers (patient's name, MRUN, or date of birth).
5. Inform the patient and family that you are going to collect a blood sample and explain the procedure.
   KEY POINT: Informing the patient helps ease anxiety and improves cooperation.
6. Perform hand hygiene and don gloves.
7. Instruct the patient to extend his/her arm.
8. Apply the tourniquet about 2 inches (5 cm) above the selected venipuncture site with sufficient pressure to prevent venous return.
   KEY POINT: Limit tourniquet time to less than 1 minute.
9. Inspect the area to visualize the vein and palpate, if possible.

10. Clean the selected venipuncture site thoroughly with alcohol or Chlorhexidine and allow skin to dry.
    KEY POINT: Chlorhexidine requires 30 seconds drying time. **If drawing a blood culture, refer to *Nursing Policy C301 Culture: Blood).***
11. With your non-dominant hand, stabilize the vein by pressing 1" to 2" (2.5 to 5 cm) below the venipuncture site, with your thumb and drawing the skin taut.
12. With your dominant hand, hold the butterfly needle device between the thumb and index finger with the bevel up and directly in line with the vein. Insert the needle at a 30-degree angle quickly and smoothly under the skin and into the vein.
    KEY POINT: Recommended, no more than two attempts per clinician.
13. Obtain blood sample by connecting the vacutainer to the blood collection port. Use proper tube collection sequence to avoid contamination.
    KEY POINT: The following is the recommended sequence (*Rancho's Los Amigos Pathology and Clinical Laboratory Receiving and Phlebotomy Procedure Manual*, 2021):
    a. Blood Cultures
    b. Blue Top
    c. Red Top
    d. Gold SST Barrier
    e. Green Top, plain or SST
    f. Lavender Top
    g. Gray Top
14. Release tourniquet as soon as blood appears in the tube to prevent stasis and hemoconcentration, which can impair test results.
15. Gently invert each tube and then return to it to an upright position to help mix the additive with the sample.
    Apply a 2 x 2 gauze pad over the puncture site then slowly remove the needle and gently apply pressure.
17. Activate the safety device immediately once the needle is removed.
18. Secure the gauze firmly with tape or have the patient apply gentle but firm pressure to the site for 2 to 3 minutes (or until the bleeding stops).
    KEY POINT: Firm pressure prevents leakage of blood into surrounding tissues that can cause a hematoma.
19. Dispose of used needle in the sharps container.
20. Label specimen containers in the presence of the patient. Write the date, time of collection and the employee number of the individual drawing the blood on each label.
21. Scan the specimen label(s) and click 'Sign' to complete the task.
22. Place specimen(s) in a biohazard bag(s)
23. Send to laboratory immediately for optimum reliability.
24. Remove and discard gloves.
25. Perform hand hygiene.
26. Document procedure.

Patient/Family Education

1. Explain the reason and rationale for blood test

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References:

Lippincott Procedures. (2023). Lippincott procedures – venipuncture.

Perry, A.G., Potter, P.A., Ostendorf, W.R., & Laplante, N. (2021). *Clinical Nursing Skills and Techniques* (10th ed.). St. Louis, MO: Elsevier Mosby

Rancho Los Amigos Pathology and Clinical Laboratory Receiving and Phlebotomy Procedure Manual (2021). *Specimen Collection, Chapter 210*.

08/02 – New	03/07 – Revised	07/11 – Revised	09/17 – Revised	08/20 - Revised
04/05 – Revised	04/08 – Revised	11/14 – Revised	04/19 – Revised	11/23 - Revsed