

Phlebotomy NHA Study Notes

2019

- Once **blood flow** has been **established**, have the patient **relax fist** when drawing blood using a syringe.
- You can **discuss patient information** with another **co-worker who is assisting** you with the care of a patient **without violating any HIPAA laws**.
- A **blood culture** would be drawn on a patient with a **fever of unknown origin**.
- Always **protect a bilirubin specimen from light**.
- If you must **label a tube without a computer label**, always make sure the **hand-writing is legible**.
- A patient should always be **fasting** for any cholesterol or **lipid panel test**.
- You should consider the **patient's age** when determining whether to do a **capillary puncture**.
- You should **hold the wings** of the **butterfly needle**.
- Always look at the **employee use log** to determine the **quality of equipment**.
- A **seminal (semen) sample** should be **transported** to the laboratory **quickly**.
- **Hard or cord-like veins** are considered **sclerosed**.
- **Patient ID code** can be used to **ID a patient** who is part of a **research setting**.
- If a patient has had a **double mastectomy**, you should draw blood from the most **distal vein in either arm**.
- Always **apply gauze** and the **needle safety device** as soon as you **remove the needle from the patient**.
- A patient's **gender** is an important piece of information that **should always be listed** on the **requisition form**.
- **Thrombin** promotes **clot formation**.
- If a patient is required to **fast**, then the fast should be at least **8-12 hours**
- A **green tube** is used for **STAT chemistry tests**.

- An **evacuated tube system** allows for **multiple tube exchange** so that more than one test can be drawn at the same time.
- A **liver profile** or panel should be drawn in a **gold/tiger top tube**.
- A **sputum sample** is done by having the patient take a deep breath and then cough (expectorate).
- **Patient ID errors** occur the **most often**.
- A **heel stick** should be no deeper than **2.0 mm**
- You should **never freeze whole blood specimens**.
- A **lactic acid** test should be **chilled** if the test is being **done in-house**.
- A **lactic acid** test should be centrifuged and the **plasma** should be **frozen** for **transport** to an **outside laboratory**.
- If you are drawing **blood** and the **flow stops**, then perhaps you have gone further **through the vein**. Pull back slightly and blood flow should resume.
- Any **needles** or **medical slides** go into a **red sharps container** or **puncture resistant container**.
- You should always **explain** to the patient to **clean their genital area** when they are providing a urine sample for a **urine culture**.
- **Never confirm a patient's identity** by asking them their name. Always have them state their name to you.
- A **BP cuff** (blood pressure) can be used on an **obese patient** or a patient with large arms instead of using a tourniquet.
- **Chlorohexidine** (betadine) should be used to **clean** the area for venipuncture when performing a **blood culture test**.
- You can cause **hemolysis** if the **tube is under filled**.
- **Chlorhexidine** (betadine) is used to draw a **(BAC) Blood Alcohol Concentration**.
- **EDTA tubes** are always the **first tube** collected when performing a **capillary collection**.
- **Osteochondritis** can result in **puncturing an infant's bone** during a **heel stick**.

- A new born screening (PKU) card should be in a **horizontal** (not vertical) position and allow to **dry**. The most important thing to do when performing a new born screening is to wipe off the first drop of blood.
- **Improper cleaning technique** when drawing blood for a **blood culture** can result in the sample being **contaminated**.
- Any **CLIA-waived test** poses **little risk** to the patient if performed properly.
- Other than the patient's name, their **date of birth** is critical when **labeling** a laboratory specimen.
- **Never draw blood above an IV site**.
- You can draw above a site of a **bruise**.
- Always do quality Control (QC) on **all glucose monitors** no matter where they come from.
- The **yellow tube** is always **first** in the order of draw.
- You cannot draw blood for a **blood culture** or **coagulation study** with a **capillary puncture**.
- The **time of day** would affect the test results of a **cortisol test**.
- The **cephalic vein** is the **easiest vein to palpate** for an **obese patient**.
- Always place the **lancet across the fingerprint** when doing a **finger stick**.
- **Never use the pinky finger, index finger (pointer), or thumb** to do a **finger stick**.
- If a patient comes to your lab with a requisition form, you should say hello using the patient's last name and tell them this won't take long.
- The patient's **gender** is **not necessary** on the patient's **label**.
- **Invert a tube 5-8 times** and then allow it to **clot at least 30 minutes** before spinning.
- The **laboratory person** who tested the specimen normally provide the **results** to the **provider**.
- An **ammonia test** is drawn in a **green top tube** and placed on **ice**.
- If you **touch someone without their permission**, it is considered **battery**.

- If you **threaten** someone you are committing **assault**.
- Collect a **sputum sample** early in the **morning** for best results.
- If a patient has had a **mastectomy** on one side, then go to the **other arms antecubital**.
- The **antecubital** area is the area we **mostly draw blood** from.
- **Disinfect** any **blood spills** on the counter or floor with a **bleach** solution of **1:10**.
- Wear a gown before entering a patient's room and remove it before leaving if they are on contact precautions.
- Always use a **blood transfer device** when using a **syringe to draw blood**.
- **Palpating** with a **tourniquet** is the best way to **find a vein**.
- If a patient starts to **swell** near the site you are **drawing blood** from, then you should **stop** because a **hematoma** (bruise) is **forming**.
- Use a **figure eight** motion to **invert tubes**.
- Always have the most **skilled phlebotomist** draw the blood on a **patient** who has an **immense fear of needles**.
- A **blood smear** on a **slide** should look like the **edge of a feather**.
- **CPR** is used on someone who has **no pulse**.
- A comprehensive metabolic panel (**CMP**) is collected in a **gold/tiger top tube**.
- The **median cubital** is the **most common** choice for **venipuncture**.
- A **vitamin B6** specimen is placed on **ice**.
- **Syncope** is another word for **fainting**.
- You can cause the blood sample to **hemolyzed** (hemolysis) if you **squeeze the finger too hard** during the collection.
- **After identifying the patient** always **check the requisition orders**.
- **Clean** a venipuncture site in a **circular outward** movement.

- If a **chemical spill** has occurred in your lab, **consult** the Material Safety Data Sheets (MSDS) for how to handle this hazard.
- Use a **23-gauge needle** on **smaller veins**, such as children or the elderly.
- A **lactic acid** test should be placed on **ice**.
- A PKU (new born screening) test requires **filter paper** with circles on it. These circles should be **filled completely** without going over the border.
- Make sure you tell the patient to **urinate first** before **collecting a stool sample**.
- **Reagent strips** are used to perform a multitude of test on **urine**.
- **Invert tubes** containing **EDTA 8-10 times**.
- Be mindful when delivering **printed laboratory results** to a provider. Keep in mind that you could violate **HIPAA** if they are seen by an **unintentional party**.
- The angle for **venipuncture** is at a **30-degree angle**. If it is **any higher** then you could possibly go **through the vein**.
- The **medial or lateral areas** of an **infant's heel** is the preferred site for a **heel stick**.
- A PKU (new born screening) is **performed** on an **infant's heel**.
- A **hematoma** (bruise) can be caused if you **remove the needle** from the patient's arm **before removing the tourniquet**.
- An **ESR** (erythrocyte sedimentation rate) is checking for inflammation and is collected in a **lavender/purple top tube**.
- If a **tube has lost vacuum**, try another tube. The tube could be **past its expiration**.
- Use **sodium hypochlorite** (bleach) to **clean up any blood spills**.
- A **16 gauge needle** used for **blood donations**.
- A **chain of custody** form must accompany a **toxicology or drug screen**.
- If a patient is on an **anticoagulant medication** such as **Coumadin, Warfarin, or aspirin**, a **PT/INR** test is **drawn** to check how well it's doing.
- Simply a **nod or gesture** can be considered **implied consent** with no form signed.

- A computer or **automated order** is the **most accurate order**.
- Always **label a specimen** after collection **before leaving a patient's room**.
- **Shaking a tube can cause hemolysis**.
- If you **threaten a patient with restraints** you can be liable for assault.
- The **order of draw** for venipuncture, capillary and syringe must be followed to **avoid cross contamination or carry over**.
- **DO not draw more than 10%** of a patient's volume of **blood**.
- Use a **15-20 angle** to perform a venipuncture on a hand using a **butterfly needle** (winged infusion set). Nearly **parallel** to the **hand**.
- If a **patient is unconscious** and no one know who they are. **Label** the blood tube with a special **temporary number** the hospital has provided.
- Handwashing is paramount in preventing the spread of infection. However, **identifying a patient** is the **most important step** in the venipuncture procedure.
- A **PKU** (new born screen) test filter paper should be completely **dry** before it can be properly tested.
- **Clostridium Difficile (C-Diff)** can infect another person through **contact exposure**.
- **Lactic acid test** and Arterial Blood Gasses (ABG) should be **delivered on ice**.
- A patient should be **fasting** for any **cholesterol, triglyceride, or lipid panel test**. Fasting is usually between **8-12 hours**.
- The **order of draw** should be adhered to, to **avoid cross-contamination**.
- To **increase the flow of blood** when performing a **capillary puncture**, you can **warm up the site**.
- Tie the **tourniquet** about **3-4 inches** above the **venipuncture site**.
- If the **tourniquet** is tied **too tight**, you can cause **petechiae**.

<u>TUBE COLOR</u>	<u>ADDITIVE</u>	<u>SAMPLE TYPE</u>	<u>DEPARTMENT</u>
YELLOW	SPS	PLASMA/WHOLE	MICRO
LIGHT BLUE S	ODIUM CITRATE	PLASMA	COAGS
RED	NOTHING	SERUM	CHEMISTRY
GOLD (SST)	NOTHING	SERUM	CHEMISTRY
LIGHT GREEN(PST)	LITHIUM HEPARIN	PLASMA	CHEMISTRY
DARK GREEN	SODIUM HEPARIN	PLASMA	CHEMISTRY
LAVENDER	EDTA	WHOLE	HEMATOLOGY
GRAY	POTASSIUM OXOLATE And SODIUM FLOURIDE	PLASMA/WHOLE	CHEMISTRY

LABORATORY TESTS

YELLOW	CULTURES (BLOOD, URINE)
LIGHT BLUE	CLOTTING and FORMING CLOTS (PT/INR, PTT)
RED	CHEMISTRY TESTS
GOLD/TIGER TOP (SST)	CHEMISTRY TEST (SERUM SEPERATOR TUBE)
LIGHT GREEN (PST)	STAT CHEMISTRY (PLASMA SEPERATOR TUBE)
DARK GREEN	CHEMISTRY TESTS
PURPLE/LAVENDER	COMPLETE BLOOD COUNT (CBC) ERTHROCYTE SEDIMENTATION RATE (ESR) HBA1C
GRAY	GLUCOSE
ROYAL BLUE	TOXICOLGY, POISONS, DRUGS, HEAVY LEADS RED LABEL – CHEMISTRY GREEN LABEL – CHEMISTRY PURPLE/LAVENDER LABEL – HEMATOLOGY