Center for Phlebotomy Education's

Tip of the Month

Ten Tips for Halting Hematomas

You've seen it: tissue that swells around the venipuncture site as blood pools beneath the patient's skin. When a hematoma forms, not only is the bruising unsightly, but a bruised site is unsuitable for future blood draws. Moreover, complications from pressure placed on neighboring nerves by a hematoma can lead to permanent injury to the patient. So, how can we halt hematomas before they occur, or at least stop them in their tracks when they develop? Consider the helpful hints listed below:

1. *Select the vein carefully.* When surveying the antecubital area, give preference to the median veins. Doing so reduces the risk for accidental arterial puncture.
2. *Choose the right equipment.* When the needle selected is too large for the vein or the vacuum applied to the vein is too great, a hematoma can result.
3. *Properly position the needle within the vein.* Make sure the needle fully penetrates the uppermost wall of the vein, as partial penetration or inserting the needle completely through the vein may allow blood to ooze into surrounding tissues.
4. *Keep the needle stationary during tube exchanges.* Stabilize the needle during tube transfers and you minimize the risk of blood escaping from around the needle during collection.
5. *If a hematoma rapidly forms, terminate the draw immediately.* Collectors should give priority to minimizing hematoma formation over collecting the specimen. End the draw early when necessary.
6. *Release the tourniquet before removing the needle.* And the sooner you release the tourniquet, the better. If you can release the tourniquet after blood flow is established without compromising the draw, you reduce pressure to the vein and the risk of hematoma formation.
7. *Ensure adequate pressure is applied.* Bending the patient's arm up is not an acceptable means of holding pressure to a puncture site. But what about patients who offer to assist? Observe the nail beds of the patient's fingers to determine if the direct pressure applied is sufficient. Nail beds that blanch to whiteness because of the pressure being applied mean the patient is doing it right.
8. *Don't use cotton balls to apply pressure.* When cotton is lifted from the site, fibers that may have become embedded in the fragile platelet plug can pull the plug from the puncture, reopening the wound.
9. *Don't substitute a pressure bandage for direct pressure.* Don't ask a bandage to do a healthcare professional's job. It's the collector's responsibility to visually verify that bleeding has ceased at the skin's surface and that the vein has sealed prior to bandaging the site.
10. *Provide post-venipuncture instructions.* Once bleeding has ceased and the bandage is applied, instruct patients to leave the bandage on for at least 15 minutes. Outpatients should also be cautioned to avoid lifting heavy objects, such as groceries or large purses, with the affected limb.