

Tip of the Month



Five Truths About Post- venipuncture Care

You've just successfully drawn a hard stick and are at the top of your game. With the needle removed, the safety feature activated and the assembly properly discarded, you're on easy street. Or, are you? When it comes to post-venipuncture care, *it ain't over 'til it's over* is a famous line that applies to every phlebotomy procedure. Part of that procedure includes giving appropriate attention to the puncture you've just created in your patient. To see how you rate, take the True/False quiz below:

1. Gauze is recommended over cotton balls for applying pressure to the puncture site.

True. Because fibers from cotton balls can become imbedded at the puncture site and subsequently dislodge the platelet plug when removed, the Clinical and Laboratory Standards Institute (CLSI) states that pressure should be applied using a clean gauze pad.

2. Pressure may be applied to the puncture site by having the patient bend his/her arm up at the elbow.

False. This method does not ensure that pressure sufficient to prevent hematoma formation is applied to the puncture site. Instead, direct pressure should be held until bleeding has ceased. Cooperative patients may assist with this step, but only under the constant supervision of the collector.

3. Once the venipuncture is complete, the risk of a patient fainting has passed.

False. Patients are at risk for syncope during and for several moments after a venipuncture. Collectors should continuously monitor their patients for adverse reactions while under their care. Should a patient pass out, the use of ammonia inhalants is not recommended.

4. Applying a pressure bandage is an acceptable alternative to holding direct pressure to the puncture site.

False. CLSI states that the phlebotomist should watch for excessive bleeding. This requires visually inspecting the surrounding tissue for mounding or swelling--a sign of hematoma formation-- and for bleeding at the skin's surface. Only after a patient passes this two-point check should a bandage be applied.

5. Patients can experience permanent and disabling nerve injuries even after the needle has been removed.

True. Compression nerve injuries can occur when a hematoma forms and exerts pressure on delicate nerves. The complications of such injury may include loss of mobility in the arm and/or grip strength, and long-term pain.

The quality of the post-venipuncture care you provide can be a game changer for you and your patient. By making adherence to the standards your strategy, you'll both come out winners time and time again.