

# Tip of the Month



## Trick or Treat

**B**lood specimen collection can be tricky. Perform it incorrectly and you can trick physicians into mismanaging their patients when they base medical decisions on inaccurate test results. Here's how:

**Trick:** *Not properly identifying the patient.* Failing to draw the right sample on the right patient creates a string of bad luck that can have disastrous consequences for everyone involved. Instead, treat patients as if they were a member of your own family by taking the time to properly verify their name and information, comparing it to the test order. You'd do it for your *Mummy*.

**Trick:** *Not drawing timed specimens on time.* Physicians can be *haunted* by test results that are time-dependent, but are not drawn according to proper dosing or requested timed intervals. You can remove the *spirit* of confusion in such situations by always adhering to the collection schedule for timed draws.

**Trick:** *Not assuring the patient has met test requirements (i.e., fasting) prior to the draw.* Samples obtained from patients who do not meet test specifications can produce results that mislead physicians by masking the patient's true medical status. To avoid this *scary* scenario, ensure every patient is properly instructed and prepared before you collect.

**Trick:** *Inducing hemoconcentration through prolonged tourniquet application.* When a tourniquet is left in place beyond one minute, hemoconcentration occurs creating a mixed bag of analytes very different from the patient's actual physiology. If locating a vein is difficult and requires the tourniquet to remain in place for longer than a minute, make a mental note of the vein's location and then loosen the tourniquet for a *spell* to allow the hemoconcentration to *magically* disperse. Then reapply and perform the draw.

**Trick:** *Improperly cleansing the site prior to the draw (i.e., blood cultures and blood alcohol).* When proper site preparation falls by the wayside, you open the door for the *Boogieman*. He can appear in the form of contaminated blood cultures that mislead the physician or the lawyer who can have a legal blood alcohol result tossed out of court.

**Trick:** *Failure to follow the order of draw.* Additive carryover can create invisible errors with *ghastly* outcomes when additive tubes are drawn out of the prescribed sequence. To spare your patients and not *spook* your doctors, stick to CLSI's recommended order of draw for both venipunctures and capillary collections.

**Trick:** *Not properly labeling the sample at the patient's side.* Being in a hurry or working with a *skeleton* crew is no excuse for not taking the time to label the samples you collect at the time of collection. Where feasible, it's a good idea to have the patient verify the information on the labeled tube is theirs.

**Trick:** *Delayed transport of samples collected.* Irrevocable changes occur when samples are not transported and processed in a timely manner. Such compromised samples should be rejected and disposed of by the laboratory, where they can *rest in peace*.

**Treat** all your patients to the proper protocol when drawing and handling their blood samples. Hospitals and other health-care facilities can be a scary place. The trick to putting patients at ease is to make sure your procedure isn't *masquerading* as something it isn't.