

Tip of the Month

Bug Bombs

Would you take your phlebotomy tray home, set it on your dinner table for a while, remove it, and then serve your family dinner on the same table? Of course not. Then why would you place a phlebotomy tray on a patient's bedside tray, the equivalent of their dinner table?

Think about the surfaces that the bottom of your phlebotomy tray comes in contact with during the course of a day: the floor, wastebaskets, countertops where blood is processed and where other trays sit, etc. Imagine the banquet of germs it picks up in just several hours of regular use and distributes from surface to surface, germs that put patients—already sick, injured, or unable to fight infection—at risk of getting sicker. Multiply that by the number of days since you decontaminated your tray. For some this could be weeks; for others, generations.

Besides eating upon, patients use their bedside trays for placing dentures, hearing aids, eyeglasses, combs, straws, toothbrushes, arms and elbows—all of which are capable of delivering to them whatever bacteria, fungi or viruses have been deposited on its surface. Making sure your phlebotomy tray rests elsewhere goes a long way towards minimizing the types and quantities of infectious microorganisms to which a patient is exposed.

Instead of using the bedside table, place your phlebotomy tray on a surface that neither the patient nor his/her personal items are likely to come in direct contact with. Avoid the temptation to place the tray directly on the patient's bed. Not only does it introduce strange, and potentially deadly bedfellows, it may be inadvertently kicked onto the floor by sudden movements. If the bedside tray is too convenient to avoid as a resting place for your tray, place a clean, disposable barrier between its surface and the tray, then discard the barrier and disinfect the patient-contact surface before you leave the room. Regardless of where you routinely set your tray, you should disinfect it top to bottom regularly.

Hospitals are places where patients are supposed to get well. We draw blood specimens so that we can contribute to the healing process. Delivering potential pathogens from one patient's dinner table to another's defeats the purpose.

Placing your phlebotomy tray on a patient's bedside tray is like dropping a bug bomb on their dinner table.