



## *Pathology and Laboratory Medicine Memorandum*

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**To:** Physicians, Nurse Practitioners, Health Service Managers, Clinical Nurse Educators, NS Laboratory Directors, NS Laboratory Managers, Independent Phlebotomists, Long-term Care

**From:** Program of Pathology and Laboratory Medicine (PLM) and Inter-Professional Practice & Learning (IPPL)

**Date:** August 16, 2021

**Subject:** Provincial Venipuncture Policy & Procedure Implementation

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Effective September 20, 2021, the provincial policy and procedure document *Venipuncture for Blood Specimen Collection* (NSHA CL-BP-040) will be implemented.

An implementation team, including PLM and IPPL representatives from across the province, is working to ensure all required equipment, materials, and education will be available and distributed to NSH staff performing blood collection prior to September 20.

The new policy & procedure is available for review here: [NSHA CL-BP-040 Venipuncture for Blood Specimen Collection](#).

Key changes include:

- New anatomical sites where venipuncture is not to be performed,
  - Adjustments to anatomical sites that require physician approval,
- Clearly defined maximum number of venipuncture attempts,
- Emphasis on specimen integrity, patient safety, and infection control,
- Harmonization of equipment used provincially.

A set of fact sheets has been prepared regarding key changes, and accompanies this memo.

Upon implementation September 20, all NSH staff must follow this policy and procedure when collecting blood by venipuncture. Independent phlebotomists and long-term care facilities with Agreements for Specimen Acceptance must also adhere to this document, as per those Agreements.

If you have any questions, please contact Josh MacDonald, Provincial Client & Support Services Program Manager, at [josh.macdonald@nshealth.ca](mailto:josh.macdonald@nshealth.ca).



## FACT SHEET #1

### **Nova Scotia Health Venipuncture for Blood Specimen Collection Policy Highlights**

#### **1. Competency Requirements:**

**Old:** Phlebotomy was considered a Post Entry Level Practice

**New:** Now considered an Entry Level practice for RNs and LPNs. Assessment of Competency Requirements below:

##### **Initial Competency**

Prior to performing venipuncture for blood specimen collection:

- ✓ Review Venipuncture for Blood Specimen Collection Policy and Procedure
- ✓ Review Learning Module
- ✓ Successfully complete Learning Module post test
- ✓ Successfully demonstrate competency to perform venipuncture (complete proficiency skills checklist). Must be witnessed by **qualified preceptor**

**Note: # of venipunctures for competency will be determined by departments.**

##### **Annual Competency**

- ✓ Complete self-assessment based on review of policy & procedure
- ✓ Document review has been completed
- ✓ Where applicable, complete department-specific annual requirements

#### **2. Roles and Responsibilities:**

**New:** A documented order from an Authorized Prescriber/Requestor is required.

**New:** Authorization for both Inpatients and Outpatients must be obtained & documented (on Physician's Authority to Draw under Special Circumstances form) for:

- Drawing from an extremity with inactive fistula
- Drawing from feet (Lab staff only – Nurses don't require a form to draw from a foot)

#### **3. Collection/Consent:**

**Reminder:** Phlebotomist must make **no more than 2 venipuncture attempts** per order on a patient

**New:** Second phlebotomist may attempt collection **but must obtain consent** from patient or SDM before proceeding.

**New:** Consent must be obtained from the patient or Substitute Decision Maker prior to performing venipuncture.

**New:** Inpatient/Emergency Departments: After 2 phlebotomists are unsuccessful, Physician to determine if urgency requires more draws.

**New:** Outpatient setting: consent must be obtained from patient before performing another attempt

## FACT SHEET # 2

### ***Nova Scotia Health Venipuncture for Blood Specimen Collection Policy Highlights “Equipment/Order of Draw/Pediatric Guidelines”***

#### **Reminders**

1. Gloves **must** be used during the collection procedure
2. Safety-engineered needles must be used (size and type determined by patient’s age, size, condition and venipuncture site)
3. Equipment that collects patient’s blood directly into the specimen container must be used.
  - BD Vacutainer® Eclipse™ Blood Collection Needles (21G and 22G) or
  - BD Vacutainer® Winged Blood Collection Sets (21G, 23G and 25G). Must be push-button type.



4. If blood specimen obtained by syringe, must use blood transfer device



5. Tourniquet must be single-use only.
6. BD Vacutainer holders must be single-use only.
  - No multi-use holders
  - Must be discarded after each use
  - Discard with the attached needle (or transfer device) as a single unit



**New:** A Blood pressure cuff inflated below the patient’s diastolic pressure may be used in place of a tourniquet



**New:** Blood collection order of draw updated (refer to Appendix “B” in policy for details)

**New:** Discard tube now **clear top**

**New:** Except for patients under age of 19 years, discard tube **must be drawn & disposed of** prior to collection of Blood Cultures

**New:** When using a winged collection set, a discard tube **must be drawn first** prior to any Sodium Citrate tubes (light blue/light blue clear top collection tube)

**New:** Non-Pediatric Blood Culture Map available (refer to Appendix “D” in policy for details)

### **Pediatric Population**

**New:** Blood culture Bottle Selection Pathway for Pediatric Patients available (refer to Appendix “I” in policy for details)

**New:** Maximum Total Pediatric Blood Collection Table available - (refer to Appendix “G” in policy for details).

**Determined by:**

- **Body weight (kg)**
- **Maximum allowable volume (ml) in one draw**
- **Maximum total volume (ml) draw every 30 days**
- **Minimum Hgb (70) required at time of draw**
- **Minimum required at time of blood draw if patient has Cardiovascular/Respiratory compromise**

### **Cleaning Agents**

**New:** Venipuncture Site Collection Cleansers (refer to Appendix “H” in policy for details)

- Routine (no blood alcohol testing) – 70% Isopropanol
- Blood Culture – 2% chlorhexidine gluconate with 70% isopropanol
- Blood alcohol – 10% povidone iodine
- Neonatal patient <34 weeks – 2% chlorhexidine gluconate **aqueous solution**
- Neonatal patient ≥34 weeks – 2% chlorhexidine gluconate with 70% isopropanol
- Allergy to topical alcohol- strongest antiseptic solution patient can tolerate (consult Infection Control if required)



### FACT SHEET # 3

## ***Nova Scotia Health Venipuncture for Blood Specimen Collection Policy Highlights “Procedures”***

### Reminders

1. Sequence of collection must follow ***Blood Collection Order of Draw*** in the Policy (Appendix B)
2. Ensure Safety- engineered needles are used
3. Use latex free tourniquet (single patient use)
4. When labeling blood tubes, must be done in presence of patient (Appendix C)

### Procedure

**New** Equipment- ensure you use appropriate antiseptic prior to draw (see Appendix H for table with appropriate antiseptic agents to be used)

**New** Volume limits based on weight - For patients < 19 years of age, review patient weight and requested draw to ensure draw does not exceed acceptable limit, where applicable (see Appendix G).

**New** Collection from hands, feet or for Blood Cultures require use of ***winged blood collection*** sets

**New** Identification guidelines- table available on page 6 of policy with specific guidelines for patients with/without ID bands, ED/ inpatient departments and crossmatch

**New** Pain Management - specifically states to follow institutional guidelines to ensure pain management/distraction techniques are used. Examples and link in the policy

**New** Lists sites to avoid (tattooed sites, edematous sites, paralyzed extremities, site with presence of Hematoma, site with extensive scarring/burns)

**New** Use of blood pressure cuff - can be used instead of a tourniquet, must be inflated below patient’s Diastolic pressure, must be cleaned and disinfected between use

**Note: in Neonatal population, patient size may preclude use of a tourniquet**

**New** Venipuncture ***is not to be performed*** on scalps of newborns ***without physician authorization & special training***

**New** Blood Culture Draw- cleanse rubber top tubes and any discard tubes with **70% Isopropyl Alcohol**, allow to air dry