

Nursing Service Guidelines General

Title: GUIDELINES FOR PHLEBOTOMY IN THE ADULT PATIENT

Responsibility: Registered Nurse (RN)

<u>Purpose of Guidelines</u>: To safety perform phlebotomy procedure.

Procedure:

- 1. Obtain physician's order for the phlebotomy. Phlebotomy is performed as often as necessary to maintain a hematocrit of less than 45%.
- 2. Obtain phlebotomy bag and scale from Blood Bank.
- 3. Obtain baseline vital signs. Weight empty phlebotomy bag on scale and record.
- 4. Apply blood pressure cuff to patient's arm (or tourniquet).
- 5. Clamp the phlebotomy tubing with a hemostat near the phlebotomy needle.
- 6. Wash hands and apply non-sterile protective gloves.
- 7. Clean the venipuncture site with an alcohol prep pad or a ChloraPrep applicator. When using the ChloraPrep, remember to repeat back-and-forth strokes with the applicator for approximately 30 seconds. Completely wet the venipuncture site with antiseptic. Allow the area to air dry for approximately 30 seconds. Do not blot or wipe away.
- 8. Start the phlebotomy needle in the antecubital fossa and tape securely.
- 9. Unclamp the tubing.
- 10. Place the phlebotomy bag on the scale and drain until the scale reaches the desired amount drained plus the weight of the phlebotomy bag. The bag should be lower than the patient's arm. The usual amount ordered to be drained is 450 ml. 450 ml of blood usually drains in 10-15 minutes.
- 11. Assess for the following throughout the phlebotomy procedure: chest pain, tachycardia, hypotension, and c/o dizziness.
- 12. Deflate the blood pressure cuff or remove the tourniquet.
- 13. Clamp the tubing near the needle with a hemostat. Discontinue the needle and apply pressure. Instruct the patient to elevate his/her arm for at least five (5) minutes. Take vital signs.
- 14. Tie off or clamp the blood tubing near the bag. Dispose of the portion of tubing containing the needles in a sharp container. Double bag the blood and dispose in biohazardous waste.

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Approved:	1.10.17
Reviewed:	1/17, 1/23
Revised:	1/20
Reviewed by:	Nursing Service Policy & Standards Committee, 1/17,
	1/20, 1/23

References:

D'Onofrio, M., Testa, A., Varricchio, F., Paesano, L., Martinelli, V., Colella-Bisogno, R., Misso, S., Nocera, C., & Annarumma, F. (2014). Therapeutic erythrocytapheresis is more effective than conventional phlebotomy in patients with polycythemia vera. *Transfusion and Apheresis Science*, *50*, 13.