

**Steps**

**Action**

Identify patient



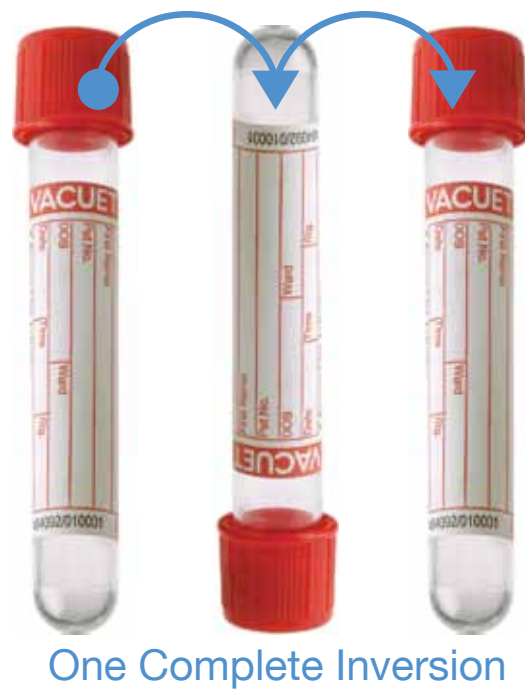
- A minimum of two identifiers must be used.
- Compare information to wristband and test requisition.
- Resolve any discrepancies.

Prevent short filled tubes  
(quantity not sufficient QNS)



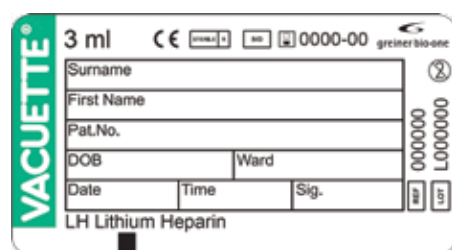
- Push tube forward so stopper is penetrated.
- Hold tube in place using thumb on back of tube.
- Keep tube in place until vacuum is exhausted.
- Use discard tube if winged collection set is used and coagulation tube is drawn first.

Prevent hemolysis



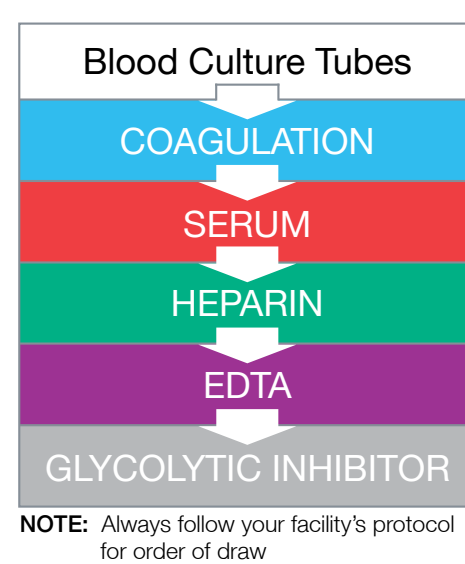
- Tourniquet should be released no later than 1 minute after application.
- Allow alcohol to dry for 15 – 20 seconds prior to vein puncture.
- Choose appropriate equipment for venipuncture based on circumstance of the draw.
- Mix tubes using recommended number of complete, gentle inversions.
- Avoid drawing from Vascular Access Devices (VAD). If a VAD must be used, withdraw and discard approximately 5cc of fluid prior to drawing the sample.
- Avoid excessive pulling force when using a syringe.

Prevent fibrin formation



- Fill tubes to level indicated on label.
- Mix tubes with appropriate number of gentle inversions immediately following collection.
- Allow serum tubes to sit 30 minutes prior to centrifugation.
- Centrifuge tubes according to manufacturer's recommendations.

Follow order of draw



- Tubes should be collected in the correct order of draw as documented by CLSI H3-A6 or according to facility protocol.

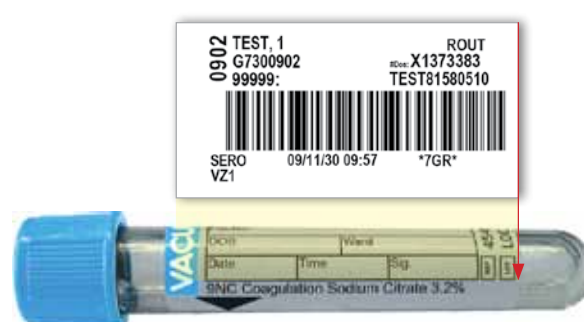
Syringe draw



- If blood is collected in a syringe, a transfer device should be used to move the blood into evacuated tubes to minimize needlestick risk.

Label tubes

Place secondary labels along bottom edge of tube label, but far enough to the right so that additive and fill level marks are clearly visible.



- Label tubes in presence of patient.
- Reverify patient identification.