

PROCEDURE FOR: Central Lines: Blood Drawing

- POLICY:
1. Aseptic technique must be utilized for all aspects of central line care.
  2. Appropriate hand washing immediately before accessing any central line is mandatory.
  3. RN/LPN is responsible for drawing venous blood samples from central lines/ports.
  4. When accessing a central line to obtain blood for a blood culture, chlorhexidine should be used.

EQUIPMENT: For Syringe Draw:  
Appropriate blood sample tubes  
1-10 or 12 ml syringe  
Alcohol swabs  
Chlorhexidine gluconate swab or pad if drawing blood for a blood culture  
Prefilled and labeled syringes with appropriate flush(s)  
Vacutainer blood transfer device  
Gloves

PROCEDURE:

- | <u>ACTION</u>   | <u>POINTS OF EMPHASIS</u>   |
|---|---|
| 1. Explain procedure to the patient.  |   |
| 2. Assess all medications and infusions before selecting a port for sampling.   |   |
| 3. Clamp the catheter and disconnect the infusion from the entering port that is being sampled.   | 3. Cap tubing that is disconnected using aseptic technique. If drawing from a multi-lumen central line, it is recommended to temporarily stop all other infusions until blood drawing has been completed.   |
| 4. Using vigorous friction for at least 15 seconds, prep the injection site with alcohol solution (use chlorhexidine if you are obtaining a blood culture). | 4. Chlorhexidine gluconate swab or pad <u>must</u> be used if accessing a central line for obtaining a blood culture. Alcohol or chlorhexidine swab or pad may be used for any central line general access. |
| 5. Let dry thoroughly.  |   |
| 6. Luerlock the syringe to the injection site, and unclamp the catheter.  | 6. Clamp Triple Lumen catheters with each syringe change.   |
| 7. Confirm if indwelling line contains heparin.   | 7. Many lines are not heparin flushed secondary to heparin induced thrombocytopenia potential with the frequency of blood draws and heparin flushes.  |

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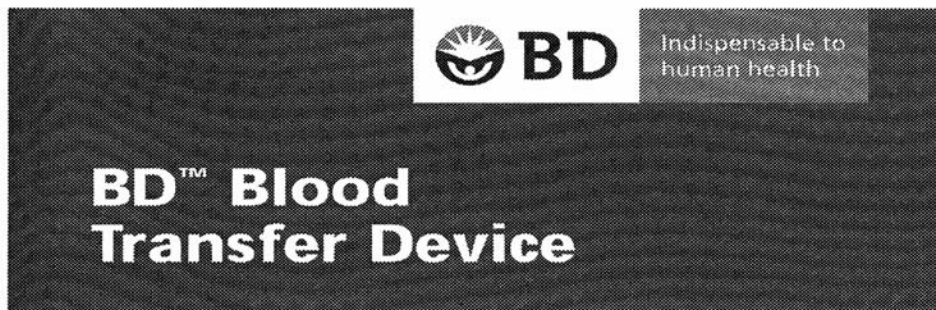
8. If obtaining specimens from an indwelling line that may contain heparin, using a 10 or 12ml syringe, first flush the line with 10ml of normal saline using a pulsatile push-stop-push-stop motion. Remove the syringe and clamp the catheter.
  9. Attach a new syringe, and withdraw the first 5ml of blood, or 6-times the line volume (dead space volume of the catheter), and discard.
  10. With a new syringe, withdraw volume of blood equal to the total amount of blood you need for all blood samples.
  11. Using a 10 or 12ml syringe, flush the catheter with normal saline using a pulsatile push-stop-push-stop motion.
  12. Reconnect the infusion. If no infusion, flush with heparin per procedure/protocol.
  13. Reinstigate all infusions that were shut off prior to blood draw.
8. As per the College of American Pathologists (CAP) guidelines.
    - a. A larger syringe size is associated with reduced pressure on the catheter and vessel.
    - b. If heparin is in the line it may affect lab results, contact the laboratory about having the specimen "Hepabsorbed". Be sure to write "Hepabsorbed" on the lab requisition.
  9. As per the College of American Pathologists (CAP) guidelines.
  10. If a blood culture is being obtained, use a separate syringe for the blood culture and a different syringe for the other labs. See Appendix A for guide to use of the needle-free blood transfer device equipment.
  11. Always withdraw before flushing to ensure that air bubbles will not be infused.
    - a. The pulsatile motion is used to create a turbulent flow and reduce the build-up of residue on the inner surface of the catheter.

APPROVAL: Nursing Standards Committee

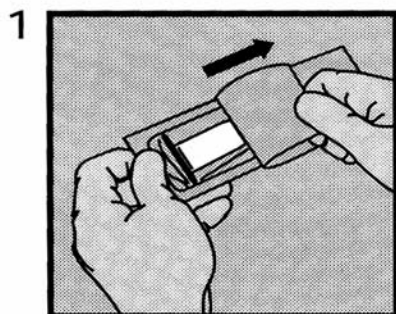
EFFECTIVE DATE: 4/86

REVISION DATES: 10/84, 3/86, 7/87, 11/88, 10/90, 7/93, 5/96, 10/97, 8/00, 10/02, 3/03, 10/05, 4/09

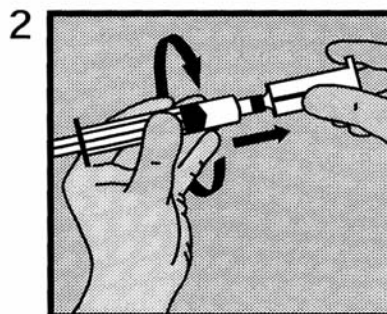
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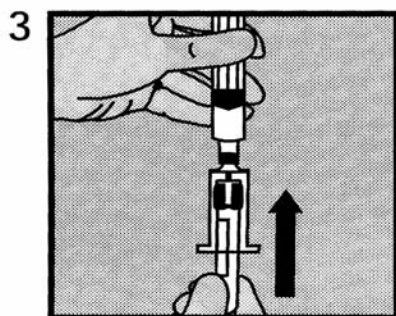
**QUICK REFERENCE CARD**



- Peel off paper backing



- Insert syringe tip into hub of device
- Rotate syringe clockwise to secure syringe to hub



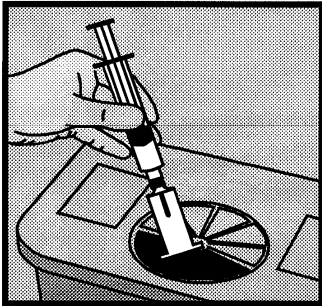
- With syringe tip held facing down, center BD Vacutainer™ Tube(s) or BD Bactec™ Blood Culture Bottle(s) and push forward into holder of Blood Transfer Device

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## BD™ Blood Transfer Device

### QUICK REFERENCE CARD

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- After removing the last BD Vacutainer™ Tube or BD Bactec™ Blood Culture Bottle, discard entire assembly (BD Blood Transfer Device and syringe) in an approved sharps collector in accordance with applicable regulations and institutional policy. Do not unthread syringe from the Blood Transfer Device prior to safe disposal in sharps collector

### Things to Remember:

- Handle all biologic samples and blood collection "sharps" (lancets, needles, Luer adapters and blood collection sets) according to the policies and procedures of your facility
- Obtain appropriate medical attention in the event of any exposure to biologic samples (for example, through a puncture injury) since they may transmit viral hepatitis, HIV (AIDS) or other infectious diseases
- Utilize any built-in needle protector if the blood collection device provides one
- BD does not recommend resheilding used needles, but the policies and procedures of your facility may differ and must always be followed
- Discard any blood collection "sharps" in biohazard containers approved for their disposal